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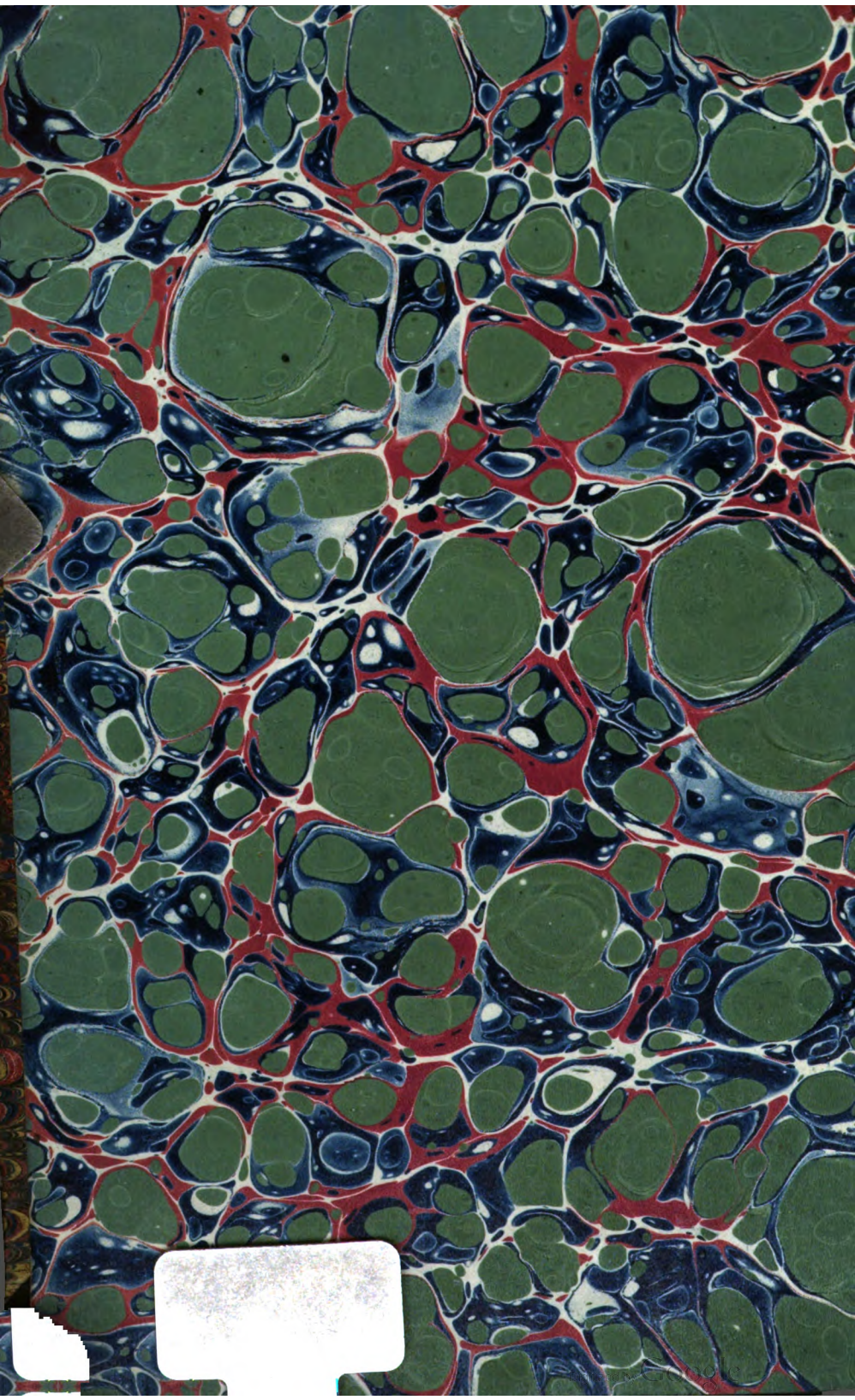

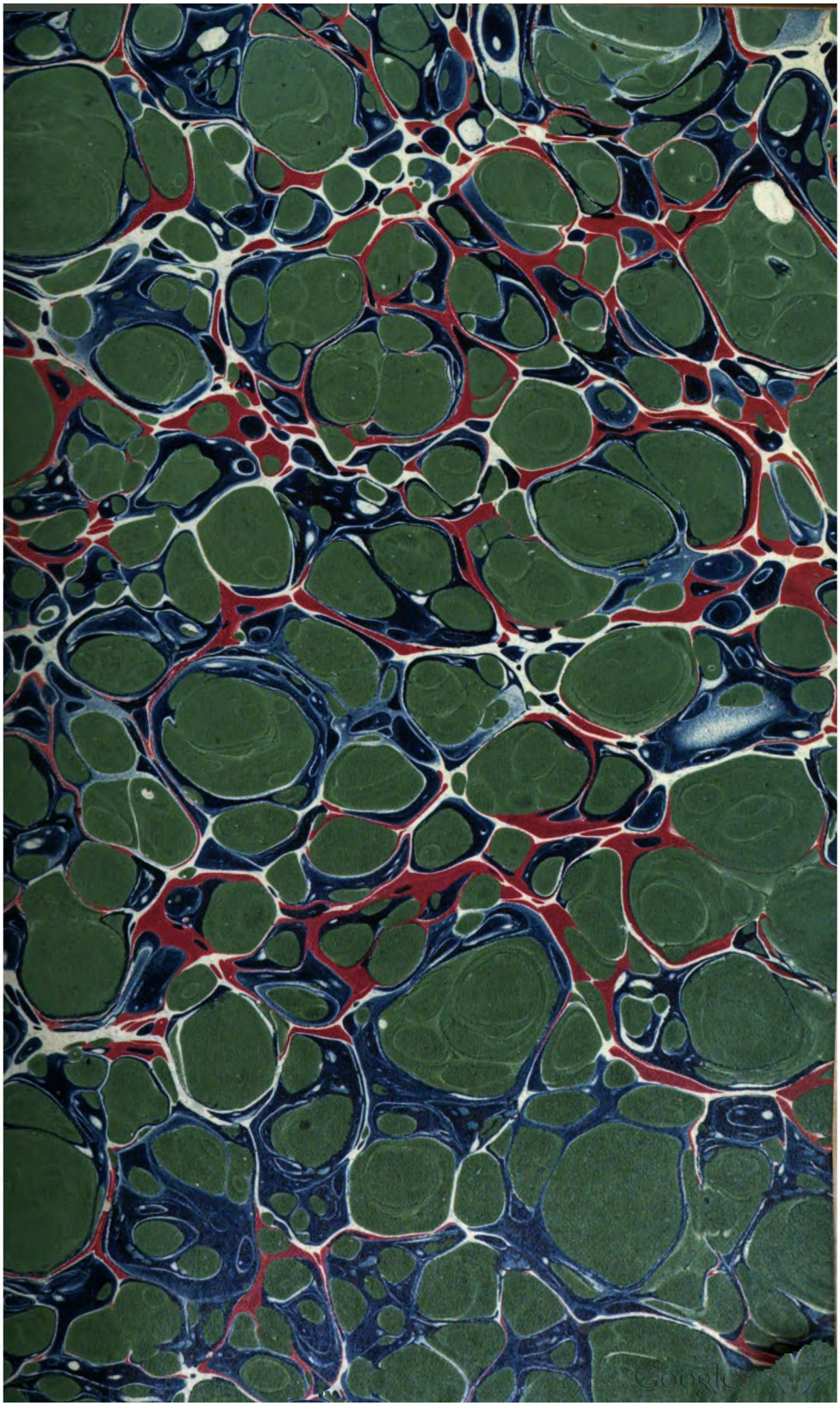
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THE

HOMŒOPATHIC EXAMINER,

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DRS. GRAY AND HEMPEL.

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NOTICES TO THE SUBSCRIBERS OF THE EXAMINER.

The undersigned begs leave to inform the readers of the Examiner, that the publication of this journal, by him, will hereafter be discontinued.

W. RADDE.

My professional avocations, an extensive correspondence, etc., and the publication of several large homœopathic works, among which is a Complete Repertory of the Materia Medica, occupy so much of my attention, that I have no time left for the toilsome and harassing business of editing a journal. Arrangements are, however, being made, and will soon be completed, to bring out a new journal worthy of our cause.

CHARLES J. HEMPEL.

NEW-YORK, *Dec.* 20, 1847.

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ERRATA.

Page 536, line 12, dele comma at the end of the line.
Page 537, line 6 from bottom, for '63 to 67½°,' read '95° to 100°.'
Page 539, line 7, dele semicolon, and read *Hebra's*.
Page 539, note †, read *Bull. gén. de thérap.* 28 May, 1845.

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AUGUST, 1846.

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ON ENDOCARDITIS RHEUMATICA.

BY DR. CL. MULLER.

Translated, with notes, by John C. Peters, M. D.

Simultaneously with the greater extension of Homœopathy, a new and reforming spirit also evinced itself in the general medical sciences, which subjected long established theories and opinions to new and exact examinations, and led to the overthrow of many of them, for it accepted nothing which could not be grasped by the hands or senses, or which was not absolutely based upon facts. It is evident that this new direction of medicine has much in common with Homœopathy; the tendency of both is to prove every thing, to discover and overthrow existing untruths and errors; pure truth is the highest and only aim of each, and both seek it in a purely experimental manner, avoiding all speculation and hypothesis as much as possible. They differ not in the manner but only in the field of their operations; the ultimate end of the Homœopathic school is Therapeutics, and all their investigations are directed to the attainment of knowledge of the action of drugs and medicines; the other school confines its attention to physiology and pathology. Instead, as might have been expected, of their working into each others' hands, or of approaching, and finally meeting with each other in their investigations, they both denied the truth and utility of each others' labors, overlooked their common tendency, and thus remained one-sided and prejudiced. It is not to be denied that the Pathologists finally forgot the object with which they first commenced their investigations, and soon became more anxious to become expert in detecting disease, than in curing it. This has led many Homœopathists to despise their labors altogether; but why should we not make use, in the selection of a specific remedy, of the *internal* signs, phenomena, and symptoms of disease, which have been discovered by means of physical, physiological, and pathological investigations, as well as those which we observe on the surface of the body, or learn from the patient? Does not the proper application of the law *similia similibus*, require us to collect the totality of the phenomena of disease, and to pay especial attention to the essential and characteristic signs and symptoms? And in diseases of the heart and chest, are not the physical signs gained by auscultation and percussion, the char-

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acteristic and distinguishing diagnostics of the various diseases of these parts? The Homœopathists are much to blame in having neglected these important points so long; they have scarcely taken the first steps, and the majority regard physical examinations as useless, as opposed and inimical to the homœopathic principles. In order to make a beginning, I have selected a disease, important on account of the frequency of its occurrence, and appropriate from the simplicity and constancy of its physical signs and symptoms, viz:

RHEUMATIC ENDOCARDITIS.

In not a few cases of acute rheumatism we have opportunities of observing this form of endocarditis. Generally towards evening, and often without any fresh cold being taken, an aggravation of the fever will be observed, attended with difficulty of breathing, anxiety, restlessness, palpitation of the heart, pain, &c.; in some cases, the oppression and anxiety increase to a frightful degree, leading to syncope, and the pain even may become quite acute. [Pain is represented by Bouillaud as being entirely absent, and Hope states that in several instances only has he observed a slight pain in apparently pure endocarditis.] But far more frequently nothing is observed, except some aggravation of the fever, and slight restlessness, so that the inflammatory stage of the disease may be, and is often quite overlooked by the mere symptomatologist.

The percussion sound at first does not differ from the normal one; but in the course of a few days, marked dullness over the region of the heart may become evident,* and the sounds of the heart are heard over a large space; the action of the heart is more violent and quickened, at times irregular; the pulse may be small, weak, contracted, and out of harmony with the impulse of the heart, [especially when the mitral valve becomes affected, or large fibrinous concretions form in the ventricles, preventing, in spite of the violence of the heart's contractions, the projection of a large column of blood into the arteries]. Both sounds of the heart may seem normal at first, only they are heard more frequently and louder, but soon a valvular murmur becomes perceptible; this is almost always

* [The dullness of endocarditis may be distinguished from that of dry pericarditis, by its not being attended with a friction sound; and from that of pericarditis with effusion, by the impulse of the heart against the chest being strong, and exactly synchronous with the first sound of the heart; whereas in hydropericardium, the impulse is feeble, indistinct, undulatory, and not synchronous.]

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heard over the left ventricle, [in nineteen cases out of twenty, valvular murmurs belong to the left side of the heart: serious disease of the valves, sufficient to occasion a murmur on the *right* side of the heart, is very rare; so that, practically, almost all we have to do, when a bellows murmur is heard, is to discover whether it occurs at the inlet or outlet of the left ventricle, i. e. at the mitral, or aortic valves. In four hundred cases of valvular disease, Hope at the utmost met with twenty cases of disease of the right valves; in one hundred cases, Clendinning had ninety-two on the left side, only two on the right, and six on both sides].

The mitral valve is more frequently the seat of disease, than the semilunar valves of the aorta. [In the commencement of endocarditis, the valvular murmur hence will always be heard over the left side of the heart, and whether the aortic or mitral valve will be the particular seat of the disease, the murmur will be heard during the contraction, and synchronous with the first sound of the heart; if the murmur be heard loudest at the base of the heart, near the left edge of the sternum, on a level with the edge of the third rib; if it decrease in intensity as we approach the ear towards the apex of the heart, but be distinctly heard along the track of the aorta, a little to the right of the sternum, and even in the carotids, and the pulse be steady and regular, although quick, and more or less full, then the principal seat of the mischief is at the semilunar valves of the aorta. On the other hand, if the pulse be small, feeble, and irregular, and the murmur be heard loudest at the apex of the heart, a little below and inside of the nipple, becoming fainter as we approach the body and base of the heart, then there is mitral regurgitation.]

[It is important to know and remember that nine-tenths of the organic diseases of the heart are valvular diseases arising from endocarditis; that three-fourths of the cases of endocarditis arise during the course of acute inflammatory rheumatism, or of acute rheumatic pleurisy; that a large proportion of cases of endocarditis are latent at their commencement, i. e. not attended by well marked symptoms or rational signs; that the disease may progress for weeks, months, and even years, before the patient experiences sufficient inconvenience to make complaint; that the *younger* the patient is who suffers acute rheumatism, the more likely will he be to have rheumatic endocarditis,—Watson has known only two persons to pass through acute rheumatism with an untouched heart, prior to the age of puberty; that diseases of the heart are often not so rapidly fatal as is usually supposed, many patients living several, or

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five, or ten, or twenty, or even twenty-five years; that endocarditis is rarely a fatal affection during its acute stage; the rule is that the patient seems to recover perfectly, in the opinion of the mere symptomatologist; that if a valvular murmur continues more than seven or ten days, it is apt to resist all treatment for several weeks longer, and generally becomes permanent; that the patient has no choice but between a perfect recovery, and death sooner or later from disease of the heart; that acute endocarditis is a perfectly curable disease, and that hence it is owing to the ignorance of physicians that incurable diseases of the heart have been and still are so common.]

No farther proofs are required that the above given physical signs, in connection with the general and subjective symptoms, are perfectly sufficient to enable the physician to detect with certainty the existence of endocarditis, and to distinguish it from all other diseases of the heart. It is our intention here to show more particularly that physical examinations are always of importance in the selection of homœopathic remedies, and that a continued attention to this point must lead to the most important results in the cure of disease. The present condition of our Materia Medica, at the first glance, would seem not to favor or allow of such an attempt, for we look in vain in it for even a single physical sign, which is as subtile and exact in its signification, as "bronchial respiration," or "bellows murmur with the second sound of the heart," &c. It could not, and perhaps, cannot be otherwise, for the greater part of the experiments and investigations with drugs, which constitute our Materia Medica, were made at a time when auscultation and percussion were but little known, and less practised; and even now it would be extremely difficult to produce physical signs and symptoms in previously healthy persons, by means of drugs; experiments with drugs on the healthy must be confined to certain, and those very narrow limits, whilst natural disease may progress to total disorganization, and often acknowledges no limits short of death. We must even do, in the treatment of organic diseases of the heart and lungs, what has been done in the treatment of other diseases, viz., conclude from slight indications what greater results might have followed, if the experiments with drugs could have been pushed far enough; if one attempt to produce in the healthy subject, with Sulphur, Baryta, Calcaria, &c., the extensive ulcers and scrofulous derangements which have been cured hundreds of times with these remedies, he will probably be disappointed; one will certainly wait in vain to see Kali carb. produce purulent expectoration, and genuine symptoms of phthisis; or for Silex

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to produce the manifold alterations, and new formations in the tendons, bursæ mucosæ, joints, &c., which it cures with wonderful celerity, &c. But there is also another source of information open to us, which was not sufficiently cultivated during the early career of Hahnemann, viz., Pathological Anatomy. When we once succeed in establishing certain constant organic lesions to be produced by drugs, as learned by post-mortem examinations in cases of poisoning with these drugs, then we come in possession of strictly homœopathic remedies against similar diseases; this pathological knowledge of the effects of drugs, is of especial importance in the homœopathic treatment of endocarditis, for this disease, as it progresses, becomes attended with almost all the symptoms which attend diseases of the heart in general.

ARSENICUM.

It produces anxiety in the region of the heart; irritable and frequent beating of the heart, with great feebleness of the pulse; frequent, violent, irritable beating of the heart; frightful and very troublesome palpitations, especially at night; nocturnal, irregular and violent palpitations, with anxiety; very much quickened, violent, stormy, irregular and painful beating of the heart; loss of contractility of the heart; piercing, burning, and soreness in the region of the heart.

Pathological Anatomy: Very much relaxed or violently contracted heart; much thickly fluid, tar-like blood in the right auricle; opalescent spots upon the inner surface of the left ventricle, from the presence of false membranes; violet-red spots with softening of the internal coat of the heart (endocardium); red-marbled spots in the left auricle and ventricle; smaller carmine-red spots, especially on the papillary muscles, and penetrating into the substance of the heart; much darker redness, almost blackness of the right cavities of the heart, and some spots on the papillary muscles; red, or black broad spots in the left ventricle; inflammation of the semi-lunar valves of the aorta.

If we recollect in addition that Arsenic has been found serviceable in palpitations, carditis, endocarditis, rheumatic and organic diseases, especially of the left side of the heart; in the most frightful paroxysms occasioned by hypertrophy, dilatation or valvular diseases of the heart, it will become evident that Arsenic possesses the most perfect specific and homœopathic relation to endocarditis. It is indicated not only in the commencement of the disease, but also when exudations and vega-

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tations have formed on the endocardium and valves, especially of the left ventricle. It is hence the main remedy in Bouillaud's so-called chronic endocarditis. It is indicated when the following physical signs are present; dullness over a greater extent than usual in the cardiac region, especially in a vertical direction; violent and irregular action of the heart, with feebleness or almost complete extinction of the pulse; indistinctness, or roughness of both sounds of the heart, or a bellows murmur with the first sound, heard over the left ventricle, [and along the aorta, but loudest over the aortic valves, viz., at the edge of the third rib, near the left edge of the sternum.]

BISMUTH.

It produces violent beating of the heart; violent palpitations, visible at a considerable distance; a symptom which is almost peculiar to hypertrophy of both ventricles.

Pathological Anatomy: An intensely bright inflammatory redness in both ventricles; in the left ventricle several cherry-red, pretty broad, but not very deep spots, especially on the papillary muscles. This evidently must prove a very important remedy in diseases of the heart, especially in the acutely inflammatory stage, although it may also prove useful in valvular disease and hypertrophy. It is indicated when the following physical signs are present: dullness on percussion over a great extent of surface; violent beating of the heart, distinctly elevating the walls of the chest [or the hand or head of the auscultator when applied]; bellows murmur with the systole of the heart, and heard both over the right and left ventricles.

COLCHICUM.

It causes rending pain in the region of the heart; very violent palpitations, followed by very weak beating of the heart.

Pathological Anatomy: Several ecchymosed spots on the pericardium; effusion of serum into the pericardium; heart large and lax, its external surface marked by dark, violet or brownish spots, and with large, circumscribed patches of lymph. It would seem more homœopathic to pericarditis than to endocarditis. It may be used when the following physical signs are present: dullness over a small, or very great extent of surface [when there is effusion into the pericardium the dullness mounts higher up the sternum, in the direction of the great vessels, than when it is occasioned by mere enlargement of the heart; distinct bulging of the ribs over the heart]; ac-

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tion of the heart violent at first, and attended with a marked friction sound [a vibratory tremor, generally perceptible to the hand; Stokes noticed this tremor in five cases out of six; the friction sound is a to and fro sound, corresponding with the movements of the heart backwards and forwards; it is generally more or less rough, sometimes like the rasping of wood, or the grating of a nutmeg, crackling of parchment, rustling of silk; very rarely it resembles the creaking of new sole leather; when the quantity of effusion increases, these sounds may change to a continuous hollow rumble, owing to the agitation of as large a quantity of fluid as is compatible with the production of a murmur]. When the quantity of serum becomes great, the heart is pushed back from the walls of the chest; hence its impulse can scarcely be felt, all friction and other murmurs cease, and the natural sounds of the heart are heard very indistinctly, and at a great distance.

CROTON.

It causes piercing pain in the region of the heart; loud and perceptible pulsation and throbbing of the heart, especially when lying down; sudden throbbing in the region of the aorta.

Pathological Anatomy: Sixteen ounces of dark bloody serum in the pericardium; softening of the heart; actual extravasations of blood into the substance of the heart; dark stripes and ecchymoses on the endocardium of both ventricles; inflammation of the pulmonary arteries and veins; redness of the valves.

This is evidently one of the most important homœopathic remedies in diseases of the heart [and perhaps the most homœopathic remedy to effusion into the pericardium, especially the hæmorrhagic variety]. The physical signs indicating its use are the same as those requiring the use of Colchicum, with the addition that there may be valvular murmurs heard to the right of the sternum, over the right ventricle, and during the diastole of the heart.

[To be continued.]

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CONNECTION OF HOMŒOPATHIA WITH SURGERY.

BY CROSERIO.

Translated from the Annales de la Médicine Homœopathique. By P. P. Wells, M. D.

MESSRS. EDITORS: The following translation has been prepared for publication under the same conviction that prompted the venerable author to pen the original. It was well understood by him and by the translator, that the suggestions and discriminations here presented to your readers, were to be of little value to the mature Homœopath; but it is equally understood that there is a class of practitioners of our precious system who are not yet mature, and a still larger class who are beginning to emerge from the shades of prejudice, and to interrogate nature in her own household, instead of looking exclusively to text books and schools, to learn whether the truths discovered, and promulgated by the sage of Cœthen, are in reality part of the laws which govern in her domain. To both these the observations of the author must be invaluable helps. The recollection of early difficulties in his Homœopathic course, and the thankfulness with which he laid hold of even small hints, determined the translator to give this paper to those who are following in the steps he then trod, surrounded by the same difficulties. By such it cannot be lightly estimated. In his introduction, which is here omitted, the author enters an earnest protest against the use of our remedies by the members of the old school, according to their maxims and usages: i. e. against their administration of homœopathic drugs in allopathic doses. The practice is full of mischief, and in our own neighborhood is by no means rare. It cannot be too carefully avoided, or too plainly denounced. Not so much because of the base attempts to snatch in the dark, here and there, a leaf from the immortal wreath which binds the brow of the great author of Homœopathia, and furtively plant them in their own barren soil, and by their muddy streams; not so much of the endeavor thus, by pilfered gain, to impart new vitality to a system already in spontaneous decay; not so much for these, as because innocent patients are thus made victims of obstinate ignorance, and blind stupidity, and to bear in their bodies the marks which these so so often leave in their path, viz., incurable disease and cease-

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less pains. For these reasons all "*sound*" Homœopathists should join the venerable Croserio in his protest against such vile barbarisms. To arrest this practice in the department of surgery, in some degree, is conceived to be one object of the following paper. *Trans.*

THE treatment of wounds depends on the *nature of the tissue injured, the part wounded, the nature and form of the lesion, the circumstances which accompanied it, and the condition and constitution of the patient.*

In studying the pathogenetic effects of *arnica montana*, we find nearly all the general and local symptoms of sensation, and even the physical symptoms, such as ecchymosis, &c., which result from mechanical violence to the living body; such as *vertigo*, so that one is like to fall; *heaviness of the head; loss of memory; varied pains in the head; ringing in the ears; dilated pupils; swelling of the nose: epistaxis; the head is so heavy he cannot support it; coagula of blood from the vagina; pains like those of a luxation; sundering pains; shocks and blows in the body like electricity; breaking pains in all the limbs*, &c. It is not surprising, therefore, that Hahnemann regarded it as the special specific in wounds, and restored to it the honored and merited title, entirely forgotten by modern physicians, of *Panacea Capsorum*, which Jehr had given it two hundred years before, although the symptoms which are manifested in the wounds of certain tissues and organs, in certain circumstances, are better represented in the pathogeny of other remedies, such as, *Rhus toxicodendron*, *Aconite*, *Symphitum officinale*, *Sulphuric acid*, *Causticum*, &c., which, consequently, are more appropriate in such cases. I will review briefly the different conditions of wounds, in order to point out the most appropriate medicines, and the method of their administration.

Wounds of parts, the base of which is the cellular membrane, the skin, the mucous membranes, the muscles, and the serous membranes, require *Arnica*. If the wound is small and superficial, requiring but a day or two for its recovery, external application of the remedy is sufficient; but in more grave cases, it must be given internally at the same time. If there be a solution of continuity of the skin, the wound should be covered with a pledget of lint, dipped in the pure tincture of Arnica, which should be renewed morning and evening, for five or six days, and then be replaced by a large compress dipped in a so-

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lution of a single drop of the tincture in an ounce of fresh water; which has the double advantage of keeping the skin of the wounded part cool, and maintaining the specific action of the remedy. The compress should be dipped in the solution as often as it becomes dry. If the skin remains undivided, the pledget may give place to simple frictions of the part, with the same tincture. It is necessary to give careful attention to subjects with a fine, sensitive skin; that the external application be not continued too long, for it may produce irritations or eruptions on the part, which are removed with difficulty. The Count de V., an old man of nervous temperament, fair complexion, and fine skin, after a fall by which he received a severe blow on the patella, followed by an extremely painful swelling, made application of the pure tincture of Arnica to the parts, and the desire of a rapid recovery induced him to renew the dressing several times a day, with an excessive quantity of the tincture. After the fifth day of its use, red and painful pimples, like the eruption of *variola*, appeared on the knee and the hand employed in the friction; and although the remedy was discontinued, the eruption soon covered the whole hand, and extended to all the parts which had been touched with the tincture. In a few days, the pimples overrun the whole lower extremities, even to the soles of the feet, and then extended to the abdomen, back, arms, scalp, in a word, the whole surface of the body was covered with a copious eruption like distinct small-pox. It was not accompanied by fever, or any symptoms which would warrant the suspicion of eruptive fever; although the patient was of a gouty diathesis, and had many chronic symptoms, which revealed a psoric taint, still the order of its appearance left no room for doubt as to the origin of this phenomenon, *viz.*, the dynamic action of *Arnica*. His cure was long and difficult. Antidotes to Arnica were of no avail. Sulphur and other antipsorics, were alone of service. This case has made me cautious in the application of the tincture of Arnica. After four or five days, I dilute it with a quantity of water; more or less according to the sensibility of the skin. If the wound be deep or extensive, or if there be reason to suspect a dynamic action on the tissue of the part wounded, or on other parts, Arnica should be immediately administered internally, and repeated so often as may be necessary, for an interval of two or three days. If the injury has been attended with circumstances calculated to excite terror, as a fall, and if it be recent, it will be well to administer first a dose of Aconite, and an hour after, Arnica.

Wounds in tissues of great sensibility, as of the nerves, or in

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tissues very susceptible of inflammation, require Aconite; and when they are very painful, and accompanied with inflammation, even without fever; and especially if there be fever, they should always be combated with Aconite, before the use of Arnica, if indeed this last be at all necessary.

Wounds which are not kept open by accidental causes, such as the movement of the parts, foreign bodies, or a great alteration of tissue, and which are not healed in the time which their extent would seem to require, suggest the presence of psoric taint in the constitution. In such cases, if after one or two doses of Arnica, there is no amendment I give Sulphur $\frac{1}{30}$ every five days, till I perceive some effect from it; I then leave it to exhaust its action, and ordinarily the cure is effected without any other remedy, or Arnica may then prove efficacious.

Fibrous tissues, as the tendons and ligaments, require *Rhus toxicodendron*, $\frac{1}{30}$ internally administered, especially if the wounded parts had suffered violent tension, as in sprains, luxations, or muscular efforts; and at the same time, the remedy may be externally employed. Rhus VI, 9th, in three ounces of water. This remedy is often of surprising efficacy in injuries of ancient date. The lady of a superior officer of the 66th regiment of the line, in garrison at Metz, was confined to her pallet, by a sprain received three months ago. All allopathic means employed for her relief had proved fruitless. I sent her Rhus $\frac{1}{30}$ to be dissolved in eight tablespoonfuls of water, a spoonful to be taken every morning. She immediately experienced the best results; was able to walk about her room the first day, and the fifth, through the city.

Glandular tissues, cellular in their texture, when recently wounded, require *Arnica;* but if the injury has been neglected, and indurations have formed in the organ, *Conium* $\frac{1}{30}$ in eight spoonfuls of water, a spoonful every morning, is to be prepared. Injuries of the bones are healed most promptly by *Symphitum officinale*, $\frac{1}{30}$ internally, once a day. This remedy accelerates the consolidation of fractures surprisingly.[1] I have

[1] I have had repeated opportunities of verifying this declaration of Croserio. A boy fourteen years old, broke the bones of the forearm, at the junction of the lower and middle thirds, two years ago. He had twice repeated the fracture by slight falls. The ends of the fragments are now slightly moveable on each other, and the arm is weak and admits of little use. Three doses of *Symphitum* effected a perfect cure. The lad became more robust, and has since had better general health than ever before.

A boy eight years old fractured the humerus, near the junction of the condyles and shaft. Arnica $\frac{1}{30}$ immediately arrested the spasmodic

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seen a transverse fracture of the femur, so united in three weeks, as to dispense with the bandage, and permit all necessary freedom of movement of the limb, though, as a precaution, the patient was kept in bed two weeks longer. A fractured radius, near its carpal extremity, of an aged lady, was perfectly healed in three weeks, without callous, or derangement of the wrist-joint. In these cases I used Arnica internally and externally, the first five days, to prevent local inflammation and traumatic fever, afterwards the Symphitum, as above described.

Of the parts wounded, I have little to add to what has just been said of the tissues. I will only remark that the pathogenetic effects of Arnica on the head, are so numerous and characteristic, that it is not surprising its curative effects on this part of the body, have been so frequent and important. The observation of Dr. Crepu, of Grenoble, in the *Bibliothique Homœopathique*, is remarkable for the numerous cures of these lesions. In all cases of wounds of the head, Arnica, both internally and externally, is to be employed, but with the exercise of caution as to the dose, because of the great affinity of this remedy with the head, that we may avoid dangerous medicinal symptoms. If not called to the patient till the injury has developed violent inflammatory fever, with redness of the face, *Aconite* should be first administered, and if this be not sufficient, *Belladonna*, especially if there is delirium, before having recourse to Arnica, internally, although this complication need not hinder the immediate local application of this remedy, as already directed.

The eye is so sensitive, vascular, and ready to take on inflammation, that when wounded, we must immediately have recourse to Aconite $\frac{1}{30}$ in three tablespoonfuls of water, a teaspoonful every two hours, and even every hour if the inflammation is severe. Hahnemann recommended this remedy in cases of foreign bodies lodged in the eye, and experience has many times confirmed the utility of the prescription. In wounds of the organ it is indispensable. In severe cases I ap-

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jerks of the muscles of the injured arm. This remedy was continued the first three days, when the traumatic fever had entirely subsided. He then had *Symphit.* 3, gtt. i. in half a tumbler of water, a tea spoonfull morning and evening. The splints were removed the *ninth day*, and the bone was found consolidated. The cure was entirely without pain. How much earlier than this the fragments ceased to be moveable, is not known. Well may the author say it heals broken bones surprisingly. Let it be remembered that the discovery of this specific, is but one of the many rich fruits of *Hahnemannism*. The remedy can be obtained at Wm. Radde's, 322 Broadway, N. Y. *Trans.*

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ply locally a solution of Aconite $\frac{1}{6}\frac{1}{0}$ in a glass of water. This remedy suffices for the whole cure. It is to be continued in all cases till the inflammation and pain are entirely dissipated. The wounds of the lids class with those of the skin, and if the globe is not affected, Arnica will suffice for their cure.

Wounds of the chest, whether penetrating or otherwise, as well as severe contusions of this cavity, require Arnica, whether there be hemorrhage or not. If the heart or its pericardium be involved, perhaps Aconite may be servicable in the first instance.

Wounds of the mammary glands fall under the observations already presented in relation to glands, but their sensibility renders Aconite necessary when acute inflammation is developed; and Phosphorus 30, when there are indications of suppuration. A young lady received eight days ago, a blow on the breast. She had neither pain nor induration in it before the third day; on the fifth, an allopath ordered fifteen leeches. The pain and inflammation increased from this time. I was called the eighth day. The breast was a deep red, with shooting pains extending to the axilla. Fluctuation was perceived in the centre of the tumor. I gave Phosphorus $\frac{1}{3}\frac{1}{0}$, in four tablespoonfuls of water, to take a spoonful immediately, and evening and morning, with the removal of all topical applications. The next morning she reported a better night; the breast had nearly regained its natural size and color; the abscess appeared reduced to a fourth of its previous extent; and the third day the cure was complete.

Penetrating wounds of the abdomen, with lesion of the peritonæum, or contained organs, as the liver, intestines, or bladder, also involve organs very susceptible of inflammation, and of that too which is exceedingly dangerous. The old school are accustomed to exhaust or destroy their patients to prevent this inflammation (as happened to Carrel, late editor of the French "National"), by abstractions of blood, which are ever insufficient for the attainment of the object. Hahnemann has given to the art of healing more efficacious and more rational means, with which to meet these serious injuries. *Aconite*, administered immediately, as directed for wounds of the eyes, at once calms the nervous excitement and anxiety of the patient, and at the same time prevents the vascular excitement which ends in inflammation of the parts. If visceral inflammation be already developed, with symptoms of peritonitis, after a dose of Aconite, recourse must be had to Belladonna $\frac{1}{3}$, repeated till the inflammation is resolved. Arnica will complete the cure.

The treatment of wounds is modified somewhat by the nature and form of the lesions. Those produced by a direct per-

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cussion, whether simple contusions, or solutions of continuity, or by a cutting or pointed instrument, require Arnica; thus, gunshot and bayonet wounds, falls, &c., demand this remedy. Superficial contusions, and those of long duration and those from riding on horseback, yield most speedily to a local application of *Sulph. acid.* Mechanical lesions produced by a simple distention of tissue, such as sprains and luxations, often yield only to *Rhus tox.* administered as above directed. *Arnica* is often followed by prompt success in injuries of this description.

The treatment of burns should be varied according to the extent and depth of the organic lesion, and the attending circumstances. Burns which do not penetrate beyond the epidermis[1] are resolved with great promptness by the application of Arnica, but I have had no experience with it in more profound injuries of this sort. *Carb. veg.* $\frac{1}{30}$, internally, has been recommended, by which great advantage is said to have been obtained. It soothes the frightful pain with great promptness. In deep burns, in which it is to be feared the viscera have been involved, as the danger consists in consecutive inflammation, Aconite should be of great value. When inflammation has been prevented or subdued by Aconite, the sloughing of the eschars will be promoted by Arsenic $\frac{1}{30}$, repeated according to the necessities of the case. If the suppuration be very abundant,

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[1] For the cure of scalds and superficial burns, there is no remedy which can compare with local application of a *saturated* solution of *Nitrate of Silver.* It has been in use in my practice for the last six years, and its success has been such as to leave nothing to be desired more. In slight cases the *cure* is *instantaneous.* In more grave ones it is effected by a single application, and in a space of time incredibly short. A boy, five years old, received the boiling contents of a tea kettle on the top of his head. The scalp, face, arms, and upper part of the trunk, were frightfully scalded. The mother applied lamp oil, with no effect to relieve his pain. *Immediately,* on applying strips of muslin dipped in this solution, he became *perfectly tranquil.* He had neither pain, anguish, trembling, shuddering, nor cold extremities, all which previously had been extreme. The accident occurred at four o'clock, P. M. The next morning at eight, the strips were removed, and with the exception of a spot behind the right ear, and two or three others on the left arm, of the size of a quarter of a dollar, where the oil prevented the contact of the solution and skin, the child was *perfectly well.* A servant girl thrust her hand and two-thirds the length of the forearm into a kettle of *boiling mush.* The fingers were swollen so as to be rigid, and *small* blisters covered the skin of the immersed part. The solution was applied with a hair pencil. The pain ceased *instantly,* and in three hours she was about her daily avocations. *It may be,* Messrs. Editors, that these were *Homœopathic* cures. *Trans.*

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China $\frac{1}{3}$, may be preferred. If the acute pains of the burn do not yield to Carbo. veg. recourse should be had to Coffea, $\frac{1}{2}$.

Doctor Goullon, of Weimar, has employed *Causticum* for a long time with great success, given internally, every three or four hours, and externally, in solution, especially when the injury has been of long continuance, and has been buried in ointments. The pathogenetic symptoms which attend the phlyctmoidal eruptions of this antipsoric, led him to the choice of the remedy.

The accompanying circumstances which may present especial indications of treatment, are terror, and other moral emotions which the cause of the injury may have produced. If the patient has been affected with terror, the remedy is Aconite; if he has had anger or rage, Chamomilla or Bryonia; if he is addicted to excesses of alcoholic drinks, or if intoxicated at the time of the injury, he should immediately have a dose of Nux vom., and afterwards, the remedy specific for the injury received. If he has lost much blood, he should have China $\frac{1}{12}$, and Arnica seven or eight hours after.

Of course, the dynamic treatment which Homœopathy brings to the cure of wounds, should be aided by the mechanical appliances of surgery when they are required. Parts should be retained in the most complete repose; wounds should be cleansed, and the junction of divided tissues maintained by appropriate means. Parts displaced are to be restored. Divided vessels are to be tied or compressed; and foreign bodies removed by the necessary operations.

The regimen to be observed is that appropriate to convalescents, and neither the severe diet, nor the sanguineous depletions resorted to by the old school, to prevent inflammation. The proper administration of homœopathic remedies internally and externally attains this object much more successfully, and by sustaining the vital forces by appropriate nutrition, they repair with greater facility the losses occasioned by the wound. When inflammation supervenes in a wounded part, after removing its cause, give Aconite as directed; and if the part be threatened with or attacked by erysipelas, Belladonna. When profuse suppuration is produced by the presence of a foreign body in the wound, or by lesion of the bones, as in the case of gunshot wounds, with considerable comminution of the fragments, China $\frac{1}{12}$ every day is indicated. It is also serviceable in the diarrhœa produced by the absorption of pus, and in colliquative sweats. If these symptoms are obstinate, recourse must be had to Sulphur. Silicia, Mercury, and Phosphorus may be useful in some such cases.

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The gangrene which occurs in wounds should be treated according to the supposed causes. I have, however, found China $\frac{1}{12}$, morning and evening, very serviceable. If it be extensive, with ichorous suppuration, Arsenic $\frac{1}{30}$, in three tablespoonfuls of water, a teaspoonful every three hours, and lotions of the same attenuation, are preferable.

In surgical operations, homœopathy possesses many precious resources with which to insure success. It is well known, that of the operations the best performed, death often follows after a longer or shorter period, in consequence of traumatic or suppurative fever, secondary abscess, of absorption or excessive secretion of pus; so that the operation the most plainly indicated and best performed, is often the cause of the more sudden destruction of the patient. Surgery is painfully impotent to prevent or cure these accidents. Bleeding, and only bleeding and diet, with opiates, its sole resources, ought to be, and are, followed by unfavorable results, for the debility consequent on blood-letting increases greatly the moral and physical sensibility of the patient to the pains and emotions of operations, and consequently can never prevent the evils developed by these causes. Just as a feeble valetudinarian or convalescent will be more readily made ill by external causes of disease, than the strong and robust, as is proved by daily observation. For the same reason an individual enfeebled by blood-letting or severe diet, is less likely to sustain a severe operation than in his natural state. This truth, so simple in itself, is the reason why so great care is taken to avoid exposures to cold and other causes of disease, while fasting in the morning. It required the flippancy of the schools to set at nought observations of so long standing and so oft repeated. Homœopathy, having removed these prejudices, provides means more in accordance with natural laws, the superior efficacy of which experience has ever confirmed. The late Dr. Gueyrard employed them in a case of amputation of the thigh by Prof. Berard, with the greatest success: cicatrization followed without either traumatic fever or suppuration. Sept. 20th, 1841, I assisted the same professor in the excision of a *cervix uteri*, invaded by a cancerous fungus. The patient, forty-five years of age, of a nervous temperament, had for two years been subject to considerable uterine discharges, which she supposed indicated that the catamenia were about to cease, and gave them no particular attention, till at last she was seized with severe pains in the loins, abdomen, and thighs, when I apprised her of the necessity of ascertaining the cause of her distress. M. M. Marjolin and Lisfranc confirmed the diagnosis of disorganization

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of the cervix, and declared its immediate removal indispensable. Prof. B. would only undertake the operation on the condition that I should continue my attendance on the patient. I forbade the potions he directed to calm her nervous excitement, arising from the necessity of submitting to such an operation. In order to attain this object, she was only directed to inhale *Ignatia* the day preceding that of the operation, and *Aconite* an hour before its commencement, and at the moment of her being placed on the table. The operation was performed with the greatest exactness, and lasted twenty minutes, yet this female, so nervous and timid, had no fainting. After the operation, she had an injection of a solution of the T. Arnica in water, and inhaled very lightly Aconite; and as soon as the patient was removed to her bed, I dissolved Arnica $\frac{1}{1\,2}$, in a glass of water, of which she took a teaspoonful every four hours, while the local application of the remedy was continued. The excised portion was of the size of a hen's egg, and embraced the whole cervix. The division was through the healthy tissue of the uterus. The hemorrhage, during, and immediately after the operation, was trifling; but two hours after it became frightful. It was arrested by the two assistants who had been left with the patient, in anticipation of this accident, by compression of the abdominal aorta. After this there was not the slightest unfavorable occurrence; the patient had positively no fever, and the wound cicatrized the twelfth day. The symptoms of abdominal irritation or congestion, which sometimes exhibited themselves, were combated with *Belladonna* and *Nux vomica*. The catamenia have never returned, and her health has been good during the year which has elapsed since the operation. Will it continue? Time will show. In the mean time it must be acknowledged that homœopathy was here of great service, since the operator has declared that it was the only case in which he had known a similar result.

The report of this case shows the manner of employing homœopathic medicaments in grave operations, where large wounds are inflicted, as in amputations, extirpation of tumors, &c. Pledgets of charpie, and compresses dipped in solution of tincture of Arnica, and the dressings to be wet several times a day with this solution, till the cure is effected, as directed in the case of wounds.

Dr. Wurtzler, of Bernbourg, in a memoir presented to the Central Homœopathic Society in 1841, recommends Aconite immediately after the operation, and says its effects are astonishing; the pains were entirely dissipated at the end of three hours, at the latest, and the patients slept immediately after the

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operation, very quietly, as in some instances they had not done for years. Sometimes the terror produced by the shock of the operation, required *Opium*. One patient also slept very calmly under the influence of *Arnica*. The pathogenetic symptom of jerkings of the limbs, renders it immensely valuable in amputations and fractures, where patients are so tormented by jerking of the muscles of the affected limb during sleep.

Operations on the eyes require the same management, as has been directed for wounds of these organs. Dr. Wurtzler, in the memoir just cited, makes some very interesting observations on these operations.

"The chief remedy of the operations on the eyes," says he, "appears to be *Aconite*. Before I ascertained this application of the remedy, I had tried several medicaments without success, and, particularly, *Arnica* proved powerless. In many cases, Aconite alone is sufficient for the entire cure; at times, as exceptions, I have been compelled to have recourse to some other remedy.

"In patients of a very gentle disposition, Aconite is not always appropriate; then the violent lancinating pains in the temples and eyes are removed by *Ignatia*.

"If there follow violent pains with vomiting, *Bryonia* will be useful.

"If the pains were by shocks with vomiting, and lientery, *Asarum* relieved.

"If the pains were burning, with diarrhœa, *Arsenic* gave relief.

"*Crocus* removed pulsation, and beating pains in the eyes. If there be lancinating pains through the temples, with complete loss of appetite, *Thuya* is the appropriate remedy.

"After depression of a cataract, when the crystaline lens was broken in small fragments, *Senega* produced their absorption.

"When, after the cure, vision was affected by varied colors, particularly when objects appeared covered with blood, *Strontiana* gave perfect relief."

In operations in the cavity of the abdomen, and on the organs of generation, the same treatment should be had recourse to as in wounds of these parts. Aconite, and sometimes Belladonna, should be continued after the operation, so long as inflammation threatens, before passing to the use of Arnica, after which, the wounds belong to the class of ordinary injuries, and should have the same treatment. I have not spoken of the preparatory treatment to which surgeons have thought proper to subject their patients previous to their operations,

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and which always has an effect contrary to that desired, because this belongs to the medical treatment of the disease requiring the operation, when this has proved insufficient for its cure. This treatment is of the greatest value if it has been properly directed, for it will have destroyed, in a great degree, the psoric taint of the constitution which so frequently reproduces the disease where this precaution has been neglected.

The subjects of operations are in a pathological condition, which renders them extremely susceptible of impressions from external objects, and surgery rightly recommends the greatest caution in preserving them from such influences; but if accidents from this source have already occurred, the resources of homœopathy are powerful to arrest and remove them, by administering, the soonest possible, the specific against the presumed cause, and the symptoms it has developed. Care must be exercised to arrest these complications in their outset, for they soon attain a gravity which compromits the success of the operation.

The prompt and salutary effects of homœopathic remedies, so often experienced, as I have already shown, in all sorts of wounds and surgical operations, are so easily proved that it is shameful, and even criminal, on the part of the army Board of Health, (*conseil de salubrité des armées,*) that they have not taken the necessary measures to prove the reality of these advantages. What a difference in the fate of the unhappy man struck by a shot on the field of battle, if there were a small supply of Arnica to mingle with a little water, with which the surgeons could bathe his wound. Those acute pains which so torment him during the first few days, the traumatic and suppurative fevers, the copious suppurations, which so often exhaust and carry down to the grave, and the more terrible gangrene and tetanus, so frequent in warm climates,—all these sufferings and dangers can be avoided by it, and the wounded will only endure the sufferings inseparable from the destruction of the tissues affected by the wounding body; their recovery will be more prompt, and never followed by those protracted and painful convalescences so expensive to government, by the wounded being left the subjects of interminable pains through all their subsequent lives. We hope, when these facts come to the knowledge of that great mind who has the direction of the department of war, his love for the soldier will induce him to order the necessary measures for the investigation of a truth so important to the welfare of the troops, and the economy of public treasure.

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OLD SCHOOL HOMŒOPATHY—NO. 4.

BY JOHN C. PETERS, M. D.

1. In the Jan. 1846, No. of the Med. Chir. Rev., p. 166, we read: "We (viz. old school physicians) have, it is to be feared, been in the habit of confining our attention far too much to the more immediate and ostensible effects of our remedies; and whilst our treatises on Materia Medica and Therapeutics are full of references to the purgative, emetic, stimulant, sedative, and other of the more rude and manifest operations of medicines, there has been too great a disposition to deny or discountenance all statements, with reference to the specific influence of particular remedies, or definite forms of morbid action. However much there may be of fiction and delusion, in the statements of the Homœopathists, concerning the specific adaptation of their infinitesimal doses of particular medicines to forms of disease denoted by special symptoms, we are inclined to believe that legitimate medicine may in this respect, as well as in some others, have cause to admit that Hahnemann has done good service to the healing art. Undoubtedly many of those medicines whose therapeutic virtues are most to be depended on in the diseases for which they are chiefly administered, are of the class which afford the strongest confirmation of the views which refer their curative agency to the adaptations to modify the molecular changes going forward in the tissues and organs assumed to be the seat of the disease."

2. In a review of Rees's work on urinary diseases (see Med. Chir. Rev., Jan. 1846, p. 161), we read: "We have no particular fondness for apparent paradox, but think the remarks on some particular cases of *alkaline* urine depositing earthy phosphates, and treated with *alkalies*, too important to be omitted. There are cases in which the urine is supposed to be acid on its leaving the kidney, but by its irritation of the internal surfaces of the ureters and bladder, to produce so copious a secretion of alkaline mucus as to cause its own acidity to be more than neutralized, and the phosphates deposited. Dr. Rees thus states his reasonings, and the successful issue of the treatment suggested: 'It appeared to me that the use of *alkaline* remedies might be of advantage in these cases of *alkaline* urine, and moreover, if the alkali were administered in small doses, so as only partially to neutralize the acid state of urine

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as secreted by the kidneys, we might relieve the irritation of the mucous membrane, stop the excretion of alkaline matter, and have an acid urine excreted, the natural acidity having been only partially destroyed by our remedy. It may appear somewhat unaccountable to those who merely look to the chemical view of the matter, that any one should expect to render alkaline urine *acid* by the administration of alkalies; but such was the treatment I adopted, and the result fully corroborated the correctness of the theory which suggested it as a crucial test.'" A description of several cases follows, confirmatory of the statement contained above, and the Reviewer adds, "He has heard from another source of high authority, of the disappearance of phosphatic deposits under alkaline treatment. Dr. Rees does not propose this treatment as universally effectual, but affirms his certainty that 'in the greater number of cases in which *alkaline* urine exists with phosphates as a deposit, we shall find *alkaline* remedies of avail.'" The above affords a ready explanation why old school physicians have generally found it so difficult to render alkaline urine acid by means of acids. Watson says, "It is much more easy to correct too great acidity, than to rectify the opposite condition. We can almost always make acid urine neutral; but to render alkaline urine acid, is often beyond our power."

But Dr. Rees offers no explanation why he uses *acid* tonics and *muriatic acid* when there is a deposit of *lithic acid* from the urine. He says, "When the red crystaline form of lithic acid is excreted, it has been very commonly supposed that the chief benefit we can derive, is to be expected from the administration of alkaline remedies, which are known to correct the acid state of urine found in connection with the lithic acid diathesis, and moreover, to act as solvents on the acid deposit itself. It is a matter of fact, that alkaline remedies will constantly cause the urine of patients suffering from lithic acid deposit to become clear and transparent, and that the dysuria is generally relieved by the remedy; but I [Rees] have seldom known this *palliative* treatment attended by any lasting benefit." The Reviewer adds, "We have for some time past looked upon alkaline remedies as mere palliatives, in the treatment of the lithic acid disease, tending indeed to the amelioration of some secondary inconvenience, as that arising from the presence of acid in the stomach, or from lithic acid in the urinary passages, but being so powerless against the original sources of mischief, that they must be taken in continually increasing quantities, to keep the enemy at bay." But why does the Reviewer say that for some cases the *acid* tonics are justly stated

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to be beneficial? How do acids cure the lithic acid diathesis? Why is the use of hydrochloric acid in large doses strongly recommended? Is there any Homœopathy at the bottom of this?

3. On page 188 of the same Review, we find a short extract from Schoenlein, on the doctrine of post-scabial diseases. He says: "Of late years the recognition of post-scabial diseases, an ancient dogma in medicine, has not only been abandoned, but ridiculed and despised. In 1807, Autenrieth wrote an admirable memoir on the subject; it was by him, and not by Hahnemann, as is generally supposed, that public attention has been drawn to the subject in the course of the present century. I [Schoenlein] will frankly confess that I have no doubt myself as to the existence of post-scabial diseases. It has been frequently observed, especially in old persons, that a peculiar ulceration of the skin, more particularly around the joints of the legs, is apt to occur after the disappearance of a scabious eruption; and that, if this ulceration, the *Ulcus psoricum* of certain authors, be suddenly dried up, internal diseases of a decidedly peculiar description are apt to arise. As I have already said, there is no doubt in my own mind that itch is apt to occasion various consecutive maladies, and among these I may mention diseases of the heart."

4. In the seventh number of the New-York Medical and Surgical Reporter, p. 109, we find the following note from Dr. Clement Botsford: "I have lately treated a case of acute traumatic tetanus successfully with Strychnine. The disease was induced by a wound received in the plantar aponeurosis of the foot, by stepping upon a spiculum of bone. The characteristic tetanic spasmodic action commenced five weeks after the reception of the injury. The case was treated in the ordinary manner for the first forty-eight hours, with merely palliative effects; then, as the patient was rapidly getting worse, I gave her $\frac{1}{14}$ of a grain of Strychnine every two or four hours, according to the urgency of the symptoms. As soon as the system was brought fully under the influence of the remedy, indicated by *its peculiar spasmodic action*, the original spasms yielded and the patient convalesced rapidly."

This is one of the few instances in which no possible theoretical or practical objection can be raised against the homœopathicity of the cure, except that Watson states (see Practice of Physic, p. 312), "That in general the tetanus supervenes between the fourth and fourteenth day after the infliction of the

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injury; the longer, however, the disease delays its assault after the reception of the local injury, the milder in general does it prove, and the more room is there for hoping that it will end favorably;" hence, as the above case did not occur till five weeks after, the patient might have recovered without the Strychnine. However this may be, there can be no doubt about the homœopathicity of the treatment. Watson says, on the same page: "The symptoms produced by a poisonous dose of Strychnia, are the symptoms of tetanus; it is necessary, therefore, that you [his pupils] should be acquainted with the effects of this salt, which constitutes the active principle of the Nux vomica, Ignatia, and Upas tiente." By the mistake or negligence of the dispenser of the Middlesex Hospital, Dr. Watson had one grain of Strychnine administered to two patients, both of whom had paraplegia; in half an hour afterwards, one of them was seized with *tetanic* spasms of the head, trunk, and limbs; his head and trunk were bent backwards in a state of opisthotonos; his abdomen was quite hard, and his limbs stiff; even when the violence of the paroxysms abated, any attempt at motion, even the touching him by another person, brought on the tetanic spasms; this is just what happens in *true tetanus;* the opening of a door, a sudden current of air, the smallest bodily effort, the act of swallowing, &c., will suffice to bring them on. Dr. Watson truly asks: "Now, how are we to tell, when we meet with such symptoms as these, whether they are the result of tetanic disease, or of the effects of Strychnine? for the symptoms of Strychnine are the symptoms of tetanus, and I [Dr. Watson] know of no means of distinguishing them from one another; it is clearly necessary that our eyes should be open to the possibility of a case of poisoning with Strychnine being palmed upon us as a case of natural tetanic disease."

But the similarity does not end here. The anatomical lesions in tetanus, found by Imbert Gourbeyre, consisted in: Numerous ecchymoid spots upon the external surface of the spinal dura mater; collections of fluid blood for about five inches in the lower part of the spinal sheath; the spinal marrow shrunken and *softened* in its upper two-thirds; the pia mater of the spinal marrow could not be dissected off, on account of its close adherence to the softened portion; softening of the spinal marrow extending to the level of the occipital foramen, and ending at the anterior pyramids; softening of the cerebro-spinal axis, generally confined to the anterior, or motor columns, and this, together with effusion of blood into the spinal canal, are of pretty general occurrence in tetanus; inflammation of the nerve leading from the injured part, injection of its blood-vessels, oc-

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casional ecchymosis, and occasional softening and a dead lustre of the nerve itself, have also been frequently observed. In cases of poisoning with Strychnine, a similar *softening* of the spinal marrow has been found; hence the drug-disease and the natural disease correspond not only in their symptomatology, but also in their pathology.

In a recent discussion with Dr. Cox, of this city, about Homœopathy, the following article was excluded from the pages of the Medical and Surgical Reporter, in which that discussion was carried on; we therefore publish it here, rather from a sense of duty to the homœopathic art, than from any desire to have any further communion with such a man as Dr. Cox.

A FEW LINES IN REPLY TO DR. COX'S NOTICE IN THE LAST NUMBER OF THE REPORTER.

BY CHARLES J. HEMPEL, M. D.

Dr. Cox seems to insist upon misrepresenting Hahnemann. Dr. Cox makes Hahnemann say that "the totality of the symptoms is the totality of the disease." Hahnemann never expresses himself thus incompletely. I shall briefly quote those paragraphs of the Organon where Hahnemann speaks of symptoms, in order to show what meaning he attaches to the word.

§ 5. "When a cure is to be performed, the physician must avail himself of all the particulars he can learn, both respecting the probable origin of the acute malady and the most significant points in the history of the chronic disease, to aid him in the discovery of their fundamental cause, which is commonly due to some chronic miasm. In all researches of this nature he must take into consideration the apparent state of the physical constitution of the patient (particularly when the affection is chronic), the disposition, occupation, mode of life, habits, social relations, age, sexual functions, etc.

§ 6. "The unprejudiced observer (however great may be his powers of penetration), aware of the futility of all elaborate speculations that are not confirmed by experience, perceives in each individual affection nothing but changes of the state

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of the body and mind (TRACES OF DISEASE, CASUALTIES, SYMPTOMS), that are discoverable by the senses alone, that is to say, deviations from the former sound state of health, which are felt by the patient himself, remarked by the individuals around him, and observed by the physician. The *ensemble* of these available signs represents, in its full extent, the disease itself—that is, they constitute the true and only form of it which the mind is capable of conceiving.

§ 7. "As in disease where no manifest or exciting cause presents itself for removal (*causa occasionalis*), we can perceive nothing but the symptoms; then must these symptoms alone (with due attention to the accessory circumstances and the possibility of the existence of a miasm), guide the physician in the choice of a fit remedy to combat the disease. The totality of the symptoms, *this image of the immediate essence of the malady reflected externally*, ought to be the principal or sole object by which the latter could make known the medicines it stands in need of—the only agent to determine the choice of a remedy that would be the most appropriate. In short, the *ensemble* of the symptoms is the principal and sole object that a physician ought to have in view in every case of disease—the power of his art is to be directed against that alone in order to cure and transform it into health.

§ 8. "It is not possible to conceive or prove by any experience, after the cure of the whole of the symptoms of a disease, together with all its perceptible changes, that there remains or possibly can remain any other than a healthy state, or that the morbid alteration which has taken place in the interior of the economy has not been annihilated."

§ 12. "It is solely the morbidly affected vital principle which brings forth the diseases, so that the expression of disease, perceptible by the senses, announces at the same time all the internal change, that is, all the morbid perturbations of the vital principle; in short, it displays the entire disease. Consequently, after a cure is effected, the cessation of all morbid expression, and of all sensible changes which are inconsistent with the healthy performance of the functions, necessarily presupposes, with an equal degree of certainty, a restoration of the vital principle to its state of integrity and the recovered health of the whole organism."

And in order to show that the homœopathic system of healing disease, or the art of selecting a therapeutic agent which shall be homœopathic to the ostensible symptoms of the internal disease, and to the general pathological condition of the organism, has nothing in common with the so-called sympto-

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matic method, Hahnemann expressly adds the following in a second note to § 7: "Not knowing at times what plan to adopt in disease, physicians till now have endeavored to suppress or annihilate some one of the various symptoms which appeared. This method, which is known by the name of the *symptomatic*, has very justly excited universal contempt, not only because no advantage is derived from it, but because it gives rise to many bad consequences. A single existing symptom is no more the disease itself, than a single leg constitutes the entire of the human body. This method is so much the more hurtful in its effects, that, in attacking an isolated symptom, they make use solely of an opposite remedy (that is to say, of antipathics or palliatives), so that after an amendment of short duration, the evil bursts forth again worse than before."

From these paragraphs it appears that the quotation of Dr. Cox is a garbled misrepresentation, distorting the simple and beautiful meaning of the original into an unmeaning sophism *à la Cox.*

According to Hahnemann, symptoms are "the image of the immediate essence of the disease, reflected externally;" they constitute the perceptible changes which the forces of disease have wrought in the organism, and are the surest and the most essential guides for the selection of the proper therapeutic agent. How would Dr. Cox go to work to diagnose a disease, and to indicate a remedy for that disease, when there is a total absence of symptoms or perceptible anormal changes? How would he diagnose dry pericarditis without any indicating symptom? There may be no other symptom than the friction-sound of the pericardium, to diagnose the disease, but there must be that at least to establish the diagnosis. In the absence of symptoms, the greatest diagnosticians make mistakes in diagnosing diseases. In the last number of the Boston Medical Journal, there is a case reported of a malignant disease of the stomach, where it was absolutely impossible to establish a diagnosis for want of symptoms. De Haen, Rati Medendi, P. IX., p. 27, reports a case of gangrene of the stomach, where all the essential inflammatory symptoms were absent; the patient had neither nausea nor vomiting, and ate and drank until her last moment. Huguier reports a case in the Archives Générales, of February, 1834, where a patient in the hospital St. Louis, was treated for two years for hypertrophy of the heart, and where, after death, the heart was found sound, but the parenchyma of the lungs filled with tubercles. In the new Periodical for Medicine, by Dieffenbach, Fricke, and Oppenheim, Vol. 3, p. 440, a case is reported by Philipp of Berlin, where auscultation pointed to valvular disease,

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dropsy of the pericardium, and œdema of the lungs, whereas nothing was discovered after death but a thickening of the pericardium in several places, with enlargement of the left ventricle and thickening of its walls, and œdema of the lungs. Wynn, of Glasgow, has seen a case of complete degeneration of the kidneys, which was not indicated by any symptom. Horst has seen a case of total destruction of both kidneys, where the urine was emitted regularly and without any difficulty until the last day.

How would Dr. Cox proceed to establish a diagnosis in all such and similar cases? Can we know a disease in any other way except by the perceptible changes which it realizes in the organism? No matter by what sense those changes are perceived, the existence of certain anormal changes in the organism denotes the existence of a particular disease, requiring the administration of specific remedies.

The pathological changes are included in the changes alluded to above, and are of the utmost importance to a homœopathic practitioner. If Dr. Cox wishes to be convinced of that fact, he need but look in the last number of the Austrian Journal for Homœopathy, where the homœopathicity of Arsenic to a certain stage of typhus abdominalis is established upon purely pathological grounds, that is, upon the ground that the Arsenic and the disease in that stage realize similar phenomena in the ileum and the internal organs; or he may look into the present number of the Homœopathic Examiner, where he will find the homœopathicity of Nux vomica to tetanus established upon the similarity of the anatomical lesions realized by the poison, and the disease in the cerebro-spinal axis.

I beg leave to terminate this chapter on symptoms by a quotation from an article on physiological medicine and homœopathy, by Dr. Müller, of Leipsic, who is one of the authorities in the homœopathic school: "However correct the principle similia similibus may prove in its application to the treatment of disease, yet it cannot be said that a remedy cures a disease because the symptoms of the drug are similar to those of the disease; the similarity of the symptoms is simply an indication of the specific action of the drug upon the affected organ. The cure of the disease can only be effected on condition that the agent which we select for that purpose should be capable of opposing the morbid action. This is a point which it is left to the ingenuity of the physician to decide. The success of that opposition depends not only upon the similarity of the symptoms, but the whole pharmacodynamic action of the drug requires to be adapted to the pathological process."

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The similarity of the symptoms is not sufficient to a cure; to effect a cure the physiological action of the drug and the pathological character of the disease must correspond. The illustrations by which I have endeavored to elucidate that doctrine, seem to be beyond the comprehension of the intelligent Dr. Cox, and he therefore terms them "twaddle."

As regards Dr. Forbes, these are his words about Fleischmann's tables: "We cannot, therefore, refuse to admit the accuracy of his statements as to matters of fact; or, at least, to admit them, with that liberal subtraction from the favorable side of the equation which is required in the case of all statements made by the disciples and advocates of new doctrines. *Even after this* rectification, we see that enough remains to justify the inference above deduced." What is that inference? It is this, that "these tables substantiate this momentous fact, that all our ordinary curable diseases are cured, in a fair proportion, under the homœopathic method of treatment. Not merely do we see thus cured all the slighter diseases, whether acute or chronic, which most men know to be readily susceptible of cure under every variety of treatment and under no treatment at all; but even all the severer and more dangerous diseases, which most physicians, of whatever school, have been accustomed to consider as not only needing the interposition of art to assist nature in bringing them to a favorable and speedy termination, but demanding the employment of prompt and strong measures, to prevent a fatal issue in a considerable proportion of cases."

The homœopathic hospitals in Vienna are under the strictest and immediate superintendence of the government; even if Dr. Fleischmann would, he could not possibly practise deception; the cases admitted into his hospital, their nature and treatment, are verified by superior medical officers appointed for that purpose, and opposed to homœopathy; how then could Fleischmann deceive any one? His honesty is proverbial in Vienna.

As regards *Aconite*, I have shown Dr. Cox that Professor Maly, of the university of Grætz, in Austria, has proclaimed it to his classes as the best antiphlogistic in inflammatory diseases. From Constatt's Encyclopedia of last year, Dr. Cox may learn that Maly is at least as good an authority in medical matters as Dr. Cox.

But we learn from the July number of the Half-yearly Abstract of the Medical Sciences, edited by W. H. Ranking, M. D., and from the twelfth part of Braithwaite's Retrospect, that "the most important contribution to our knowledge of the

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materia medica that has appeared during the last six months, is undoubtedly Dr. Fleming's treatise on Aconite."

"As an agent capable of depressing vascular action, it possesses considerable power, and is said by the author to be superior to venesection, mercury, and purging, in his respect, that it may be continued for weeks without producing any unpleasant effect." Half-yearly Abs., p. 59.

With respect to the action of Aconite on the cerebro-spinal and muscular systems, Dr. Fleming finds:

1. That it is calmative, anodyne and antispasmodic.

2. That it is an advisable antiphlogistic in apoplexy, phrenitis, or any disease in which the circulation of the brain is excited.

3. That it is a powerful antiphlogistic.

4. That it is calculated to be of great value in all cases where there is inordinate activity of the circulation.

5. That it will probably be found a highly advantageous antiphlogistic in pneumonia, pleuritis, etc.

He recommends it in those cases of sciatica which appear to depend upon a congested or inflammatory condition of the nerve; in acute rheumatism, some cases, according to his tables, having been cured in two days, one in three, and six in four; whereas the ordinary treatment of those cases, according to Fleming's statement, would have lasted from a fortnight to three weeks.

It is unnecessary that I should make any more extracts from Dr. Fleming's treatise, which has been honored with the gold medal by the university of Edinburgh; suffice it to say that Fleming recommends Aconite for the very diseases for which Hahnemann recommended it thirty years ago, and for which Maly recommends it in Grætz, Henderson in Edinburgh, and Amador, the professor of pathology, in Montpelier.

I have quoted Rush to show that even such a distinguished allopathist considered venesection as a desperate remedy, which he would be glad to relinquish for one more suitable. I may here reiterate, that simple, uncomplicated pleurisy is cured in from twenty-four hours to three days by every wel-linformed homœopathist, as may be proved by hundreds of witnesses.

Dr. Cox's bold assertion that homœopathists bleed in inflammatory diseases, is a reckless falsehood; he knows that it is.

As regards the secondary itch-diseases, Dr. Cox gives up, and tries to save himself from the shame of a defeat, by italicizing the word "established." I had always supposed that to

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establish a point or position, meant to state it, to set it up; I have since been informed that to establish a position means to demonstrate it as true, which was not the meaning I desired to convey. I simply meant to say that Dr. Hebra had set up or stated certain points about the acarus. As a matter of course, every man has a right and ought to believe what is known to be a fact. I have no objection to Dr. Cox's enjoying his italics to his heart's content, or to his believing that Beer's case may have been a case of paralysis of the optic nerve; every man of sense will agree with Beer and Schoenlein, that it was a case of repelled itch. On page 188 of the Med. Chir. Review, Dr. Cox will find Schoenlein's opinion of post-scabial diseases, stated in brief as follows:—"Of late years," says Schoenlein, the recognition of post-scabial diseases, an ancient dogma in medicine, has not only been abandoned, but ridiculed and despised. In 1807, Autenrieth wrote an admirable treatise on the subject, etc. I will frankly confess that I have no doubt myself as to the existence of post-scabial diseases. It has been frequently observed, especially in old persons, that a peculiar ulceration of the skin, more particularly around the joints of the legs, is apt to occur after the disappearance of a scabious eruption; and that, if this ulceration, the *ulcus psoricum* of certain authors, be suddenly dried up, internal diseases of a decidedly peculiar description are apt to arise. As I have already said, there is no doubt in my own mind, that itch is apt to occasion various consecutive maladies, and among these I may mention diseases of the heart."

What I have said of Sulphur as a specific for the itch, I now repeat. Sulphur *is* the grand specific for itch, although certain varieties may be and are cured by Mercury, others by charcoal, others again by other remedies, in our practice at least. But that was not the point; the point was whether the Acarus causes the itch, for in that case the mere destruction of the Acarus must suffice to cure the itch. Dr. Cox knows that the administration of certain specifics, such as Sulphur and Mercury, is indispensable to the cure of the itch. Slippery as Dr. Cox is, he shall not slip through my fingers in this instance, and I shall nail him to the point.

Dr. Cox's insinuation that the increase of mortality in the year 1845 in New-York city is chargeable to Homœopathy, has been met by Dr. Kirby, editor of the American Journal for Homœopathy, in the following manner:—"'The author (Dr. Cox) says, 'one death to a hundred among sick people, is about the mortality of last year in the practice of sound physicians.' Now, as those who practice homœopathically cannot

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be 'sound' in the opinion of our author, we will, for the sake of illustration, suppose that these meet with three deaths in every 'hundred sick persons.' That physician in private practice who treats two hundred sick people in a year, may be said to have a large practice, which our friend, the author, from his own experience, will not gainsay. Therefore, thirty-five homœopathists (there are but about fifteen thorough ones) would lose six patients each, making two hundred and ten out of ten thousand eight hundred and fifty-one. Upon whom, therefore, rests the responsibility of the balance? The author must divide it among his associates who oppose homœopathy. But we challenge investigation of the certificates of death filed in the City Inspector's office in 1845, and we do not believe that those signed by the homœopathic physicians amount to fifty."

The case Dr. Cox alludes to, is so foolishly and vaguely stated, that I deem the further consideration thereof entirely unnecessary and uninteresting.

As regards the selling of medicines, no homœopathic physician *sells* his medicines, as allœopathic doctors do; we give all our medicines *gratis*, and never charge a copper for them.

Here is what Hahnemann says about clairvoyance in his first note to § 294 of the American edition of the Organon:—"In treating here of the certain and decided virtues of positive mesmerism, I do not speak of the frequent abuses that are made of it, where by repeating the passages during half an hour, and even a whole hour, daily, they occasion, in patients laboring under nervous affections, that vast revolution of the human economy which bears the name of clairvoyance—a state in which man, removed from the animal world, appears to belong more to the spiritual world, a highly unnatural and dangerous condition, by means of which a cure of chronic diseases has frequently been attempted."

A man must truly be a desperate falsifier of facts to indulge misrepresentations such as Dr. Cox makes himself guilty of.

I now take leave of him, reminding him of the friendly warning of Apelles to the shoemaker:—"Ne sutor ultra crepidam!"

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DYNAMIS.

By dynamis, Hahnemann understands the power or virtue of a medicinal agent. In the crude agent that power resides in a latent state: it is scarcely perceptible to any of our senses; but it becomes manifest as soon as the agent is broken up in fragments, and the development of that power to our senses increases in proportion to the extent to which the splitting up of the crude drug is carried.

What the inmost nature of that power is, we cannot tell; but it is no abstraction, nor is it a property of the drug in this sense that the annihilation of the material drug would make the annihilation of the dynamis a necessary consequence. The color or savor of a drug, the influence which it exercises upon the organism, are not something belonging to the material part of the drug, although they seem to be material properties; they do not grow out of the material constituents; the material constituents are merely the vehicles of what we have been in the habit of terming the properties of drugs. These properties are immaterial substances which act upon this globe through the sun and atmosphere, and, by a process unknown to us, assimilate material molecules to themselves, penetrating and fashioning them until the substratum of the immaterial agent shall have been completed.

It will be seen from the foregoing remarks, that what is said of the properties of drugs, may likewise, and ought to be said of the properties of any other created substance. The perfume of the flower does not come out of the flower, but the flower is the substratum of an immaterial principle residing in the flower, the hues and the fragrance of the petals being the most beautiful manifestation of that principle.

What makes one assemblage of material molecules to be gold, and another to be silver; one the majestic oak, another a humble fungus; one a poison, another a useful vegetable? It may be said, the fiat of God. True, but God does not issue a special fiat for each single reproduction of each single substance in Nature. From the regularity of all the movements in the great whole, from the harmonious and progressive evolution and the periodical recurrence of its phenomena, we may safely infer that God has appointed vicegerents, mediate causes through which the great mechanism maintains and regulates

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itself, and continues as it were its own creation from God. In other words, God makes the rose, but he makes it through some immaterial agent, which becomes fixed or embodied in material molecules, and in this way becomes perceptible to our senses.

When a fragrant flower is left in a room for a time, that room becomes filled with the perfume of the flower. This perfume is one of the manifestations of the immaterial creative principle residing in the flower. The hues of the flower are a second, its shape a third, its taste a fourth, its action upon the nerves a fifth. Or it may be said that these different so called properties of the flower are results or embodiments of five distinct immaterial creative principles combined according to a certain law of order, of which we have no other cognizance except the thing combined.

In regard to drugs, we have so far been principally concerned with their medicinal or dynamic power, which is one of the immaterial principles embodied in the drug. We know from experience that we may take the berries of Belladonna, or the capsule filled with the seeds of Stramonium into our mouths without being much affected by them; but on swallowing them we begin to feel their poisonous effects as soon as they are split up in the stomach; the reason of this is that the immaterial principle which was latent in the crude drug, is set free, and is permitted to pervade the organism.

I know that many scout the idea of immaterial creative principles, but they are illogical minds that will not advance the cause of true science one hair's-breadth. A man who cannot see that the cause is contained in its effect, and that the effect becomes nothing as soon as the cause which, by its presence, makes it to be what it is, is removed from it, is too much of a materialist ever to be a sound physiologist or practitioner of medicine.

Doctor D'Amador, the distinguished Professor of Pathology in the University of Montpelier, has lately read a paper on the subject of immaterial agents, before the Scientific Congrès at Nîmes. The title of his paper is: "On the Action of Imperceptible Agents on the Living Body." Professor D'Amador, though occupying the Pathological chair in an Allopathic University, is a declared adherent of Homœopathy; and the European reputation which his profound learning and brilliant talents have gained him, render peculiarly interesting any thing proceeding from his pen. Want of space forbids us giving

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more than a brief analysis of the memoir whose title we have given above; but a careful perusal of the original, which is to be found in the 2nd vol. of the "Bulletin de la Societé Homœopathique," p. 131, will amply reward all who take an interest in the truly scientific development of Homœopathy.

The author commences by asserting, that all actions and impressions whatever in a living body are entirely vital or dynamic. Hence food, poisons, viruses, miasms, and all the different kinds of stimulants that are applied to the economy, as well internally as externally, cannot have, and, indeed, have none other than a dynamic action; and hence, almost all that has hitherto been attributed to absorption, is destitute of foundation, and on examination is found to be false.

In proof of this assertion he cites various facts from the domains of hygiène, physiology, toxicology, and pathology. It may be said that light, heat, water, and oxygen,—that is to say, all that is most subtle, most ethereal, and least material in creation, are the true aliments of life. Not to mention those extraordinary but authentic cases where life has been prolonged, during months and even years of total abstinence, other and more familiar examples of this fact are not wanting. The development of the chick, strictly secluded from all external influences; the production of a beautiful flower from the bulb, which receives no other nourishment than the vapor of water; the growth of vegetables, on cloth, in well washed sand, in litharge, in flowers of sulphur, in unglazed leaden shot, supplied with no other nourishment than distilled water; but, nevertheless, presenting on analysis all the constituent parts of the same vegetables growing in the richest soils, as shown in the experiments of M. Braconnot, are striking illustrations of this fact; and the observation of them drew from M. Braconnot this remarkable expression: "Oxygen and hydrogen—that is, water aided by the heat of the sun—appear to be the only elementary substances whence the universe was formed."

The function of digestion, apparently the most material and most chemical of all functions, is the most purely vital in its causes. Hence it is that the quantity of the nutritive substance is often the least important part, and that attention should be more particularly paid to its exciting quality and stimulating power. The dynamic effect of fluid aliments is still more evident; their result is rapid, often instantaneous. Set before a person worn out with fatigue the most substantial viands; he will scarcely touch them, and will not at first experience any benefit from them; but give him the smallest

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quantity of brandy, and in an instant he feels its beneficial effects.

The subject of fecundation furnishes our author with a fruitful source of illustrations for his doctrine; and the experiments of Spallanzani with the ova of the frog, the impregnation of women where the hymen was still perfect, the observations of Harvey, with respect to the fecundation of bitches and rabbits, in whose wombs no traces of semen could be discovered, are successively adduced.

"And again," he asks, "what are relative greatness and smallness in the case of the seeds of vegetables, but a mere *lusus naturæ*? Who could believe that invisible seeds of plants are continually suspended in the atmosphere?—that those of mosses, of fungi, of lichens, elude our eye and float invisible in the circumambient air? Who could believe, if experience did not prove it to us every day, that within the case of a seed, which, from its minuteness, cannot be perceived by the microscope itself, there is contained the power that shall one day produce a vegetable? Who could believe, in fine, that in the embryo of the acorn there exists, in infinitely little, the largest tree of the forest, which only stands in need of development? According to Dodart, an elm can produce, in a single year, 529,000 seeds; Ray counted 32,000 on a stalk of tobacco. If all these seeds should come to perfection, it would only require a few generations, and a very small number of years, to cover the whole surface of the habitable globe with vegetables. If, then, atoms can produce an entire being, why should we tax them with impotence when the question is about merely modifying a being? If an atom gives life, is it more difficult to conceive that it may change the mode of being? When *the greater* exists and starts up before us in the processes of nature, why should *the less* be declared impossible?"

From the department of toxicology the learned Professor instances, in support of his views, the violent effects of a drop of prussic acid; the arsenical preparation celebrated in the 16th and 17th centuries, under the name of *Aqua toffana*, which killed with the rapidity of lightning; the poison of the wasp, hornet, and bee, the smallest atom of which placed on the tongue burns it as severely as the most concentrated mineral acids; the virus of the scorpion, of certain spiders, and of serpents; the fresh water polypus, which, of all poisonous animals, possesses the most active venom. The experiments of Fontana show that the *thousandth part of a grain* of the poison of the viper, inserted in a muscle, suffices to kill a spar-

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row. Some plants furnish poisons which surpass in their effects, the most corrosive metallic poisons. De la Brosse, in his *Voyage aux regions intertropicales*, has these words:— "There arrived seven or eight negroes in palanquins, the principal personages of Lowango, who presented their hands to be shaken by the French and English officers. These negroes had previously rubbed their hands with an herb, which is so extremely poisonous that it takes effect in a moment. They succeeded so well in their nefarious designs, that five captains and three surgeons fell dead on the spot." De la Brosse does not mention how the negroes preserved themselves from the effects of the deadly poison they had in their hands.

The effluvia exhaled by certain plants, the dew or drops of rain that fall from their leaves, can produce injurious effects, as is said to be the case with the mancinilla and the rhus toxicodendron.

From pathology the Professor cites the following facts:— The minute quantity of matter from the malignant carbuncle, and of saliva from the rabid dog, which are sufficient to transmit these diseases; the imperceptible nature of the miasms, which produce respectively syphilis, small-pox, the plague, cholera, and the instantaneous manner in which they infect the organism; for although the morbid state is not manifested, it may be, until after the lapse of a considerable time, this only proves that the internal disease requires that time to ripen and fructify, in the same manner as the flowering of the vegetable announces its maturity, or the development of the fœtus shows that conception has taken place.

The comparison of the disease to the flowering of a plant has given rise to some useful practical reflections by Professor D'Amador, which we shall here quote:—

"An individual is affected to-day with some morbific germ, but the products of the infection do not appear externally until after the lapse of four, six, eight, fourteen days, or even a month. The interval which elapses between the moment of infection and that in which the disease manifests itself, is the period of the germination and growth of the inoculated germ; it corresponds exactly to the latent and unnoticed stage during which the seed buried in the earth undergoes a fecundating incubation. The eruption and all the other symptoms are but the development of the morbid germ, as the flowering and fructification of the plant represent the visible evolution of the germ. Hence I affirm, that what modern pathology regards as the root of diseases, *e. g.* the exanthemata, is the veritable, the sole cause of the terrible ravages they commit on man-

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kind. What should we say of the agriculturist who, in order to modify the life of the tree, should direct his attention to the flowers and fruit, and neglect the roots? The therapeutists of the present day do this; and I shall leave it to your sagacity to say what will be the ulterior consequence of such conduct.

"In truth, the destruction of its flowers or fruit does not cause the death of the vegetable; and thus it is with syphilis, and psora, and other eruptive diseases. To cauterize, dry up, or otherwise forcibly destroy chancres, is but to give new strength to the disease: as plants acquire fresh vigor from being pruned, and in the following spring shoot forth more luxuriant flowers. After the material destruction of their external signs, which may be regarded as the product of fructification, they send forth new flowers, which medical men have the simplicity to regard as a new disease."

The above is a brief outline of the facts presented to our attention in the paper of Professor D'Amador; but its chief interest lies in the conclusions to which the author arrives, which can hardly fail to attract the attention and convince the understanding of the numerous adherents of the Montpelier or dynamic schools, which boasts of following out the principles of Hippocrates, and whose ablest exponent finds in the writings of Hahnemann the complement of the doctrines of the sage of Coz.

After adducing the well-known facts of the chemical purity of the air in localities where ague, the plague, the cholera, or epidemic diseases are committing their ravages; after observing that the contents of the poison-bag of the viper resembles in chemical composition sweet almond oil; that the pus of the pestiferous bubo, the lymph of the vaccine pustule, differ not, save in their effects, from ordinary pus and lymph; he infers that the material we subject to our analysis is but the vehicle in which an immaterial ethereal virus resides, analogous in this respect to the vivifying principles of the organized being. But we shall give his own eloquent words.

"What, gentlemen, can we conclude from all this, but that pathology resembles other branches of our science? What can we conclude, if not that a morbid cause is always, and under all circumstances, the product of a force, and that the material form in which it presents itself to our view, is but the gross covering that conceals it from us: that external forces only act on our organs when they meet with forces in us on which they can act: hence the invisible, the instantaneous character, the celerity of pathogenetic actions, whether of con-

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tagions, or of epidemics, or of the natural or artificial inoculation of diseases. In all cases it is forces which meet, combat, combine, repel, neutralize each other, or mutually regulate one another. Our health, disease, death, our very existence, is but the result of these forces. Thus it is that nature, in the immense scale of being, has sketched, as it were, an entire system of forces, and that passing from forces which are not precipient to those that are, from inanimate to living forces, she has, by gradually progressive shades, at last developed in man the supreme type of forces, and the most elevated degree of existence. In man, indeed, life does not exist solely in sensible and irritable organs, in the involuntary motions they execute, nor in the connected chain produced and maintained by the combined actions of life. In man, true life consists in thought, in that intellectual something which gives us consciousness of our existence, and in that power of will which renders us masters of ourselves. Such is life at its culminating point, force *par excellence*, the greatest, the most profound, the most inexplicable of all mysteries. Life, which not only gives us the enjoyment of ourselves, but which attaches us to all that surrounds us. It is by means of it that the grand spectacle of nature attracts our attention, that our ideas dart from pole to pole more rapidly than lightning; it is by means of it that thought embraces in its grasp in a moment of time the whole expanse of worlds, all the vast extent of the universe, and loses itself in infinity.

"There is, then, in every science, and particularly in medicine, both sensible facts which are seen, and invisible facts which can only be conceived, both demonstrable and inductive facts, both facts which are apparent, and such as are more concealed, which, without being seen, regulate and govern the other facts. It is these invisible and only essential facts that alone are important, for they are the generators of other facts; and in every case that which is not seen governs that which is visible. These facts are the various forces of nature. These forces are at the bottom of all visible phenomena, they produce them, they modify them for good or for evil, and, since they are the true causes, if we modify them we shall modify the phenomena themselves. 'For the true springs of our organization,' as Buffon remarks, 'are not those muscles, those veins, those arteries, which are described with such exactness and care. There exist in organized bodies, internal forces, which do not follow the gross mechanical laws we imagine, and to which we would reduce every thing.' This thought has been expressed in different terms, by a man as great in the astro-

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nomical, as Buffon was in the physical sciences, whose name corresponds in France to that of Newton in England. 'Beyond the limits of this visible anatomy,' says Laplace, 'commences another anatomy whose phenomena we cannot perceive; beyond the limits of this external physiology of forces of action, and of motion, exists another invisible physiology whose principles, effects, and laws, it is of greater importance to know.' And we may add, that beyond the limits of these material and voluminous therapeutics, there are other therapeutics far more important to know and far more useful to practise.

"Thus the greatest men, of whom the sciences usually opposed in spirit to medicine can boast, are unanimous in the admission of a vital dynamism; and I imagine, gentlemen, I have a fair title for obtaining your assent to this great dogma, by placing it under the ægis of these illustrious names.

"I have thus, I conceive, proved to you that the most active agents in nature are imperceptible entities, which, like electricity, magnetism, heat, and light, have neither odor, savor, color, volume, dimensions, determinate shapes, nor definite proportions; which pervade all things without being any where perceptible; which govern all things without being seen themselves; which penetrate every where, but whose essence we cannot penetrate. Agents of life, of health, of death, and of disease, nature has disseminated them every where throughout the immensity of space, under the graceful form of flowers, in the fluids which are appropriated or rejected by animals and plants. To these invisible agents, to these forces we owe our earliest breath; to them also is due our latest sigh; from them alone is derived the continuance of our existence, and they are the source of the derangements we are subject to. Physiology, hygiène, toxicology, and pathology, in other words, the sciences of life, of health, of death, and of disease, are all dependent on the same principle; for it is a force, a breath, that creates, kills, preserves us, that produces our diseases, and occasions our sufferings.

"It remains to be proved, gentlemen, that therapeutics are, and ought to be, similar to the other departments of our art,—that it is also a breath, a force, that cures and relieves our disorders. It remains to be proved, in order to trace the complete scientific circle, that the therapeutics of forces, the dynamic therapeutics, the vitalist therapeutics, (for they are all the same,) are likewise, of all possible therapeutics, if not the only true, at least the speediest, the surest, the most appropriate, and, in the vast majority of cases, the most efficacious of all therapeutics; that they are the most rational in theory and the

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most successful in their practical application; that they alone ought to be, that they alone are, able to realize the three grand conditions that Celsus, even at the early period when he flourished, demanded of all useful therapeutics, to cure diseases quickly, certainly, and agreeably. In a word, it remains to be proved, that if there be a dynamical, a vital physiology, hygiène, toxicology, and pathology, there ought to be therapeutics of a similar character."

After quoting some facts from Allopathic observers to prove that such is the case, among others the experiments of M. Lafarge, who always succeeded in producing an eruption of a specific character by the inoculation of the most minute portions of laudanum—1-500th, 1-1000th, 1-2000th of a grain, and the observations of M. Soubeiran with respect to the efficacy of extremely minute doses of a certain ferruginous preparation, our author goes on to say:—

"But it will be said, these facts may be true, but they are repugnant to common sense. Gentlemen, if the action of imperceptible agents is opposed to common sense, that is as much as to say that experience is opposed to it; but as common sense and experience are not, and cannot be contradictory, if common sense refuses to believe in the action of imperceptible agents, common sense stands in need of a thorough reform, which experience will be able to effect. Science, which is nothing else than the reflection of experience, has, in this manner, reformed common sense several times. Common sense believed for centuries that the world was fixed, and astronomical science corrected common sense, and brought it to its own way of thinking. The virtue of vaccine was repugnant to common sense, at the period of its discovery; but, now-a-days, experience has so completely demonstrated it, that any one who doubted it would be held to be destitute of common sense. In fine, common sense rebelled, and with some reason, against the frightful doses of the Italian school. It could not be comprehended how twenty grains of tartar emetic would not produce vomiting, when two grains caused copious evacuation; but here again, as elsewhere, science—that is to say, experience—has advantageously put common sense to rights.

"And should we, with this before us, treat with contempt a system of therapeutics which is but the application of one of our most certain maxims? To the diseased vital forces let us oppose the forces of natural substances, but divested of all material covering; these forces will thus be brought face to face; they will act directly on each other, without any inter-

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posing agent; and hence will ensue more rapid, more certain, and more agreeable cures. * * * Observe, finally, gentlemen, that the vital therapeutics of which I speak are to medicine what the study of electricity and the imponderables has been to chemistry,—what the study of motive powers has been to mechanical art. * * * Far from overthrowing Hippocratism, or the true vitalism of Montpelier, our modern therapeutics confirm, complete, extend, and apply it, add what was wanting to it, and supply its deficiencies. The Divine Old Man bequeathed to us, so to say, the code of medicine, in which its great laws were laid down, its principles registered, its fundamental dogmas established; the work of ages is and ever shall be to deduce from these premises the most remote consequences; to bring all the great facts which subsequent discoveries may reveal and produce within the Hippocratic domain. Some of these discoveries have been already gathered in, and can never more be lost; others have been sown, and as yet exist but in the germ; but nought can blast this germ; on the contrary, it will grow, and the tree will yield its fruit to us and to all posterity."

HOMŒOPATHIC CURES,

From the year 1840 *to* 1844, *collected from the various Homœopathic publications, by Dr. Kurtze, of Dessau.*

TRANSLATED BY CHARLES J. HEMPEL, M. D.

(Continued from No. XII. of the Examiner.)

CATARACT.

A female of thirty-one years, who had not had her menses since her last confinement, for a year past, was attacked with typhus, after which she was affected with dimness of the lens on both eyes, so that she saw every thing as if through a mist, and was only able to distinguish the coarser outlines. (Took Pulsatilla I. for five weeks, Sepia 4, Cannab. I.) *Lycop.* 4. The menses appeared after the lapse of six days. The sight improved very much after another fortnight, and was entirely restored within three days. (*Hygea.*)

Silicea 30, three pellets at intervals of six to eight days, is said to have cured the cataract of a peasant of twenty years of

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age, who had been suffering with weakness of sight for some years past, and with frequent ophthalmia, which was especially apt to be brought on by damp weather. (*Archiv.*)

AMAUROSIS.

Incipient amaurosis of nervous persons, which was especially characterized by the seeing of colors, has been cured by *Bellad.* 3, one drop, two or three times a day, for eight days or a fortnight. (*All. hom. Zeit.*)

Plumbum has frequently been of service in amblyopia amaurotica, especially in the case of a shoemaker of forty years, of a cachectic disposition, resembling chlorosis. (*Hygea.*)

Arnica 2, one drop daily for sixteen days, has cured a case of perfect amaurosis brought on by a fall upon the head. (*Hygea.*)

Scherer praises Pulsatilla, from one to eight grains of the extract, in abdominal amaurosis. Immobility of the iris, which is pressed forward; dilatation of the pupils, especially in a transverse direction; blackish circle around the margin of the pupils; the conjunctiva is yellowish and varicose. Constipation, hæmorrhoidal sufferings. Curative symptoms are: lachrymation, pain in the eye and eyebrows, mobility of the iris. For varices of the conjunctiva the extract of Arnica has been used with the best success. (*Hygea.*)

A watchmaker, of twenty-six years, had been affected with pain in the eyes for fourteen months past (irritation of the retina?) so that he was unable either to work or read; under the upper external border of the orbits something hard was felt, resembling an exostosis, which made the globe of the eye and the interval between the lids appear smaller; a similar induration was seen on both sides of the lower jaw; weight in the stomach, heartburn. Took Acidum phosp., a few drops in two drachms of distilled water, one drop several times a day. The heartburn was less on the third day; the tumors diminished on the seventh day, the sight was less difficult. Clouds hovered before his eyes on the fifteenth day. (Bellad., Cannab. (Sulphur improved the sight for several days considerably; the patient complained yet about the stomach. Took *Anac.* (one pellet, morning and evening). The improvement continued, so that the patient was able to read the news, after a fortnight. Tincture of Anac. Complete recovery after four weeks. (*Peschier.*)

PHOTOPSIA.

A man of twenty-four years, slender, thin, of delicate bones and pale complexion, had had the itch twice four years ago,

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which had been repelled by an ointment. For the last four years he had been affected with the following symptoms: constant pressure in the temple and forehead, often only on one side, increased by the pressure of the hat, not changed either by motion or by lying down; undulating sensation in the head; constant burning of the eyes, which glisten in a peculiar manner; constant dry coryza; little appetite, and is immediately attacked with diarrhœa after eating food which is not of a very easy digestion. Within three months he took Sulph. 3, Bell. 6, Nux vom. 3, Calc. carb. 6, Sulp. 24.—Nux vom. increased the headache, Calc. and especially Sulp. the ophthalmic affection; after using those remedies, including Petroleum 3, the following symptoms remained: burning of the eyes and shooting stitches, photophobia, luminous oscillations in daytime, in the dark, and from evening until deep in the night the patient saw an ocean of fire with increase of the pain, the sclerotica was pale-reddish, the face deadly pale. Took tincture of Phosphorus, 20 drops in one drachm of spirits of wine. All the symptoms had disappeared in the third week, except a little headache. (*All. hom. Zeit.*)

A very nervous lady of thirty years, whose eyesight was affected, had been suffering for fourteen weeks past with constantly increasing photopsia. It was removed within eight days by a cold infusion of China, and then by a saturated decoction. Remained well. (*All. hom. Zeit.*)

For the last few weeks a man had been liable to the following paroxysms, which recurred without any special cause every quarter of an hour at indefinite periods: he saw figures and colors before the left eye, even when closed, which were constantly changing, accompanied with loss of appetite and great disposition to vomit, without any diminution of sight, which was a little misty when the paroxysm had reached its acme; several hours after he felt violent headache (a sticking pain when coughing or sneezing, like a plug over the right eye), with dizziness and a sensation as if he did not see distinctly, continuing through the night and ceasing toward morning. (Dig., Nux vom., Ignat.) Used both poles of a horse-shoe magnet. On the third day all the symptoms had disappeared. (*All. hom. Zeit.*)

OPERATIONS UPON THE EYES.

After operations upon the eyes, Aconite appears to be the chief remedy (whereas Arnica does no good). Frequently Aconite is sufficient. Violent stitches in the eyes and temples, in persons of a weak temperament, are relieved by Ignatia; vio-

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lent pains with vomiting by Bryonia; darting pains with vomiting and lienteria by Asarum; burning pains with diarrhœa by Arsenic; beating and darting pains in the eyes by Crocus; sticking pain emanating from the temples by Thuya. Senega favors the absorption of the lens if it breaks in pieces during an operation. If the sight is disturbed by colors after the operation, Strontiana is a specific, especially if all things seem to be inundated with blood. (*All. hom. Zeit.*)

AFFECTIONS OF THE EARS.

A girl of eleven years, otherwise healthy, had been affected for years with frequent paroxysms of violent pain in the ears with roaring, pulsations in the ear, increased sensitiveness to sound, tension and pressure in the surrounding parts, discharge of pus and blood. Took *Puls.* 12, four pellets, six doses (and Silica 30 as an intermediate remedy); has been well for five years past. (*Hygea.*)

A woman of fifty years, of a weakly constitution, cachectic, had been frequently attacked with dyspepsia, and once with itch; for six weeks past she had perceived a considerable diminution of hearing with violent roaring. (Took Sulp., Puls., Calc. c. for three weeks in succession;) Lycopodium removed the affection permanently. (*Hygea.*)

A very sensitive and otherwise healthy girl had been affected for four weeks past with difficulty of hearing, with ringing in the ears, disappearing in rest, and returning by the least movement. Nux vom. 1 removed the affection after the second dose. (*Hygea.*)

Petroleum had no effect in several cases of diseased hearing, characterized by a deadly stillness in the ears and a deficient secretion of wax, even when administered in larger doses. (*Gross, Archiv.*)

AFFECTIONS OF THE NOSE.

Acidum nitr. 6 and 9, in the evening, has frequently cured ozæna and ophthalmia scrofulosa. (*Hygea.*)

A boy of eleven years had been affected with erysipelas of the face, in consequence of which he suffered with inflammatory interstitial distention of the Schneiderian membrane, with violent headache, stupor, delirium, and evening fever. After taking Aconite, Bell., Rhus, Calc., Lycop., from the 5th to the 16th day, nothing remained but a painless swelling of the protruding membrane. Was cured in six days by inhaling three

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times a day the recent powdered leaves of Marum verum. (*Archiv.*)

In inflammations and suppurations of the antrum Highmorianum and the frontal sinus, Goullon saw no effect either of the iodide of potash or Aurum, etc., whereas Arsenic removed very soon the quotidian typical pains (beating, distending), and sometimes the whole disease. If there remained a thickly, lemon-colored secretion, it disappeared after Lycopodium; the urine depositing in that case a red sediment. (*All. hom. Zeit.*)

Arnica used internally and externally, cured, within twenty-four hours, a bleeding from the nose, which had been occasioned by a blow, and had continued for six weeks. (*Bibliot. Homœop.*)

Crocus has cured several cases of chronic bleeding from the nose, when all other remedies failed. (*Bibliot. Hom.*)

Sulphur has frequently cured frequently recurring attacks of dangerous bleeding from the nose.

AFFECTIONS OF THE TONGUE.

A child of three years, and otherwise healthy, was affected with the following symptoms: considerable redness of the tongue and palate, swollen, full of white vesicles; wants to drink all the time; fever. Took Merc. sol. 12, four pellets, two doses, one every twenty-four hours. Cured in two days. (*Hygea.*)

A lady of seventy years, with strong veins, choleric, sitting a good deal, had been affected with hæmorrhoids and arthritis vaga for a number of years; for the last four weeks she had considerable swelling of the tongue, which was red as blood, covered with varicose veins, burning, tensive. (Used leeches, cathartics, after which the paroxysms increased.) Took Pulsat. 12, two drops a day in two doses. The next paroxysm set in in three months; then after six, and after nine months, very feebly; the same remedy helped all the time. (*Hygea.*)

A woman of fifty-five years, sometimes affected with pain in the small of the back and itching of the anus, had been suffering for six months past, especially in the morning and after eating or drinking hot things, with burning and a sensation of numbness of the tongue, with a small, very red spot in the middle of the tongue. (Took flor. Sulp., half a scruple, with two drachms of sugar of milk, three doses a day, on the point of a penknife.) Took then four drops of Fowler's solution with two drachms of sugar of milk. The burning was

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less after two days; in ten days the pain and redness had disappeared without leaving a trace. (*Hygea.*)

A scrofulous girl of seventeen years suffered with the following symptoms: ulcer in the centre of the tongue, of the size of a lentil, unclean, pale; another ulcer on the left side of the fauces, larger than the former, having the appearance of lard, and suppurating considerably; deglutition somewhat difficult. (*Archiv.*)

TOOTHACHE.

In treating toothache, it is sometimes of great advantage to administer the remedy in the shape of a wash to gargle the mouth with, or to rub the trituration into the gums. (*Hygea.*)

Widenmann has cured a number of cases of toothache by Merc. viv. $\frac{1}{200}$th of a grain every two hours; the symptoms were: caries, flow of saliva, excitation of the toothache by cold or warm things, aggravation of the pain in the bed, sticking and tearing in the jaw extending as far as the ear and temples. (*Hygea.*)

For violent rheumatic tearing of a whole row of teeth, or of the whole side of the face (even when the tooth is hollow), electro-magnetism generally affords sudden help, one end of the conductor being held in the hand, and the other extremity, which is provided with a button, and isolated by means of a glass handle, being applied to the affected part. (*Hygea.*)

Toothache which occurs in damp spring and fall weather, and is frequently accompanied with tearing in one side of the face, head and neck. Either no pain at all in the daytime, or the pain is but slight; the turns which occur in the evening, are relieved by cold water, aggravated by any thing warm, but especially by the warmth of the bed, so that the patient has no rest until toward morning. *Puls.* 6 or 3, kept in the mouth together with water, and repeated for three or four days, frequently removes the pain. *Puls.* is not sufficient when the pain is of long duration, or when there are frequent relapses; in that case Tart. stib. 2, one grain, every twelve hours, affords speedy and permanent help. (*Hygea.*)

Sommer likewise found Tart. stib. 4, one grain, three times a day, extremely useful for toothache of the kind above described and which had occurred under the same circumstances, (Cold water made the pain worse.) (*All. h. Z.*)

Against odontalgia tuberculosa, which occurs especially in tuberculous women, both during pregnancy and at other times, accompanied with general redness and swelling of the gums,

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Strych. hydroiod. has been given with the most rapid success. (*A. h. Z.*)

Sepia 30 relieves very certainly the face and toothache of pregnant females, ought to be used however with great caution, inasmuch as it predisposes the patient for miscarriage. (*Archiv.*)

A girl of twenty-three years, blond hair, had been affected for fourteen years past with a spongy excrescence on the gums, which returned constantly in spite of burning, cutting, pulling of teeth. It seemed to grow out of the empty sockets, looked like raw meat, and bled easily. The gums were swollen and dark-red; sticking-drawing pains in the joints; constant congestion of blood to the head, which was most easily relieved by cold water, the same as the toothache, and the heat in the face; frequent chilliness and heat in the evening, with coldness of the extremities. Sulp. 30, in half an ounce of water, five drops every two days. The excrescence disappeared in three weeks, and has not returned; it is now five years. (*Archiv.*)

A delicate female of twenty-six years suffered with the following symptoms: the angle of the left lower jaw and the side of the neck were very painful to the touch; sensation of swelling in the mouth, soreness as if full of vesicles; constant sensation in the fauces as if the uvula were hanging down the length of an inch, scraping, beating, sticking, increased unto suffocation by drinking ever so little; violent boring and sticking in the left ear, at times; constant flow of saliva; inability to open the mouth; moderate fever. (Bell., Puls., Sulp., cataplasms for four days.) Took Staphisagria 15, one drop every twelve hours. The pain ceased after the lapse of four days.[1] (*Maly, Hygea.*)

ANGINA.

Epidemic angina at Kremsmünster, in upper Austria, in February 1843, mostly affecting young persons, with the following symptoms: difficult deglutition, stinging, swelling and redness of the tonsils, uvula, palate; stiffness of the nape of the neck; synochal fever. After the lapse of two or three days, a number of white excoriations of the size of small peas, especially on the tonsils; tongue coated white; ptyalism, fetor from the mouth. *Bellad.* 3, 4, one drop every three hours, broke the disease in the first stage in most cases; Merc. sol. 6—3, one drop every three hours, was the specific for the second stage. *(Hygea.)*

[To be continued.]

[1] The author describes this as a case of angina; Dr. Kurtze saw strikingly similar symptoms accompanying the rupture of a wisdom-tooth.

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NOTICES.

JAHR'S NEW REPERTORY.

In reply to the many inquiries which are constantly made of us in relation to the publication of that work, we would state that the work is in course of preparation, and that we are waiting for the remaining numbers of Noack and Trinks' work to complete the Repertory, which is to contain every new and interesting symptom published in the various homœopathic publications now in existence.

We have received the last No. of the British Journal of Homœopathy, containing the following interesting Contents:

On the Use of Arsenic, by Dr. Wurmb, of Vienna.

On the Properties of the Digitalis Purpurea, by Francis Black, M. D., of Edinburgh.

Homœopathic Hospital at Vienna.

Case of Dysentery, by Dr. Macgregor.

Case of Necrosis from Phosphorus, by Dr. Walker, of Manchester.

On the Action of Imperceptible Agents by Prof. D'Amador.

On Neuralgia, by Dr. Quin, Physician to His Majesty Leopold, King of the Belgians, and to Her Royal Highness the Duchess of Cambridge.

REVIEWS.—Confessions of an Homœopathist.

Homœopathic Institutions and Dispensaries.

Newcastle Homœopathic Dispensary.

PATHOLOGY.—On the Doctrine of the Dyscrasias, by Dr. Joseph Engel, of Vienna.

MISCELLANEOUS.—Report of the Raheny Dispensary, by Dr. Guinness.

English Homœopathic Association.

Eruption of Mount Hecla.

Infinitesimal Wit.

German Homœopathic Meeting.

Homœopathic Hospital in Moscow.

Homœopathy in America.

Homœopathy in Vienna.

Homœopathy in Spain.

Homœopathy in France.

Books Received.

APPENDIX.—Secale Cornutum, by Dr. Buchner, of Munich.

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AMMONIACUM.

BY JOHN C. PETERS, M. D.

It has a faint, unpleasant and peculiar odor, while its taste is bitter, nauseous and acrid; its effects are similar to, though less powerful and stimulating than those of Assafœtida galbanum, the other fetid, or anti-spasmodic gum-resins, owing, it is thought, to its containing much less volatile oil (*Pereira*). *Dierbach* says it has less ethereal oil and more resinous parts than Assafœtida, Sagapenum, Olibanum, &c., and hence he thinks it is less anti-spasmodic, but more resolving and maturating than these. *Wood* and *Bache* declare that it is stimulant and expectorant, and in large doses cathartic, while, like many other stimulants, it may be given so as to prove diaphoretic, diuretic, and emmenagogue. *Paris* says it is stimulant, antispasmodic and diuretic, while in large doses it proves generally purgative.

As a *stimulant*, it causes increased circulation in the capillary vessels, heat of skin with inclination to sweating, smallness, tenseness, hardness, quickness and frequency of the pulse, and congestions to various organs. It is to be doubted whether it is a specific stimulant, or merely an *irritant*.

As an *irritant*, it frequently produces a papular eruption when applied to the skin, and sometimes occasions considerable inflammation. Dr. Duncan has described a fatal case of diffuse inflammation, following its use in a case of diseased knee-joint. Its acrid taste already points it out as an irritant; it also causes a scraped and burning sensation in the throat and œsophagus; violent cutting pains in the bowels; piercing, rending, and prickling pains in various parts of the body; irritation of the urethra, larynx, &c.

Its stimulating or irritating properties seemed directed principally: 1st, towards the mucous membranes of the nose, lungs, stomach, bowels, and urinary organs, whence it has been regarded as an *expectorant*, because it excites the mucous membrane of the lungs and air-tubes; as a *cathartic*, because it irritates the mucous membrane of the alimentary canal; as a *diuretic*, because it irritates that of the kidneys, &c. In the old school its use is principally or almost solely confined to chronic pulmonary affections. Pereira says, in chronic coughs, with deficient expectoration, or in chronic catarrhs and asthmatic cases of old persons, with profuse secretion, it sometimes gives slight relief. Though he has seen it extensively em-

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ployed, he has only observed it beneficial in a few cases. *Vogt* says, besides increasing the flow of mucus, it undoubtedly possesses the power of rendering a tough secretion more serous, and hence is most suitable in blenorrhœas of viscid, rather than of merely profuse mucus; he thinks it acts powerfully upon condensed secretions of mucus and lymph, especially such as come from the mucous membranes of the chest, abdomen, and genitals, whence it is regarded as a mucum incidens et resolvens. He also supposes that it increases the flow of lymph more than any other gum resin. Quarin, Wedekind and Selle have advised it as an expectorant when the mucus is tough, profuse, and difficult to raise; Peter Frank, in chronic pulmonary catarrhs, with nauseous, thinly-fluid, and purulent-like expectoration; Brunner, Quarin, and Breends, in mucous asthma. Dioscondes ascribed softening, warming, and resolving properties to it, and advised it in mucous states of the chest. It has also been recommended in asthenic inflammations of the lungs, especially when expectoration is checked or scanty. Wood and Bache say it is most frequently used in chronic catarrh and asthma, and other chest affections, attended with scanty expectoration, or when there is too copious a secretion from the bronchi, owing to local debility. Paris says, when dissolved in nitric acid, it proves an excellent expectorant in cases where large accumulations of purulent or viscid matter exist, with feeble or difficult expectoration.

It seems singular to us that the viscid and tenaceous gums and resins should be used so frequently by old school physicians as expectorants. In the experiments of the homœopaths upon the healthy, it caused neither cough nor expectoration; merely frequent sneezing, troublesome dryness of the nose, followed by profuse secretion of mucus from it; also hoarseness of the voice, and roughness of the throat; occasional tickling in the trachea, without inclination to cough; quickened, short and high respiration, with anxious discomfort, especially in the evening; anxiety and oppression of the chest; oppression, with some aching, of the chest; aching deep in the lower part of the right lung; piercing pain in the left chest, felt on inspiration. Sobernheim says that large doses may cause congestions, with aching in the chest and spitting of blood.

2. *In a mucous state of the bowels.*

Vogt advises it here. Wood and Bache state that some authors speak of its utility in long and obstinate colics dependent upon mucous matter lodged in the intestines, but think that

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it would be difficult to ascertain in what cases such mucous matter existed. Paris also states that it proves valuable in mesenteric affections, by correcting the viscid mucous secretions of the bowels. This would seem to verge closely on homœopathic ground: for Noack states hat it causes fermentation in the abdomen, with pain in the forehead; slight griping, followed by violent griping; wandering pains in the abdomen, attended with chilliness, and followed by profuse mucous discharges; profuse mucous diarrhœa.

This is as good a place as any to refer to its use in "*weakness of digestion*," in which it is recommended by both schools. Noack says that it is remarkable that Voibmer should call it a stomachium, although he admits that it induces weakness of digestion. Pereira says that full doses readily disturb the stomach, and cause fluid stools; according to Sobernheim, they may also cause loss of appetite, relaxation and weakness of the stomach, and diarrhœa. According to Noack it causes a thin, yellowish coating on the tongue; loss of taste; an insipid and somewhat sweetish taste in the mouth, in the morning; nauseous, bitterish taste in the throat, relieved after eating; loss of appetite; eructations after eating; nausea, almost to the point of vomiting; weakness of digestion.

3. *In colic with diarrhœa;*
In abdominal cramps;
In flatulent colic.

It causes rumbling in the bowels, slight and severe gripings; wandering pains in the abdomen, with chills and profuse mucous diarrhœa; soft, papescent stools, with profuse emission of flatus and much rumbling in the bowels.

4. *In infarctions and engorgements of the abdominal viscera.*

Ammoniacum has long been an ingredient in discutient and resolvent plasters for the removal of indolent swellings, and as early as the time of Dioscorides it was used internally for similar purposes, especially in induration of the liver; according to Wood and Bache, it has been prescribed in obstructions and engorgements of the abdominal viscera, from a vague notion from its deobstruent power; Vogt says it increases the flow of the lymph more than any other gum resin, and hence advises it in lymphatic swellings; Sobernheim says it has been used in disturbances of the biliary secretion, and in swelling, inclination to induration, and actual induration of the

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liver; also in chronic jaundice; in old obstructions of the liver, spleen and pancreas. We have no proof of its homœopathicity to these affections, and it will be seen that old school physicians rather doubt its efficacy.

5. *In Chlorosis.*

Here it is advised by old school physicians only, and according to Sobernheim it causes a congestive state of the uterus, and even excites a flow of blood from it, whence it has obtained the reputation of an excellent emmenagogue, and in fact affords excellent service in amenorrhœa depending upon local debility or torpor; also in menostasia and dysmenorrhœa when connected with obstruction in the portal system. Wood and Bache say it is thought to have been useful in some cases of amenorrhœa, and in those chlorotic and hysterical conditions which arise out of it. It seems rather antipathic than homœopathic to these conditions, but is homœopathic to menorrhagia.

6. *In Diabetes.*

Here it is recommended in both schools. Vogt says its action on the urinary organs is inferior to that of the balsams, but greater than that of any other gum-resin. Sobernheim says it excites the function of the kidneys. Wood and Bache think it may be given so as to act as a diuretic, while Paris declares it to be a diuretic. According to Noack, it causes increased excretion of urine; drop by drop discharge of urine, after urinating; and urine which is loaded with lactate of urea. Dioscorides recommended it in hæmaturia, and we have already seen that it causes spitting of blood, menorrhagia, and irritates the kidneys; it also causes burning in the urethra. Inflammatory irritation about the orifice of the urethra is often a source of great annoyance and suffering in females laboring under diabetes.

There are two varieties of diabetes, viz., d. mellitus, and d. insipidus. The latter is an exceedingly rare affection. In true diabetes the urine is never without sugar, which is also found in the stomach, bowels, blood, &c. Instead of healthy, nutritive chyle, sugar is found in the stomach, enters the circulation, and is hurried out of the system, as sugar, in the urine. We have no proof that Ammoniacum produces such a state of things as this, hence it may only be homœopathic to diuresis and diabetes insipidus.

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7. *In Gout.*

Dioscorides recommended it especially in joint and hip pains, and in gouty nodes. Noack says it causes piercing, rending and prickling pains here and there, especially in the extremities; rheumatic pain in the left side of the pelvis; heaviness and lameness of the arms. Rending, piercing and prickling in the shoulder-joint; rheumatic pains in the whole arm, especially in the wrist; pain, as if the arm were crushed, especially about the elbow and wrist-joints; rending and drawing in the fingers; swelling of the fingers. Violent piercing above and in the right hip-joint, while walking, almost forcing one to limp; jerking pains in the left thigh, along the course of the crural nerve; pain about the knee; piercing and aching in the condyles of the left leg; sensation of swelling of the knee, with increased heat of it and prickling about the knee-joint; piercing and tension in the knee; rending in the shins and ankles; rending drawing and prickling and burning in the soles of the feet; burning in the metatarsus; burning and fleeting stitches in the great toe; swelling of the toes. It will be seen that Ammoniacum affects the large joints full as much, if not more than the small ones, and hence may be more homœopathic to rheumatism than gout; it also produces a large excretion of lactate of urea from the kidneys, and Dr. Prout considers that *lactic* acid, developed chiefly during the secondary mal-assimilation of the gelatinous tissues of the body, bears the same relation to rheumatism, which the *lithic* acid, derived from the mal-assimilation of the albuminous textures, has to gout; as we have no proof that Ammoniacum tends to generate the lithic acid diathesis, this affords another proof that it may be more homœopathic to rheumatism than to gout. It has been advised by old school physicians in white swellings.

8. *In Amaurosis.*

Here it is recommended in both schools Noack says J. N. Schwartze advises it as a curative, although he quotes Wichmann's observation that it produces dimness of vision. Sobernheim says large doses cause congestion to the head, with violent pains, especially in the occiput and forehead, pains in the eyes and dimsightedness. Vogt thinks it is doubtful whether it causes diminution of sight as is frequently stated. Dierbach also thinks more proof is required of its power in producing dimness of sight, when its use is long continued, as has been stated in many books. Dioscorides recommended its external

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use in diseases of the eyes; and Richter, quoted by Eberlee, says he has used it with much benefit in Amaurosis, and has frequently performed complete cures in cases where he hardly expected it, even in instances when the disease had actually been present for several years. It is said to cause aching and prickling in the balls of the eyes; sensation as if a small foreign body were in the eye; sensitiveness of the eyes to light, even on cloudy days; glittering effulgence as if from molten metals, before the eyes in the evening; glowing clouds around the light; *Visus Nebulosus*, as if dust were in the air, and mists and colors were before the eyes; dimness of vision, especially in the evening, and in the morning soon after rising, with heat in the eyes; inability to read without straining the eyes. It would seem most homœopathic to congestive amaurosis.

9. *In Headache.*

It deserves as much attention here from the Homœopathist, as many other drugs receive. Large doses are said to cause congestions, violent pains in the head, especially in the occiput and forehead, also pain in the eyes and dimsightedness. (*Sobernheim.*) According to Noack and Trinks, it causes heaviness of the head; violent headache persisting night and day; aching pains in the whole head, especially in the forehead, or only on one side of the head, mostly in the forehead and over the eyes. Unilateral rending in the head, &c.

10. *In Hypochondria.*

It causes lassitude and heaviness of the limbs, even after slight exertion, frequent yawning, with a sensation of emptiness in the stomach and watering of the eyes. Unfitness for mental exertion; disgust and disinclination for every thing; discomfort, sluggishness, irritability, depressed and gloomy state of mind. Yet it was formerly advised by the old school in hypochondria.

ON THE PROVING OF DRUGS UPON THE HEALTHY ORGANISM.

Inasmuch as many members of our homœopathic brotherhood have volunteered their services as provers, and the proving

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has actually been commenced in many quarters, it may not be superfluous to remind many of our readers of the conditions which a conscientious prover requires to fulfil, in order that the results of his proving may be deserving of confidence. As we can find no better examples for any thing in homœopathic practice and experimenting than Hahnemann and his original disciples, or the present leaders of the homœopathic school in Germany, we will briefly state, from knowledge derived by conversing with those devoted men, under what circumstances of diet, temperament, habits, etc., the original provings have been instituted.

The splendid provings of the drugs contained in the Materia Medica Pura were all instituted with very large doses of either the tinctures or the first and second attenuations. They were instituted after the system had been carefully prepared by diet, and the most regular mode of life, and upon persons in the enjoyment of perfect health. The strictest diet and the most regular mode of life were maintained during the whole period of the proving; any symptom which was not upon the very face of it a drug-symptom, was omitted in the record, and those symptoms which seemed to be drug-symptoms, but which might have been accidentally modified by a change in the weather, a sudden emotion, a little over-eating, or by any other traceable causes, were recorded in brackets. Every symptom observed by Hahnemann and his disciples themselves is authoritative; only among those symptoms which Hahnemann has quoted from the writings of older allœopathic writers, there are a few which have been incompletely stated, and had therefore rather be omitted.

We consider it of the utmost importance that the drugs which we mean to use as remedial agents, should be proved as Hahnemann did, in large and small doses, high and low potencies. The high potencies alone are not sufficient; they may exhibit physiological effects in some sensitive persons, or in persons with peculiar idiosyncrasies, but the symptoms which they yield can only be few and extremely inadequate in practice. Only large doses *taken for a number of days and permitted to act a long while*, can give us a knowledge of the true physiological action and character of a drug.

The homœopathic physicians of Vienna have formed a society for the reproving of drugs and the proving of new ones; some of their provings have already been published. The provers do not know what drugs they are proving. The first drug which they tried was Aconite, and after all the results of the various provings had been arranged, it was found that they

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corresponded entirely, even to the number of the symptoms obtained, to Hahnemann's own symptoms.

For the benefit of the American provers, we will transcribe a few experiments instituted by the Viennese physicians.

Dr. F. H. Arneth made three separate experiments upon himself.

1. He took, on the 20th of February, while fasting, ten, and a few hours afterwards, fifteen drops of the mother-tincture of Aconite, not knowing at the time what it was he took. The only sensation produced by it was a slight burning feeling of the tongue. 21st. He took fifteen drops while fasting. Besides the burning at the tongue, immediately after taking the medicine he felt pressure and frequent stitches in the anterior part of the eyeball not altogether superficial. 22d. Morning and evening, twenty drops. On the 23d, at noon, thirty drops. Almost immediately after swallowing the dose, he felt the pain in the eyeball described above, which recurred several times in the course of the two days. Dr. A. attributes less weight to this symptom, as his eyes are the organs most easily affected. From about the 26th, he felt, without having taken more of the medicine, symptoms of taking cold; much running from the nose; shivering over the back, especially about evening; respiration easily impeded, attended with slight pressure below the sternum, at times transient heat; quickened, rather full pulse. The nights were very restless; lively dreams of what befell the previous day. Dr. A. ascribed these symptoms to exposure he had to undergo; and, on the 28th, took twenty-five drops more. Moderate increase of all the symptoms followed. On the 29th, he took forty drops in the forenoon. Besides the symptoms previously observed, he experienced slight griping about the navel, as after drinking manna, and soon painless diarrhœa; afterwards an enduring pressive pain over the right eyebrow. Towards evening the febrile symptoms increased so much, that, to dissipate the symptoms, *he took some globules of Aconite. as he did not know the medicine he was proving.* The following night was equally restless and full of dreams. Not feeling at all better, he took, on the 30th, in the morning, some globules of Aconite. The inefficacy of the medicine he ascribed to the fatigue he was subjected to. The mystery cleared up when he knew he had been proving Aconite. The feverish condition, with the other symptoms, continued to the 8th of March. By the 7th of March, the difficulty of breathing was increased, and the

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respiration was particularly affected on the left side of the chest, about the region of the heart, and attended by an intermittent pulse. There were five hard, full, quick beats, and an intermission at the sixth, both at the heart and at the radial artery. This symptom continued the whole day. Dr. Arneth became pale and thin; his gait and whole appearance gave so much expression of illness, as to alarm his friends. He had pain all along the course of the urethra when micturating.

On the 9th of March, he had sensation of shortening of the sinews of the knee; pain in the patella, as if it had been struck. This lasted from the 10th to the 11th. On the 12th he felt quite a peculiar sensation in the eyeball, just such a one as amaurotic patients, in the first stage of the disease, describe themselves as feeling; a sense of warmth and fluctuation in both eyes, with involuntary closing of the eyelids; and although it was quite clear in the room, he seemed as if he would hardly be able to read from want of light. Even after he had convinced himself that he could read, the sensation continued. On the 13th he felt slight drawing pain in the right shoulder, which went away about mid-day, but was followed by a tearing and drawing pain, and sense of lameness, of the left shoulder-joint, which lasted two days. 15th. Sensation of shortening of the *tendo achilles* in both legs, so that he found it very difficult, especially in the evening after sitting some time, and in the morning on first rising, to stand upright, without his knees knocking together. These symptoms lasted, without his taking any more medicine, for three weeks, and had not wholly disappeared until the 5th of April.

2. On the 5th of April, when fasting, and afterwards before dinner, a tablespoonful of the third dilution each time. Immediately after taking it, he felt pressive headache in the forehead, especially over the right eyebrow, with a peculiar dread of being shaken when driving, even without his being in a carriage. He felt the same on the following day, after two similar doses. On the 7th and 8th of this month, each time while fasting in the morning, and in the evening, he took a tablespoonful of the second dilution, and on the 9th and 10th the same quantity of the first. His nights were very restless; he dreamed of things he had not thought of for years, and that so vividly, that even after he awoke they stood before his eyes. And on waking in the morning, confusion of the head, and discharge of bright red blood from the nose. On the 10th he

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had only confusion of head; he took no more, and felt himself well from that time.

3. On the 20th of April he took fifty drops of the mother-tincture, which, however, had no effect. After sixty drops, he had discharge of blood from the nose, and pressive pain over the whole head.

April 22d he took eighty drops. Vesicular eruption on both temples. Restless nights. On the 23d, one hundred drops. From this there followed bloody discharge from the nose, violent jerking of the limbs on falling asleep, so that it wakened him. Restless nights. For two days he had felt much desire to vomit immediately after taking the medicine, which subsided in the course of an hour or two, as soon as he had taken his ordinary breakfast-roll and cold milk. On the 24th of April he took one hundred and thirty drops of the pure mother-tincture of Aconite. Immediately after taking it, strong and enduring desire to vomit, with much confusion of the head. Dr. Arneth here concluded his experiments, judging that his susceptibility to the substance was now exhausted.

We shall next detail the experiments of Dr. Gerstel, slightly abridging his account.

On the 5th of January he took, fasting, six drops of the tincture of Aconite, in half a tablespoonful of water, without any result. On the sixth he took eight drops. He felt a sense of giddy confusion in the right side of the forehead while walking in the open air; pain as if beaten in the nape of the neck;—felt, on moving, as if it was confined to certain muscles, especially at night. During sleep at night, sense of dryness at throat, with inclination to drink on awaking. Soon after, a profuse perspiration broke out.

7th, in the morning, ten drops. Soon felt unusual weariness of the legs, of short duration. The pain in the neck continues. 8th, in the morning, sixteen drops. For nearly an hour a sense of burning in the throat and tongue, as if from pepper, &c. 10th, noon, twenty drops. Immediately felt heat in the chest, and unpleasant sensation about the heart. Took, on the evening of the eleventh, twenty drops; slept unsoundly, and frequently waked, with a peppery taste in the mouth. 12th, morning, twenty-seven drops; pressive stupifying pain in forehead, which became worse in the evening, attended with palpitation of heart, and transient heats. The pain in neck, which had been three days away, came back to-day. 15th, forty drops in a glass of water—took a fourth part of it in the morning, fasting.

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Besides former symptoms, violent palpitation of heart, with unpleasant sensation at the region of the heart. After an hour, pain as from a bruise in the middle of the thigh, and unusual coldness of the feet. About 12 o'clock, a similar dose. Pain in left temple returned, attended with the sensation as if the forehead and face would swell. This sense of swelling spread itself over the whole body, and is attended with many unpleasant feelings. Bruised feeling of the muscles, sense of heaviness in the bones. The pains are most constant in the left side of the heart, face, breast, and left arm, and attended with a constricted feeling of the heart. At 4 in the afternoon: —Since taking the second dose, a persistent sensation of cold pervades the whole body. Sense of heat in face, and redness of the cheeks. The pulse, which at half-past 3 o'clock was sixty-seven and compressible, at 4 o'clock was seventy-four and stronger. At 5 o'clock the pulse was one hundred and two, full and hard. Although the sense of coldness of the extremities continued, an agreeable warmth suffused the body, with a sense of anxiety and heat at the heart. Perspiration broke out over the whole body, attended with a sense of pressure on both eyes alternately, as if the whole eyeball were squeezed in its socket. The most of these symptoms continued the whole evening. On the 16th and 17th, took the rest of the tincture, with a mitigated recurrence of the former symptoms. He adds—"Since I had smallpox, twelve years ago, I never remember to have been so feverish." He made several other experiments with various doses of the tincture, and found that, while the smaller doses excited violent feverish symptoms with slight catarrhal affection, larger doses, after producing the symptoms of muscular weakness, chiefly affected the mucous membrane of the ear and bowels.

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TABULAR VIEW OF DISEASES TREATED HOMŒOPATHICALLY IN THE HOSPITAL OF THE SISTERS OF CHARITY AT VIENNA. BY DR. FLEISCHMANN, FROM THE 1ST OF JANUARY TO THE 31ST OF DECEMBER, 1845.

DISEASE.	In Hospital.	Admitted.	Cured.	Uncured.	Died.	Remaining.
Arthritis	3	60	60			3
Burns	1	8	9			
Catarrh	1	13	14			
Cephalalgia		6	6			
Chlorosis	3	13	12		2	2
Cholera		4	4			
Chorea		1	1			
Colic		7	7			
— painter's		5	5			
Cough, chronic	5	28	30		2	1
Diarrhœa	2	6	7		1	
Dysentery, acute		6	6			
— chronic		1			1	
Dysmenorrhœa		2	2			
Dyspepsia		6	6			
Endocarditis		3	3			
Erysipelas, face		15	15			
— limbs		2	2			
Fever, catarrhal		15	14			1
— gastric	3	74	73		1	3
— intermittent	6	51	56			1
— rheumatic	3	53	55			1
— typhus	13	196	179		21	9
Fungus medullaris	1	1		2		
Gout	2	7	7		1	1
Hæmoptysis	3	13	12		2	2
Heart, organic disease of		3		2	1	
Hoarseness, chronic		2	2			
Hooping cough		1	1			
Hypochondriasis		2	2			
Icterus		9	8			1
Inflammation of the cellular tissue		1	1			
— of ovaries	1		1			
Laryngitis		2	2			
Measles		5	5			
Meningitis	1	3	3		1	
Œdema of lungs		10			10	
Old age		3			3	
Ophthalmia		7	7			
Otitis		1	1			
Carried forward	48	645	618	4	46	25

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DISEASE.	In Hospital.	Admitted.	Cured.	Uncured.	Died.	Remaining.
Brought forward	48	645	618	4	46	25
Pericarditis		2	2			
Peritonitis	1	16	15		2	
Phthisis	1	23		9	14	1
Pleuritis		3	1		1	1
Pleuritic effusion		6	5			1
Pneumonia	3	47	45		2	3
Rheumatism		23	20			3
Ringworm		2	2			
Scabies		4	4			
Scald head	1		1			
Scarlatina		2	2			
Scirrhus uteri		1		1		
Scorbutus		1	1			
Scrofula, general		3	2		1	
Spasms		12	11			1
Tetanus		1			1	
Tonsillitis	1	69	67			3
Tremor metallicus		1	1			
Tumefaction of various parts	1	9	10			
Ulceration of limbs		11	9			2
— lungs		23		12	8	3
— scrofulous		1	1			
Urticaria	1		1			
Varicella		1	1			
Variola		4	4			
Vomiting, chronic		1	1			
Wounds	1	16	16			1
Total	58	927	840	26	75	44

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PART II.

A PRACTICAL ATTEMPT TO SHOW THE VALUE OF AUSCULTATION AND PERCUSSION IN THE HOMŒOPATHIC TREATMENT OF DISEASES OF THE HEART.

BY DR. EL. MUELLER.

Translated, with Notes, by JOHN C. PETERS, M. D.

ACONITE.

IT causes pressing together of the chest in the region of the heart; palpitation in young plethoric persons; palpitations with great anxiety, oppression of the chest, general heat, especially in the face, great relaxation of the limbs; slow throbs in the cardiac region; aching compressing pain below the sternum; pain in the left side of the chest, between the fourth and sixth ribs; disproportion between the heart and pulse beats; for the pulse beats three times, while the apex of the heart strikes the walls of the chest once; the right auricle, however, seeming to be persistently and convulsively contracted.

Pathological Anatomy: No peculiar and characteristic alterations are found, viz., no signs of inflammation, or its consequences, but merely signs of relaxation and debility of the heart, with more or less of venous congestion: the heart relaxed and dilated; the left side filled with fluid red blood, and the right with fluid or coagulated black blood, or in general, containing much black, coagulated, or brownish blood. Hence the pathological appearances afford no warrant for the use of Aconite in inflammatory affections of the heart; still it is advised in predominant arteriality, in palpitations, in endocarditis, with or without articular rheumatism; also as an invaluable palliative remedy in organic affections of the left side of the heart, and large vessels, dilatation of the left ventricle, &c.; in endocarditis it can only be homœopathic in the very commencement of the disease, before extensive exsudations or alterations of the surface of the endocardium and valves have taken place.

Physical Signs: Judging from the above, Aconite will be indicated when there is dulness on percussion over the heart

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when the motions of the heart are quick and violent, but do not evidently and visibly raise the walls of the chest at each impulse, and are not synchronous with the beats of the radial pulse; when both sounds of the heart are heard louder, clearer [the first sound being almost as clear and clacking as the second, which is the most characteristic sign of dilatation of the left ventricle], and heard most distinctly over the left ventricle [when the apex of the heart is found beating nearer to the nipple than one inch below and within it, viz., very near the nipple, or just below it, or outside of it, or even above it, for the larger a heart becomes, the more is the apex carried outwards and upwards].

ASPARAGUS.

It causes: An indistinct sensation of piercing in the cardiac region; frequent violent palpitation while sitting; palpitation with anxious restlessness, caused by motion or ascending stairs; feelable and audible throbbing of the heart, from moderate exercise; irregular, quick, double beating of the heart; scarcely perceptible action of the heart. It is less homœopathic to the inflammatory stage, than to the consequences of endocarditis, more especially to hypertrophy of both, or only of the left ventricle.

Physical Signs: Dulness on percussion over a very extensive surface; the action of the heart violent, elevating at each beat, the corresponding portion of the chest [so that when the hand or head of the examiner is placed over the cardiac region it will evidently be seen to rise and sink with every contraction and dilation of the heart; however violent the palpitations may be in simple nervous affections of the heart, no permanent bulging of the ribs over the heart is noticed, and the action of the heart never lifts the hand or head of the auscultator]; violent pulsation of the carotids; sounds of the heart natural, but louder, or attended with murmurs, or other abnormal sounds at various parts, either during the systole alone, or also during the diastole.

[Riecke says that a man in Paris, suffering with palpitations, thought he felt relief every time he ate of Asparagus; hence he prepared a syrup in order to have some when it was out of season; this also helped him, and he mentioned it to his physician, who made farther and satisfactory experiments and communicated their results to Bronpais, who wrote a short article about it in 1839; then its use became quite fashionable, but lately it has fallen into neglect. Bronpais says, like Digi-

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talis, it possesses the power of diminishing the action of the heart, and of increasing the urine, without irritating the stomach; hence it is serviceable in hypertrophy and palpitations of the heart, and also relieves the nervous pains, even when dependent upon organic disease. Heyfelder found it very beneficial in hypertrophy; Andral, Fongier, Serres, &c., saw good effects from it in Cardiogmus, even Organicus, while Buchner, in his experiments with the tincture, often felt violent palpitations with anxious restlessness, both while sitting still or moving about.]

BELLADONNA.

It causes: Aching in the cardiac region, taking one's breath away and causing anxiety; anxious feeling in the region of the heart, with occasional intermittence of the pulse; irregular, unequal contractions of the heart; clucking about the heart, when going up stairs, with palpitation; trembling of the heart; throbbing pain beneath the sternum, near the epigastrium; very feeble beating of the heart; violent and persistent palpitations; violent heart-throbbing, with jarring of the head and neck.

Pathological Anatomy: Partly fluid, partly coagulated blood in the ventricles; blackish coagula; lividity and great softness of the heart; blackish and very thin blood in the arteries.

From the above it is evident that Belladonna is not a truly homœopathic remedy for endocarditis, but it is an admirable remedy in congestion of the chest, preventing the occurrence of actual inflammation, and moderating the stormy vascular commotions which attend organic diseases of the heart, and cutting short the frequent exacerbations of the disease which threaten to light up inflammation anew.

Physical Signs: Percussion sound normal, or dull over a rather large extent of surface; action of the heart alternately violent, then weak, or even intermitting; sounds of the heart natural, except clearer than usual, of irregular rhythm, first stronger, then weaker, then absent.

VERATRUM ALBUM.

It causes: Extreme agony, which takes away the breath; palpitations, with anxiety and quick, audible respiration; paroxysms of agony about the heart, which then beats very violently and feels as if it were too warm; violent beating of the

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heart, which forces up the ribs; the heart beats up very high and forcibly so as to force the hand away, without pain. In cases of poisoning of dogs with it, the heart beats stronger, quicker and irregularly, in strong contrast with the great general prostration and stupefaction of the animal; even an hour after death the heart still moved feebly.

The entire absence of pain about the heart, while this organ beats so violently as to shake the chest, elevate the ribs, and lift the hand of the auscultator, deserves particular attention, for this almost never occurs except in hypertrophy with dilatation.

Physical Signs: The percussion sound may be dull over a very large space; [the apex of the heart may beat directly beneath, or outside of, or above the nipple; bulging of the ribs over the heart;] action of the heart visibly very violent; sounds of the heart either very loud and clear, or else one or both sounds accompanied with abnormal murmurs.

[From the well-known action of Veratrum on the stomach and bowels, it deserves particular attention in those affections of the heart dependent upon or attended by derangement of the stomach; "in some forms of nervous palpitation there is an increase of suffering after meals, or when the stomach is deranged, while amelioration is produced by dyspeptic remedies; but, as the stomach produces the same effects when there is disease of the heart, these signs are not pathognomonic of nervous palpitation. To this point I [Hope] would particularly direct the attention of physicians; because many, in forming their symptomatic diagnosis of the affections in question, regard the dyspeptic signs as paramount in value to all others, and are apt to refer to the stomach the palpitation which may really belong to organic disease of the heart." It is easy to show that Veratrum is homœopathic to both these varieties. Hutchinson remarks that, in poisoning with Veratrum, violent palpitations, intermittent pulse, and a condition of things which presents much similarity to organic disease, are very apt to ensue. In the Med. Chir. Rev., Vol. II., page 196, we find an article headed, "*Veratrum album used for producing artificial diseases of the heart.*" A man by the name of Chapman, belonging to the Marine Artillery, had found out the secret virtues of the White Hellebore, and turned it to the advantage, or rather disadvantage of himself and others, to whom he sold his powders at a high price. By taking the Hellebore every appearance of dyspepsia, attended with great nervous irritability, and violent and continued palpitations, were produced. This Chapman had deserted, and was taken in a remote part

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of the country, where he completely succeeded in deceiving the staff-surgeon, who examined him, and reported his incapacity for military service in consequence of having organic disease of the heart!! Dr. Quavier states that this practice of taking Hellebore was productive of some alarming consequences for a considerable period; some were permanently injured, having actually produced the disease which they merely intended to counterfeit.]

EXCLUSIVISM IN THE USE OF POTENCIES.

A STRIKING and in some respects rather foolish opposition has been established among some members of the homœopathic school, one portion of them advocating the exclusive use of the lower and lowest, and another the exclusive use of the higher and highest potencies. This exclusivism is unscientific, and will be abandoned by either party as soon as both parties shall consent to acknowledge each other's claims. Many of the so-called high potentialists now deny the propriety of using the lower preparations, and, on the other hand, the tincture-men ridicule the idea that there should be any curative virtues in our drugs beyond the first or second attenuation. Both parties are wrong, and the vehemence with which they assail one another can only be accounted for upon the grounds suggested by Bernardin de St. Pierre: "*Les hommes se font la guerre parcequ' ils ne veulent pas s' entendre*;" men wager war with one another because they do not want to understand one another. It seems to us that the time has come when the fierce contention which the high-potentialists and the tincture-men have carried on so far should cease; those among them who are not willing to acknowledge the justice of their respective claims, betray a woful ignorance of the present position of Homœopathy. Some of our most distinguished homœopathists, Müller, Attomyr, Gross, Stapf, Hering, Croserio, Léon-Simon, Jahr, Quin, Haynel, etc., not to mention the inimitable example of our master, have constantly been in the habit of using the higher and highest potencies, and have attained the most brilliant results in the treatment of disease, for a period of thirty and forty years; hundreds of thousands of patients have been cured by those men, and it is chiefly to their skill and to their success in practice, that Homœopathy owes its triumph. On the other hand, who would

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dare gainsay the skill, science, and brilliant results of such men as Fleischman, Elwert, Rau, etc., and many others both in Europe and in this country, who are in the habit of using the lower preparations? There is no earthly reason why there should be any exclusivism in the use of drugs, and why our drugs should not be used from the tincture up to the 2000th or any higher potency. Individually we have a decided preference for the higher potencies from the 12th upwards, not from any capricious feeling, but because we are convinced from arguments *a priori*, and from experience, both of our own and that of other practitioners, that the higher potencies generally act with more certainty and more thoroughness; but we have never any objection to use the lower preparations whenever they seem to be called for, or whenever, in consultation or otherwise, we are requested to accommodate our own views to those of a brother practitioner, provided this accommodation does not imply a sacrifice of principle; and we believe that, in the case before us, the lower or higher potencies may be used indiscriminately without any detriment to the patient.

The principle of potentialization is intimately connected with the fundamental principle of our science, "similia similibus curentur," but it is not superior to it: the potentialized drug would be of little avail unless administered agreeably to the fundamental law, whereas the lowest potencies of the drug will frequently restore the patient's health. We have frequently seen the squinting in nervous fevers relieved by the lower preparations of Hyosicamus, when the 30th potency would not seem to touch the case: we have cured amenorrhœa of twelve months' standing in torpid and plethoric subjects with two or three drops of the tincture of Aconite, when the 30th potency had been given in vain for several days in succession; and on the other hand, we have seen the most astonishing exacerbation of the symptoms arise from the 30th, or even the 200th, and 800th potency of many drugs, in very sensitive subjects, who were sufficiently brought under the influence of the remedy by merely smelling of it once or twice. We know as yet too little of the inmost relation of our drugs to the vital laws which govern the functions of the animal economy, too little of the inmost nature of temperament, idiosyncracies, too little of the thousand influences which are all the time modifying the play of the vital forces, to be exclusive in our adherence to one potency in preference to another. We are bound to believe in the principle of potentialization, because we know that the breaking up of the material body sets the dynamic and really curative agent free; but to divide homœopathic practitioners

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into low and high dilutionists, is absurd; those who consent to be ranked among either class exclusively are no philosophical artists, and their opinions in matters referring to the healing art must necessarily be one-sided.

We, individually, disclaim any exclusive attachment to this or that particular potency, and, although we frequently use the highest potencies to our entire satisfaction, yet we likewise avail ourselves of the lower potencies whenever we deem it necessary. To show this, we will relate half a dozen cases:

1.—A girl of eighteen years had overloaded her stomach with codfish and apple-dumplings. Three hours after dinner she began to vomit, and continued vomiting the whole evening, in spite of various expedients which were resorted to by the family. Towards ten o'clock in the evening the stomach became frightfully convulsed, and this continued without any interruption until one o'clock in the night, when we were sent for. For the last ten hours the girl had thrown off a basinful of clear juice, with great anguish, and a sensation as if the stomach would burst. She took one drop of the first attenuation of Nux vomica, and the vomiting stopped instantaneously; next day she was entirely well.

2.—A girl of two years had an inflammatory eruption upon the skin, which was driven in. Immediately after the girl was attacked with inflammation of the brain, of which she was cured by the thirtieth potency of Belladonna. A fortnight after this attack, when her recovery was almost completed, the child managed to stuff her stomach with cake, pie, various kinds of fruit, tea, bread and butter, and a variety of other things which were standing in the supper-room, where the child had been left alone for a few minutes. About ten o'clock she began to vomit, which continued until midnight, when comia and convulsions set in. We were sent for, and found the child with the following symptoms: Coma, staring and dilated pupils: cold extremities, clammy sweat, heat about the head, occasional paroxysms of convulsions, and sour vomiting. Gave the child one drop of the first attenuation of Opium in a teaspoonful of water. The comatose symptoms and the vomiting ceased for a quarter of an hour, after which lapse of time they returned; gave another drop, which procured a longer interval of rest; on the reappearance of the symptoms gave a third drop, after which the convulsions and all the other symptoms ceased. The child remained quiet the

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whole night until morning, when she fell into a sort of waking sleep; she now took a drop of Stramonium 6, and in the afternoon she was playing about the room.

3.—A lady was taken with metrorrhagia, rigor of the right arm, and a compressive headache in both temples as if the head would be crushed. The pain was so excruciating that she had to be prevented by force from destroying herself. Took Platina 30 and 24, and was entirely cured in a few weeks, after having been treated by four allœopathic physicians for six months. The next menses were perfectly natural.

4.—A man, after an impure coition, found himself with vesicles on the prepuce, which ulcerated. He resorted to allœopathic treatment, the result of which was the most woful kind of phimosis. The prepuce was swollen, ulcerated, hard as a stone, and of course immovable; whole quantities of matter were discharged from the urethra. The patient took Thuya 30, Nitric acid 24, and Mercury 3, and was cured in three weeks.

5.—A gentleman in Hoboken, who had been subject to fever and ague for years, had an attack of that fever while eating his breakfast. His hands and feet became icy-cold, his nails were blue, and the ends of the fingers and the anterior half of the feet felt so dead that he inquired of his wife who had knocked off his feet. After asking this question, he lost his senses, the head was red and hot as fire, the eyes bloodshot, he was delirious, and in his rational moments he complained of horrid headache; his pulse was scarcely perceptible. On our arrival the paroxysm was passing off, but a most profuse sweat and violent thirst had set in, together with frequent evacuations of a greenish-looking mucus. The patient thought he would now have the fever again a whole year as usual. He felt very low-spirited; and, the case being so well marked for Cinchona, we went so far as to assure him that he would be all well in few days. He took China 30, one drop in a tumblerful of water, first every hour, and, if the diarrhœa should diminish, every two hours. Saw him again two days after. All the symptoms had disappeared, to his utter astonishment. Feeling yet a little weak, he requested us to give him some more medicine, but not so strong, as every spoonful he took produced a glowing heat on his skin, which lasted a few minutes, and then passed off. Gave him eight pellets of China

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X, in a tumblerful of water; in a few days he sent his son to us, informing us that he was perfectly well.

6.—A young lady of fourteen years had great pains in her ear; the ear looked inflamed, and the least contact caused excruciating pain. She had a similar pain all along the descending ramus of the lower jaw, in the periosteum. She had had no sleep for weeks past, and had all sorts of noises in her head, accompanied with great distress in the head; these symptoms were of a chronic character, and had recurred with more or less violence for a number of months. She took two pellets of Mercurius X, before retiring. Next morning she told us that she had slept soundly all night, and that noise and pain had entirely disappeared.

7.—A lady in her critical age was attacked with paroxysms of clonic spasms in the muscles of the back, which sometimes came round the sides and then ascended towards the chest as high up as the diaphragm; she felt as if the muscles were wrenched out of their places while the spasms lasted; after the spasms were over, the parts felt horribly bruised. She took *Secale cornutum* 200 in water, and was relieved in three quarters of an hour, except weakness remaining; next day the spasms returned somewhat; she now took a drop of the tincture in water, and the spasms ceased a very little while after, and have not returned.

8.—A lady of a plethoric habit and a very fine, sensitive mind, miscarried some twenty years ago through fright, the miscarriage causing profuse hemorrhage. Since then she miscarried twenty times, and bore moreover several children. The last miscarriage took place four years ago, and was attended with frightful flooding, which lasted three hours without interruption. It was finally stopped with applications of ice. When she recovered her senses she perceived the following symptoms: Great fulness and visible distention in the region below the last rib of the right side; fluttering oppression and weight about the heart; fulness and weight in both temples; blackness before the eyes; roaring in the ears; icy-coldness of the hands and feet; collapse of pulse on the right side; numbness in the tongue, deadness in the right arm, and numbness of the whole of the right side; painful pressure about the internal side of the wrist-joint; inability to raise the right arm, from heaviness in that arm; afterwards inability to go up stairs, from lassitude and lightheadedness; flushes on the

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cheeks when making the least exertion, going up stairs, etc.; inability to recollect things; inability to pay attention to things; inability to read or to collect her thoughts; constant crowding of ideas upon her mind which she does not desire to think of, they come against her inclination and produce confusion in her mind. All those symptoms had lasted for four years when we saw her. In addition to this, we ought to state that she brought up an enormous quantity of wind whenever she pressed upon the distended side, or upon the region of the heart.

We explained to the patient our opinion of the condition she was in, and told her, inasmuch as she demanded of us to be frank, that she was either threatened with paralysis or apoplexy. That had been her opinion likewise, she said; but her family-physician, an allœopath, and who had attended her in all her confinements, had constantly laughed at her, and had told her that she was nervous and imagined her symptoms. Of course, a similar opinion prevailed in the family. We told the patient that her symptoms were the result of a congestion of blood, occasioned by the fact that the cold applications had indeed arrested the hemorrhage by mechanically closing, as it were, the orifices of the vessels, but that this mechanical closing had not removed the morbid impulse in the circulating agent, which being forced into a contrary direction, as it were, had produced the congestive symptoms. Upon the strength of this, we prescribed Aconite, a drop of the tincture in a tumblerful of water, but without scarcely any relief. We then gave Aconite 30, a few pellets in water, and after this Aconite 4, likewise in water, and the relief, to our great satisfaction, was complete; every one of that whole train of symptoms had actually disappeared, except a slight fluttering about the heart, for which we left another dose of Aconite. If the relief should not be permanent, we shall mention it in a subsequent number.

9.—A lady of sixty years was attacked with acute rheumatism; the dorsum of the foot, the upper region of the tarsal joint, and the lower part of the leg were swollen, red, hot, and excessively painful; the least contact was intolerable. Took Pulsatilla 24, eight pellets in water; was cured entirely in three days from the commencement of the trouble.

A Case of Acute Rheumatism *cured by means of the Magneto-Electric Machine* (*Pike's*).

A lady of fifty years, strong, and of a very lively disposition, was attacked with acute rheumatism. The attack began with soreness in both of the lower limbs, accompanied with burning

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and slight swelling. She took a dose of salts and senna, was relieved for a few days, at the end of which the pain and the swelling increased at a rapid rate, and she was obliged to remain in bed and to apply for medical aid. We were sent for. On our arrival we discovered the following condition of things: The right limb was numb, somewhat swollen, stiff, but not very painful; the left limb, on the contrary, was swollen from above the knee down to the ankle-joint; wrenching pain in the knee-joint, as if the knee had been cut up with knives and pierced with daggers; sometimes she felt as if a thousand needles were being thrust into the joint; the knee has almost twice its natural size; the whole limb was hot, tense, shining-red, and excessively sensitive to contact; the face was flushed and bloated, the patient was moaning all the time, cried frequently, and suffered real agonies. She took Bryonia X and Belladonna in alternation, with directions to discontinue the Belladonna, if the face should assume a natural expression. Immediately after having taken the first dose of Bryonia the patient felt comfortable, and slept almost the whole night. When we saw her next morning and asked her how she did, she answered, "Oh, I feel in Heaven!" The redness, heat, and a good part of the swelling and pain had gone; the limb now felt numb and as if lying upon a hard board. Prescribed Arnica X every hour. Towards ten o'clock in the morning the agonizing paroxysm returned. The Bryonia was again resorted to with success. At three o'clock in the afternoon another paroxysm occurred, which lasted two hours. At the beginning of this paroxysm she took Bryonia X, small spoonful every fifteen minutes; felt relieved after every dose, but for a short while only: the tincture of Bryonia was substituted in the place of X, but likewise without any permanent effect. The paroxysm ceased about five o'clock; she had relief until six o'clock, when another paroxysm commenced, more furious than any of the preceding. The magneto-electric machine was now applied; the patient held one button in her hand, and the other was gently carried over the bottom of the foot. In less than half a minute, the pain, heat, and considerable part of the swelling had disappeared, and a most copious perspiration broke out over the whole body, so that the patient was literally dripping. Next day the trunk was covered with small hard lumps, which were evidently swollen and hard cutaneous glands. The patient had a very comfortable night, free from pain, which has not returned; next day the machine was applied again, and after six applications, once a day, every trace of rheumatism had left the limb, and nothing remained but a

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slight weakness in the knee-joint, for which the patient was unwilling to do any thing. We ought to mention that, on one occasion when the patient was perspiring freely, she exposed herself to a current of air, which checked the perspiration and caused a violent aching pain in the small of the back; for this pain the patient took a dose of Nux X, which checked the pain at once. It seems to us that the magneto-electric machine will prove a powerful auxiliary in the hands of a homœopathic physician.

A Case of Neuralgia of the Alimentary Canal, *treated by Dr. Hempel.*

This is a most interesting case, and shall therefore be detailed somewhat at length. The patient is a girl of ten years, had perfect health until she was one year old; at this time she had a red appearance on her cheeks, which were redder than cheeks generally are; it looked like humor; did not begin to teeth until she was thirteen months old; when she was three years old the humor came out, first in the face on the cheeks, all around the chin, then on the back and all over the head; the principal suffering was an itching all over her body; in the morning you might see little scales all over the back, she had scratched them off; sometimes the sheets were bloody from scratching, induced by incessant itching. She was then attended by physicians in Charleston, used tepid salt baths, and fresh water baths with sulphuric acid; another physician gave her blue pills; before she took the blue pills she had little ulcers in the throat; the throat looked dreadfully; the ulcers were large, close together, yellowish at the top, reddish at the margins; on the head the sores were covered with a crust, and surrounded with a purplish ring; yellowish water came out of the sores; sometimes, when the sore was a little scratched, blood came out. This state of things went on for two years, was worst in winter; when the great heat came on the sores disappeared completely for two years. In the spring of 1840 she came north, spent the summer on the Sound, had no pain, was perfectly healthy; then, at the end of the summer, she went to Long Island, spent the winter there; had then slight pain in the stomach; the doctor thought it was occasioned by worms, gave her camphor and water, which did no good. During the whole of that time she never was able to take the vaccin. In 1841, October, she went to Philadelphia; the air of that region did her good, had no pains during that winter; in the spring of 1842 received the vaccin; in the summer went to the mountains, had yet pains, supposed to be of worms, had

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good health except the pains, which she had seldom; in the winter of 1842 she was seized in the most violent manner, first in the bowels; they felt as if an iron hand had pressed against them with the fingers stretched out, and at a distance one from the other, with the interior joints bent over and pressing sharp into the bowels; one day, when she was reading the Bible, she felt a sharp, shooting pain over her eye; sometimes she has it now in the ball of the eye; she has also pain in the knees, as if she had been walking all day, a painful weariness; the pain extends all over, weariness in the feet, sharp pain in the toes, though very seldom in this part; the pain is now very violent in the breast, sharp, shooting, has it also in the back part of the head, top of the head, and in every part of the head; the dartings begin in the scalp, and always go to the eye, from every part of the scalp. We ought to mention that the attack in Philadelphia began with giddiness, she thought she would fall; Doctor Mitchill gave her worm-seed, calomel, iron, neither of which did any good; then he applied cold water to the top of her head, with vinegar, and she took china and iron inwardly; this freed her from pain: the first day she had the cold water applied and was in a blanket, she exclaimed, I feel as if I was in heaven. From Philadelphia she went to the mountains of Connecticut, had a slight attack there; from Connecticut came to New-York; when the cold weather came on, the sharp pains returned; had homœopathic treatment in the beginning of 1844; in March had scarlet fever, after which she appeared to be well; in June was taken with asthma, always induced by running, or going up stairs; a sort of panting breathing, which ceased when she remained quiet; the asthma made her cough; the cough ceased with the asthma. Took Sepia, Sulphur, Veratrum, Colcoynthis, Anacardium, which produced a good effect for six weeks, at the end of which it ceased doing any good; took Spigelia, which did her no good; she had also taken the tincture of Calmus for several weeks.

When we took charge of her, all the above-mentioned symptoms were exceedingly violent. The least touch brought on that horrid pain in the bowels, which was accompanied with dartings through the lungs and heart. The pulse was extremely irregular and intermittent; the skin broke out in various parts and became bleeding; the orbicularis oris was swollen to such an extent that the mouth of the child, who has naturally delicate and beautiful features, looked distorted and like a negro's mouth; the mouth was moreover surrounded with a yellow border, the lips were cracked, dry, and peeled off; a most disagreeable and somewhat ulcerated eruption ex-

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tended from both corners of the mouth over part of the cheeks. Furthermore we ought to mention that the child suffered with paroxysms of horrid burning at both extremities of the alimentary canal. Sometimes she saw red and green colors, as if they had fallen upon a person's face; at one time she told her mother that she had but one eye.

When she stroked over the place affected over one eye, the pain went to the other side of the forehead, and when she stroked over both eyes at the same time, she felt the pain in the bowels. The child was subject to cold hands and feet, and to stoppage in the nose; she was then blowing the nose all the time. The little patient had a very good appetite, inclined to be costive, and is of a bilious disposition.

For the last three years the pains had almost been constant with the exception of a few weeks' relief; she woke with the pains in the morning, and went to bed with them in the evening; her sleep was very deep, and scarcely ever interrupted.

The skin had frequently a cold clammy feel, and, when we first saw the child, her whole countenance presented an expression of the deepest suffering and anguish.

The patient had been under homœopathic treatment for eighteen months past. By referring to the Materia Medica, it will be seen that the remarkable pain in the bowels corresponds exactly to the 47th symptom of Ipecacuanha; the symptom is thus stated: "Grasping pinching in the abdomen, as if one grasped with a hand in such a manner that the fingers are stretched out and make a sharp impression into the intestines; the pain abates in rest, but is excited to the highest pitch by the least movement," which was exactly the case in our patient. But inasmuch as the psoric element seemed to be so strikingly indicated in that most complicated case, we preferred putting the patient at once upon the antipsorics. The remedies chosen were Lycopodium 2000, Natrum Mur. 2000, and Conium 300, administered at certain intervals, and in a certain succession. We commenced the treatment in November, and on the 20th of December the patient was entirely free from pain, and remained so for about four months. A most remarkable change had taken place in the appearance of the child; she had grown fat, lively, and, as her friends expressed it, she looked like a budding rose.

About this time the child had a violent fall, which was immediately followed by a most agonizing pain in the pes anserianus of the left cheek; she had never had that pain before, and it was cured entirely and promptly by Spigelia 1000.

After that the child was well, until May last, when she

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complained of a splitting headache, with great pressure on the sides of the head, from within outwards; this headache was promptly relieved by smelling of Merc. sol. 300.

A few months after the child complained of congestive headache, liftings up of the top of the head, great fulness in the sides, buzzing in the ears, excessive sensitiveness to noise, and nausea. This headache was promptly relieved by a few powders of Aconite X. It has occurred once or twice since, but yielded immediately to Aconite X.

In order to mention every particular of this case, we will state that at one time, when all the neuralgic symptoms had disappeared, the child had been constipated for a day or two, and suffered some with her old colic. We ordered a drop of the tincture of Ipecac. to be dissolved in a tumblerful of water, and to rub the abdomen gently with this solution once every half hour. In a very short space of time the child had three hard evacuations, and the colic disappeared.

It is needless to say that the benefit which we have conferred upon that interesting little sufferer, whom nature has endowed with most remarkable capacities, has won for us her most devoted affection; to the friend to whom we are indebted for an acquaintance with her and her charming family, we take this opportunity of expressing our warmest thanks.

OLD SCHOOL HOMŒOPATHY, NO. 5.

BY JOHN C. PETERS, M. D.

1.—In the Cyclopædia of Practical Medicine, Article Indigestion, we read that "Heartburn, which is habitual or of long standing, is sometimes more effectually relieved by *acids* than alkalies. Pemberton mentions having seen it subdued by the juice of half a dozen lemons taken daily, and recurring on the remedy being left off. In heartburn, Nitric acid is also a useful remedy, five drops of the diluted acid may be taken every four hours. We [Dr. Todd] have also used successfully the phosphoric acid with the same intention, and have found it more agreeable to the stomach."

Heartburn may be a simple sensation of burning depending upon a heated state of the stomach; the cooling acids help antipathically in this variety. Or heartburn may depend upon a more or less difficult and imperfect digestion of food, or from

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a deficiency of gastric juice, allowing the occurrence of acetous fermentation; hence acids may cure the latter variety antipathically; or it may depend on an excess in quantity or quality of the gastric juice, or of Muriatic or Lactic acid, which, according to Prout, are always found in the stomach during the process of digestion: in these cases acids would be strictly homœopathic. Though both of these acids may be in excess, one almost always predominates, and the symptoms vary accordingly. The predominance of the Muriatic acid seems in general to denote an *inflammatory* state of the system; while the predominance of the Lactic acid rather marks a state of *irritation.* (PROUT.) In the dyspepsia of plethoric and gouty individuals the predominating acid is generally the Muriatic; the same derangements, when they occur in weak, delicate, or nervous subjects, are very often attended by the presence of an excess of Lactic acid in the stomach. Billing says that alkalies relieve acidity of the stomach for a time, but in order to cure it effectually, an *acid* should be used, such as dilute sulphuric acid.

According to Prout, "The injudicious use and abuse of alkaline remedies in acidity of the stomach is often a source of great mischief. Alkalies exert no curative effect; that is, they will not prevent *future* acidity. On the contrary, when taken in large doses, and at improper times, the effect of alkalies is to cause *an absolute increase of acid.* Thus, when a large quantity of alkali is taken into an empty stomach, the immediate effect is, that the stomach, in endeavoring to resume its natural condition, throws out an additional quantity of acid to neutralize the redundant alkali. When alkaline remedies, therefore, are injudiciously persisted in, a daily contest arises between the stomach and the doctor. If the constitution be sound, the stomach, in spite of the doctor, usually gains the ascendency; but at the expense of extraordinary labor, in the secretion of a greater quantity of acid. If, on the contrary, the vital powers of the stomach be weak, the doctor may conquer, but at the risk of still farther enfeebling the vital powers of that organ; and in both instances the general result will be, that *the diseased functions of the stomach producing acidity will be augmented rather than improved.*"

2. Dr. Zabriskie, in the N. Y. Journal of Med. and Surg., for Sept., 1846, p. 171, says, "The term Homœopathy does not express the distinctive character of their practice, as the *greater* part of the practice of *every* physician is homœopathic in the true meaning of the word. As the great mass of diseases consist of inflammations or irritations of some particular organs, the medicines which are used to combat them are gen-

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erally those which act on these organs, or in other words, irritate them. Does not almost every physician treat diarrhœa with laxatives, and give emetics to relieve nausea? Do not all use expectorants in diseases of the chest, while Stramonium, Conium, Digitalis, and Opium, are used in mania. In urethritis, Nitrate of potash, Balsam copaiba, Oil of turpentine, and other articles which irritate the urethra, are the most common remedies; and Nitrate of silver is used for inflammation of almost every mucous surface, wherever it is possible to apply it. Sulphate of copper, Sulph. zinc., Nit. silver, and other irritants and caustics are universally used as Collyria in ophthalmia. Alcohol, Spirits turpentine, Mercurial ointment, and sometimes blisters, are used in erysipelas." All instances of more or less rude homœopathic treatment. The probability is that many more physicians will adopt a more exact homœopathic treatment in many diseases, if they once can be persuaded to inquire into the law "similia similibus," independently of the doctrine of potencies.

Dr. Zabriskie ought to be informed, however, that he misapprehends the fundamental idea of Homœopathy. That idea is, that for a certain number of morbid conditions of the organism, Nature has provided a corresponding number of remedies, so-called specifics, each of which corresponds to a particular vital disturbance. An irritation of the eye which corresponds to Sulphate of copper, is different from an irritation corresponding to Sulphate of zinc; hence the former cannot be substituted for the latter in the treatment of those irritations. A mania corresponding to Stramonium is different from one corresponding to Opium, and requires, for its cure, the use of Stramonium. One of the great errors of the old school is, to make whole classes of remedies correspond to one particular disturbance, without individualizing the group of morbid phenomena to which each member of the class corresponds in particular. At the rate in which some allœopathic writers go on, they will very soon make out that Homœopathy is an old thing, and has always been practised by our friends of the old school.

3. On the 104th page of Braithwaite's Retrospect we find an article on the use of Castor oil in diarrhœa. Dr. Thomson believes there are but few cases of diarrhœa occurring in infants under a year old, but what may be cured by Castor oil, even when ulceration has taken place, as shown by blood in the evacuations, tenesmus, tumid and painful abdomen, dry and aphthous mouth, &c.,—he gives Castor oil with yolk of egg. He says no mercurial so quickly changes the character

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of the evacuations as this emulsion; it is readily taken and even liked. It is equally useful in that form of intestinal disease common in children from one to nine years of age, where the evacuations become watery, brown, black, and very offensive. In one case a boy aged three years lay almost insensible and somnolent; the evacuations resembled black, dirty water, and very offensive; they were passed eight or ten times in twelve hours: after the first dose of this simple emulsion there was no motion for thirty-six hours, all the other symptoms becoming ameliorated.

A Case of Spondylarthrocace, *by Dr. Nusser, Prosector in the University of Basle, Switzerland.*

(Extracted from Hygea, Vol. XXI, No. 3.)

John Martin Asal, born of healthy parents, and enjoying good health until he was four years old, fell sick at the commencement of the year 1840. His illness had no definite shape, and, when I was sent for, two months after, his mother had forgotten the symptoms which characterized the first outbreak of the disease. During these two months a physician had been employed, who declared, however, that nothing could be done. When I first saw the boy, he complained of pain in the spine, want of appetite, and of his lower limbs getting soon tired. I ordered Silicea 30, fifteen pellets, in a tumblerful of water, a tablespoonful a day. After seeing the boy, I got sick myself, and was confined to my room for twelve weeks. During all this time nothing was done for the boy, except to use domestic remedies and aromatic baths. While using the baths, the symptoms became much worse, the patient had to keep his bed, became weaker every day, and a curvature of the spine became perceptible in the region of the spinous process of the tenth dorsal vertebra. I ordered Silicea 30, fifteen pellets, giving such a dose every sixth day. The patient was alternately worse and better until February, 1841 (in fine weather the patient was well enough to be taken on a ride). About this time a moderate fever set in, with beating pains in the back, which frequently extorted screams from the patient, and were increased by contact and by raising the body. On touching the spine, the whole body was convulsively shaken; during the night the patient was affected with spastic contractions of the lower limbs, with delirium and considerable weakness. Aconite, Phosphorus, Ignatia, were of no avail. Arsenic 30, fifteen globules a day, effected an improvement at first, which progressed from day to day, so that the pains disappeared, and appetite and sleep returned. In June, 1841, the pa-

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tient was again able to walk without support. Took Silicea 30, one dose every five or six days. Until November the condition of the patient was pretty comfortable; he went to school and participated in the amusements of his classmates. About the middle of November he was attacked with catarrh, had to keep his bed, and complained again of beating pains in the back, and tearing in the lower limbs. Silicea was continued as above.

In January, 1842, the patient improved again and walked out. In May following a swelling of the size of a hen's egg was discovered suddenly in the region of the superior anterior spinous process of the right ileum. The parents, imagining that this was hernia, procured a truss, of course without my knowledge, but the patient not being able to bear it, I was again sent for. I declared that the swelling was an abscess; it matured gradually, and when opened, it discharged a quantity of thin pus. The suppuration continued until April, 1843, during which time the patient was pretty comfortable, and was kept on the use of Silicea as above. About this time the fistulous opening closed entirely, and a cicatrix formed. The curvature, which had increased until the abscess was opened to such an extent that the patient leaned his hands upon his thighs in walking and looked almost like a quadruped, had at the same time diminished, and the patient was again able to walk without any support. He remained perfectly well the whole year (except the passage of ascarides from time to time), he walked almost erect, participated in all the amusements of his companions, and was so well that I discontinued all further treatment.

In March, 1845, the patient came home from school, complaining of pains in the small of the back, occasioned by his having been thrown on the back by another boy. Not until the August following, his parents perceived that his walk was more crooked than usual, which disappeared again in the course of that day; the patient complained again of the same beating pains in the back, as he had done in the commencement. Arnica, Conium, Rhus, were of no avail. In October the patient was obliged to guard his bed; the feet, hands, and face became œdematous, especially the right side of the face, so that the eye could scarcely be opened. The boy had no sleep, and was delirious. The beating pains in the back increased, and became worse when tapping the back with the palm of the hand, without being as violent as before. I prognosed a new abscess.

On the 24th of the same month the patient suddenly be-

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came very uneasy, about six o'clock in the evening; he had violent vomitings, and stools; he fainted while passing his stools. I was sent for, and, on my arrival, I found the boy in his mother's arms, râling, his eyes half closed, and his limbs relaxed. I thought the boy was dying, and expressed my suspicions to the parents that the abscess might have been discharged internally. I ordered a grain of the acetate of Morphia in water, a tablespoonful now and then; I gave it as my opinion that the boy would die, and expected to obtain an interesting anatomical preparation. What was my astonishment when I found the boy tolerably comfortable next day. Gave Ars. 3, decimal scale, five pellets every five hours; a dose of Chamom. in the evening. On the third day after this attack the patient became weaker, without having much fever; the urine became suddenly turbid, and had the appearance and color of a soup made of flour, while it passed out of the urethra. At first I suspected that the urine was mixed with fæces which might have passed off imperceptibly while the urine was emitted. I directed the mother to pay especial attention to this, and was told in the most emphatic manner that no such admixture of fæculent matter did take place; I did not convince myself by an ocular inspection.

Nine days after the attack, the patient was only able to lie on the right side, and complained of pains in that side. The weakness and sensitiveness of the patient would not admit of any manual examination. The Arsenic was continued every four hours the first three days; after that it was taken morning and night. On the ninth or tenth day the urine resumed its natural appearance, the dropsical conditions disappeared likewise, and, under the use of Silicea 30, ten pellets at a dose, giving it every four or five days, the patient became so much better towards the end of the year, that he could be again carried to school. Since the middle of January, he has been walking out again, and I see him occasionally in the street, playing with his companions.

From the above case I draw the following inferences:

1. The abscess in the region of the right os ilium, mentioned at the commencement, was a psoas-abscess, occasioned by spondylarthrocace of the body of the tenth (perhaps also the eleventh) dorsal vertebra.

2. The spondylarthrocace might be considered as cured after the closing of the fistulous opening, and the complete restoration to health of the patient.

3. The attack which occurred in the past year, ought to be considered as a consequence of an external injury inflicted

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upon organs which had not yet acquired their former strength back again; it has no necessary connection with the formerly existing spondylarthrocace, nor does it impair the facts stated in No. 2.

It is much more difficult to decide whether the phenomena characterizing the last attack were occasioned by a recurrence of the inflammation and the formation of a new abscess in the same region as formerly, and whether there had really been effusion from the burst abscess. Much as this supposition is supported by the fact that the symptoms occurring last were very much similar to the local symptoms preceding the formation of the first abscess; nevertheless the effusion of the abscess seems to be counterindicated by the sudden disappearance of the extravasated pus. Unfortunately no opportunity was afforded of examining chemically the urine of the patient, by which means it might perhaps have been discovered whether the pus was really absorbed, and afterwards carried off by the urinary passages.

TARTARUS EMETICUS AND PHOSPHORUS IN PNEUMONIA.

BY DR. CL. MUELLER.

a. *Tartarus Emeticus.*

Although one might feel disposed to believe that since Peschier's and Delpech's recommendation of Tartar emetic in pneumonia, a sufficient number of practical observations has been made in relation to that subject, and collected in the writings of allœopathic medicine, yet, after a careful and comprehensive examination of the facts, I feel justified in asserting that there is a great want of specified indications for the employment of that drug. I may state, for instance, that Peschier has never cured pneumonia with Tartar emetic, but only pleurisy; for he says in Biblioth. Univers., 1822, that he employs Tart. emet. against stitches in the chest, whether they are more or less violent, seated or erratic, with or without fever, recent or of more ancient date. The following is about all that is said about its efficacy in pneumonia in homœopathic writings.

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Dr. Wurm (*Hygea*, XII., 1., p. 41) recommends Tart. emet. in pleurisy, complicated with bronchitis, when the expectoration is difficult.

Dr. Buchner (*Hygea*, XV., 6, p. 509) recommends Tart. emet. in pneumonia, when the fever and the typical phenomena have disappeared for the most part, but when the rattling breathing continues, the patients expectorate large confluent masses, the expectoration and the breathing being difficult, the chest being burning as high up as the throat, and gastric symptoms prevailing.

A writer in the *Archiv.* XIX., 2, p. 31, who does not sign his name, calls Tart. emet. homœopathic in pneumonia gastrica, and in the stage of hepatization in genuine pneumonia.

Dr. Bosch (*Hygea*, XX., 4, p. 304) mentions the details of several cases of cure of pneumonia by Tart. emet., and has always found it attended with success when the inflammatory fever decreased at the same time as the oppression of the chest and the anxiety, with a small, soft, and frequently unequal pulse increased, and when the physical signs (dull percussion-sound, crepitation, bronchial respiration) pointed to hepatization.

Dr. Kurtz (*Hygea* V. 2, p. 141) recommends Tartar emetic as the true specific in the stage of hepatization, accounting for that specificity from the pathological character of hepatization.

The following pathogenetic symptoms indicate its action upon the bronchia, lungs, and pleura. A good deal of cough and sneezing. Violent titillating irritation in the wind-pipe, with desire to cough. Loose night-cough. Rattling of mucus. Cough after a meal with vomiting of the ingesta. Panting gasping for air at the commencement of every paroxysm of cough. Burning under the sternum. Violent rheumatic continuous pain in the left side of the chest. Paroxysms of sore pain in the chest, accompanied with hopeless and desponding mood. Sensation as if the chest were lined with velvet. Short, labored breathing, obliging one to sit up in bed. Want of air, obliging one to sit up, diminished after cough and expectoration. Nightly paroxysm of orthopnœa. Frequently the breathing is unequal and intermitting during sleep. The inspirations are less frequent. Difficulty of breathing with dysphagia. Uncommon oppression of the chest.

The symptoms which have been obtained from the poisoning of animals are as follows: The lungs are turgid with blood, there are distinct traces of inflammation, the lungs are splenetized, and in some places even hepatized, violet-colored, and cease to crepitate (Magendie, from an injection of from six to eight grains into a vein, Orfila's Toxic. Gén. vol. I. p. 460).

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The lungs are very much altered, orange-colored, or of a violet-blue, not crepitating, filled with dark blood, and the parenchyma being contracted; inflammation of the trachea, and, in a still greater degree, of the lungs. (Schrœpfer in Christison's treatise on poisons, p. 503, from injecting one scruple into the trachea of a dog.) In cases of poisoning in men, the lungs exhibited a black appearance in several parts.

It is therefore perfectly certain that Tartar emetic has a specific effect upon the lungs, bronchia, and pleura, and that the symptoms which characterize its action upon those organs are very similar to the usual and essential symptoms indicating pneumonia, bronchitis, and pleurisy. The more precise indidations for the use of Tartar emetic are, however, less known. Most physicians have been in the habit of supposing that Tartar emetic may be used in any form of pneumonia or pleuritis; all they disagreed upon, was whether they ought or ought not to bleed previous to the administration of Tartar emetic. The result of such a summary proceeding must of course have been very various; hence the most enthusiastic praises on one, and the most peremptory condemnation on the other side. Others felt indeed that the sphere of action generally assigned to Tartar emetic would have to be somewhat restricted, and therefore recommended Tartar emetic in those inflammatory conditions of the chest, in which it was doubtful, by the ordinary method, whether blood should be drawn or no. (See Bersius, Miguel, and others.) The same difference of opinions exists in regard to the time and stage of the disease when Tartar emetic should be administered; some employ it at the very commencement of the disease, others when exudation has set in, especially in pleuritis; making the Tartar emetic a sort of resolvent and substitute for the ordinary mercurial friction. As I said above, homœopathic physicians have used Tartar emetic very seldom in inflammations of the chest, not so much because the experiments upon the healthy body were not a satisfactory evidence of its homœopathicity to those affections, as because they were satisfied with the results they obtained by using other drugs, or because they did not feel disposed to credit the recommendations of allœopathic writers. It is true, the few homœopathic physicians who have used it in inflammations of the chest, have not been satisfied with its effects. Indeed, no homœopathic physician can have expected that it should be a specific to pneumonia generally. What remains now to be done is to determine, from the physiological effects of the drug, and from the practical observations at the bedside, those symptoms which, if occurring in pneumonia, will enable us to

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administer Tartar emetic according to strict homœopathic principles.

As regards the painful sensations excited by Tartar emetic, they are especially valuable and characteristic in pneumonia. There is but one symptom on record, belonging to this class: violent, rheumatic, continuous pain in the left side of the chest. We know that there is scarcely any pain in pneumonia, or at any rate, the pain is very inconsiderable; but there is much pain in pleurisy and in pleuro-pneumonia, the parenchyma of the lungs itself being little susceptible of pain, but its serous covering, the pleura, so much more; if the pleura be affected, and especially if it be inflamed, the patient experiences intense pain, which is almost always *sticking* and *darting* (as is almost every pain experienced in serous membranes); the pain is not continuous, but occurs in paroxysms, is excited by movement, breathing, etc. The above mentioned pain being the only painful symptom occasioned by Tartar emetic, it follows of course that that drug has no relation to pleurisy in the first two stages. It is impossible to state with precision what the term "*rheumatic pain*" means; if it is to express the changing, erratic nature of the pain, this is contradicted by the subsequent addition "continuous"; or if the term rheumatic is to be understood in a popular sense, the people calling every pain rheumatic which is experienced after catching cold, the expression should not be received into a scientific work without being definitely explained; the probable meaning is that the pain is seated in the muscles of the chest, inasmuch as rheumatic affections are especially seated in the fibrous tissues. Although Peschier considered stitches in the chest as a symptom indicating the administration of Tartar emetic, yet that symptom does not indicate its use, and counter-indicates it in pleurisy. The absence of painful sensations among the pathogenetic symptoms of Tartar emetic, indicates this drug rather in pneumonia. Three symptoms ought to be considered here: Sensation as if the chest were lined with velvet; painful soreness of the chest, appearing in paroxysms; burning under the sternum. These three symptoms have evidently the same origin: they are affections of the mucous membrane of the bronchia and their ramifications; they indicate the presence of an ordinary catarrh, or of a catarrhal affection constantly accompanying pneumonia; those three symptoms do not correspond to pleurisy, for this reason, that pleurisy is much more rarely accompanied with catarrhal symptoms than the affections of the parenchyma of the lungs. Characteristic are the symptoms indicating difficulty of breathing; short, labored breathing,

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obliging one to sit up in bed; frequent attacks of unequal, intermittent breathing, while asleep; uncommon oppression of the chest; want of air, obliging one to sit up, relieved after coughing and expectorating; nightly attack of orthopnœa; difficulty of breathing with dysphagia. On comparing these numerous symptoms with the few painful sensations of Tartar emetic, we at once come to the conclusion that the former must be of a much greater importance than the latter. Tartar emetic will therefore be found especially indicated in those conditions of the lungs, *in which the oppression of the chest and the labored breathing are prominent symptoms, and the other symptoms are less marked.*

The symptoms characterizing the expectoration are a little less satisfactory; as regards the cough itself, we learn indeed that it is generally loose, accompanied with expectoration and even with mucous rattling, but not a word is said about the nature of the expectorated substance, which is, however, of great importance in Pneumonia. This deficiency in the description of the expectorated substance is very much to be regretted; however, we may lay it down as a fact, that the expectoration of those who were poisoned by Tartar emetic has never been of a sanguineous character, inasmuch as this symptom would have been too striking to be overlooked.

The following two symptoms seem likewise to be of particular importance: Panting gasping for air at the commencement of every paroxysm of cough, and want of breath, diminished after coughing and expectorating. This dependence of the oppression of the chest upon the expectoration, and the disappearance of the oppression for a time after coughing, exist to the same extent in certain forms of pneumonia, that is, by means of coughing, or even by means of an expectoration without cough, the bronchia which ramify into the hepatized lung, may be freed of the fluids or hard substances which they contain, or the communication between the bronchia and the trachea, which had been interrupted by mucus, may be restored by the above mentioned means; which circumstance is partly accounted for by the sudden abatement of the oppression after the expectoration, and partly by the fact that bronchophony, the bronchial respiration, the consonant rattling murmurs, sibilus, etc., are frequently heard after a fit of cough, whereas a moment ago nothing could be heard of all this. (See Skoda, p. 251.)

We now come to examine the symptoms which have been obtained by post-mortem examination. If any doubt should have been entertained of the specific relation of Tartar emetic to the lungs and inflammation of the lungs, the post-mortem

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examination removes those doubts entirely, inasmuch as the phenomena characterizing inflammation of the lungs by Tartar emetic, are extremely analogous to the phenomena of natural pneumonia. The former were, moreover, obtained in a manner which leaves no doubt as regards the specificity of the drug in the latter affection. They were some of them obtained by injecting the Tartar emetic into a vein, which shows that the lungs, as well as the stomach, are specifically affected by that poison, independently of the locality where it was brought in contact with the organism. The symptoms themselves obtained by this means, point in a manner which cannot be misunderstood to the stage of pneumonia to which Tartar emetic is homœopathic: The lungs, or a part of the lungs, having become turgid with blood (this condition being designated *engouement* by the French writers), have become heavier, and more solid and compact, they cease to crepitate; hence follows that they do not contain any air, a condition which most pathologists describe as red hepatization, and is designated by Andral by the term ramollissement rouge. This pathological condition corresponds with more accuracy than any other condition would, with the symptoms which have been observed on healthy persons.

Summing up all the observations relating to Tartar emetic, the following indications for the use of Tartar emetic will be arrived at: It corresponds especially to the second stage of pneumonia, provided little or no darting pain, great oppression and difficulty of breathing exist, when the cough is loose and accompanied with mucous rattling, and when that cough occasions considerable expectoration, followed by relief of the oppression of the chest, when the expectorated mass contains little or no blood, and a larger quantity of mucus, and when percussion and auscultation show that a portion of the lungs is hepatized. As respects the physical symptoms, the following facts may be laid down: The percussion-sound over a smaller or larger space of the walls of the chest, will appear dull, with increased resistance; or the sound may have lost all resonance whatever when that portion of the chest over which the stethescope is applied has become hepatized throughout; that portion of the wall of the chest which is in immediate contact with the hepatized lung may give a tympanitic sound (that is, when those portions of the lung which are adjoining to the hepatized lung, are emphysematous, which is frequently the case), or the usual normal sound may be heard, such as is heard in the remaining portions of the lungs. In case the hepatized portion should be very small in circum-

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ference and not very deep, the percussion-sound would be normal, which is indeed seldom the case. In that part where the percussion-sound is dull, bronchophony will be heard more or less distinctly (provided the hepatized portion includes one of the larger bronchial tubes, and this tube is not filled with fluid or a solid exudation or coagulum of blood, interrupting the communication with the trachea), accompanied with bronchial respiration, and consonant rattling, or one or the other. However, the presence of bronchophony does not necessarily imply the presence of bronchial respiration, sibilus or rhonchus, and vice versa, bronchophony is not always heard when bronchial respiration is present; sometimes these phenomena are only perceived after expectoration has taken place, as was mentioned above. In those parts of the thorax where the lungs are not hepatized, a feeble vesicular respiration, or a puerile or indefinite breathing and various rattling murmurs may be heard. It ought to be observed that the so-called physical symptoms remain the same in the third stage of pneumonia, the so-called gray hepatization, which does not correspond to the Tartar emetic, inasmuch as the symptoms do not indicate it; but in spite of the presence of the above physical symptoms, it is not very easy to confound the third or ulcerative stage with the second stage of pneumonia, because the third stage is characterized by a group of general symptoms which would lead to Phosp., Ars., Rhus, Laches., etc., much sooner than to Tartar emetic which has either none, or but a limited number, of the symptoms of that group.

It now remains to be examined whether there are some indications for the use of Tart. emet. besides the above mentioned symptoms. According to the general views and experience, those forms of pneumonia correspond most to Tartar emetic which are complicated with gastric or bilious symptoms, the so-called pneumonia biliosa, erysipelas pulmonum. Inasmuch as the usual symptoms of pneumonia, the oppression, cough, etc., and the symptoms obtained by auscultation and percussion are the same, the principal question will be to discover the distinctive signs characteristic of pneum. biliosa, and to compare them with the symptoms of Tartar emetic. Characteristic in this form of pneumonia are: the slight bilious tinge of the skin, especially of the albuginea, and in the region of the wing of the nose, and the corner of the mouth, the coating of the tongue from the light-yellow to the brownish, the bitter taste, the inclination to vomit, and frequently real vomiting, the brownish urine, which sometimes contains the pigmentum of the bile (the blood which is drawn is said to as-

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sume a saffron-tinge when mixed with nitric acid. Moreover there is generally a sticking pain below the right false ribs, or a pain in the pit of the stomach with distention, frequent eructations and hiccough, moreover a peculiarly aching, violently boring pain in the frontal region, sometimes increasing towards evening to furious delirium; the cough is frequently accompanied with vomiting; and a frothy mucus which is of the color of saffron, has a slight greenish tinge, and is but rarely mixed with a small quantity of blood, is thrown off. Most of these symptoms, although not all, are found among the symptoms of Tart. emet. The yellowish coloration of the skin is entirely wanting, also the yellow-brownish coating of the tongue and the bitter taste; however, it must, on the other, hand be admitted, that the bilious color of the skin is not always distinctly indicated in pneumonia biliosa. In Tart. emet. we find precisely the distinction and sensitiveness of the region of the stomach and hypochondria, accompanied with eructations, hiccough, and vomiting, the dark-brown-red turbid urine, the aching pain in the forehead, and the cough with vomiting; as regards the expectorated mass, nothing definite is known. From all this it appears that Tart. emet. has some curative influence in the so-called bilious and gastric pneumonia, the same as Senega, Mercurius, Nux vom.; but no one has a right to maintain that Tart. emet. is the only remedy which corresponds to that affection.

b. *Phosphorus.*

The practical observations in the treatment of inflammation of the organs of the chest with Phosphorus, are much more numerous. I shall content myself with quoting the most important and most reliable from the various homœopathic publications.

Dr. Wurm (*Hygea*, XII. 1, p. 38, and IX. 1, p. 55) recommends it in pleurisy and pneumonia when tuberculosis pulmonum is present, also in a complication of pleurisy with pneumonia or bronchitis. Dr. G. Schmidt recommends it under the same circumstances (Hygea, IV. p. 68).

Dr. Griesselich (*Hygea*, XIII. 6, p. 528) cured pleuropneumonia by Phosphorus. which had been increasing all the time under the use of Aconite, Bryonia, Moschus, Arnica, and where muttering delirium and grasping at flocks, suffocative fits, extremely labored respiration, dangerous debility, small, quick pulse, caused one to apprehend every moment paralysis of the lungs; the respiratory murmur was no longer audible in the

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right lung, in the place of which a considerable friction-sound was heard there. A short while after using the Phosphorus, expectoration set in, the breathing became freer, so that, after the lapse of twenty-four hours, the first slight respiratory murmur and strong pectoriloquy and egophony were heard, and the patient soon recovered.

Dr. Buchner (*Hygea*, XV. 6, p. 507) recommends Phosphorus when there is great prostration, livid countenance, faint eyes, powerless, dry, and hacking cough, especially at night, debility rendering the expectoration difficult, burning stinging, rattling in the chest, danger of paralysis of the lungs, complication of pneumonia and bronchitis, incompleteness of the crises, owing to debility.

Dr. Horner (*Archiv.*, XX. 1, p. 118) cured with Phosphorus an extremely violent peripneumonia, in which, after the use of Aconite and Bryonia, debilitating epistaxis, subsultus tendinum, delirium furibundum, and involuntary stools had set in.

Schellhammer (*Archiv.*, XX. 3, p. 120) cured with Phosphorus cases of neglected pneumonia, when the following symptoms were present: cold, viscid sweats, tremulous, scarcely perceptible pulse, rust-colored difficult expectoration, extreme anguish, hippocratic countenance, and both sides of the chest frequently as dull on percussion as if one knocked against a wall.

Dr. Eichhorn (*Hygea*, XIX. 1, p. 21), when the incipient hepatization or genuine and so-called asthenic pneumonia, beside the physical symptoms, was indicated by a livid, pointed countenance, cold sweats, quick and rather hard pulse, frequent cough with frothy or brown expectoration (frequently looking like jelly), etc.; and also in those cases of typhoid pneumonia where sensitiveness and rumbling in the cœcal region and diarrhœa are present.

Dr. Schneider (*A. h. Zeit.*, vol. 21, p. 4) found Phosphorus better than any other remedy in pneumonia at the time of the ganglionic typhus of 1839 and '40; generally he found Phosphorus indicated when Acon., Bryon., Merc., had not procured the desired relief previous to the crisis setting in, and also in neglected cases with rattling noise in the bronchia, difficult, purulent, copious expectoration, and great debility.

Dr. Watzke (*A. h. Zeit.*, vol. 21, p. 109) considers Phosphorus the specific in the second stage of primary pulmonary croup,[1] also in pneumonia complicated with effusion into the pleura or with bronchitis.

The most determined friend of Phosphorus in pneumonia

([1] Rokitansky describes pneumonia as pulmonary croup.—H.)

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is Dr. Fleischmann; in 1840 he employed it successfully in fifty-one cases in almost any stage (see *Hygea* XIV. 4, p. 358); he obtained similar good results in the following years (*Hygea*, XVIII. 5, p. 468). The physical signs were: dull percussion-sound, bronchial respiration, frequently accompanied with crepitation or rattling.

Cures of dangerous cases of pneumonia, even typhoid pneumonia, are related by Dr. A. Noack (*A. h. Zeit.*, vol. 21, p. 321), Dr. Bethmann (*Annals*, vol. 4, chap. 3, p. 296), Dr. Hartlaub (*Annals*, vol. 4, chap. 4, p. 459).

There is one voice against Phosphorus; it is that of Dr. Peschier (Biblioth. Homœop. de Genève, nouv. série, tome VI. No. 5, 1840); he recommends it when acute pneumonia supervenes in the course of pulmonary phthisis, and even here he warns against effects of Phosphorus which are beyond what was intended, for which effects he recommends some suitable antidote.

The special pathogenetic symptoms of Phosphorus having reference to pneumonia are as follows: sticking and violent stitches in various parts of the chest, left and right side, sometimes accompanied with burning, in rest and during motion, especially when sitting and taking an inspiration; pain in the chest, especially during an inspiration; itching in the interior of the chest, with dry cough; feeling of heaviness in the chest; anxiety in the chest with arrest of breathing and beating in the right side of the chest; great oppression of breathing, great shortness of breath; oppressive tightness and tensive sensation in the chest, as if a band were encircling it; tension and dryness in the chest; constrictive clawing and pressing in the upper part of the chest; loud, rattling breathing; dry, hollow cough without expectoration; a sort of hacking cough with huskiness of the chest and expectoration of some mucus; cough with expectoration of transparent mucus, accompanied with tensive pain, and afterwards with sticking pain in the chest; fatiguing cough, with white, tenacious expectoration; the expectorated mucus is streaked with blood; bloody expectoration with mucus, accompanied with short, slight cough; coughing up small clots of pus with smarting burning behind the sternum; sticking pain in the pit of the stomach when coughing, obliging one to lay the hand upon the pit; short breath after every turn of cough.

The post-mortem examination of dogs poisoned by Phosphorus has revealed the following symptoms: after injecting Phosphorus dissolved in oil under the skin of the back or into the jugular vein of a dog, the animal exhaled a white smoke at every expiration, after a few minutes, and died shortly after;

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the smoke contained a large quantity of Phosphoric acid; upon examination it was found that the pulmonary vessels were obstructed (hepatization). (Magendie, Expériences pour servir à l'Histoire de la Transpiration Pulmonaire, 1811, p. 19.) Orfila observed the same thing; the dog upon which he experimented, soon commenced to pant and to breathe very heavily, and, previous to death, expectorated a quantity of a sanguineous serous mass. The post-mortem examination, which was instituted immediately, revealed the existence of some blue spots in the lungs, of a dense and much less crepitating tissue than in the natural condition; the other parts of the lungs were rose-colored; in another dog the lungs were found red, turgid with blood, and there was no crepitation. (Orfil., Tox. Gén., Vol. I., p. 56.) In men poisoned with Phosphorus the lower lobes of the lungs felt hard and were turgid with venous blood. (Austrian Med. Jour., 1843, No. 39.)

The above mentioned symptoms of Phosphorus are characteristic, and correspond to the symptoms of certain forms of pneumonia. Without referring to practical observations made at the sick bed, the above symptoms will be found sufficient to guide us in the use of Phosphorus in pneumonia. The painful sensations of Phosphorus in pneumonia are generally stitches and painful dartings, which are particularly excited or increased by breathing, cough, and motion; the same phenomena occur in pleuropneumonia, where the pain which is almost exclusively darting, is excited by scarcely any thing else except by deep breathing and by cough. Nothing special is noticed in reference to the locality of the pain excited by Phosphorus, whereas we know that in pneumonia the lower portions of the lungs are more frequently affected than the upper; in this respect, however, we have the confirmatory indication for Phosphorus, that in the above mentioned case of the man who had been poisoned with Phosphorus, the lower portions of the lungs were found turgid with venous blood. Characteristic symptoms of Phosphorus are the symptoms of asthma and dyspnœa, which are not relieved, as is the case with tartar emetic, by cough and expectoration; on the contrary, the breathing becomes very short after every cough. The cough and the expectoration of Phosphorus are much more correctly described than those of tartar emetic; the cough is either dry and hollow, or it is loose, fatiguing, hard, and generally very painful; the expectoration consists in white, transparent, tenacious mucus, or in mucus mixed with blood, or in purulent masses.

The results of the poisonings with Phosphorus, are pretty

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much the same as those of tartar emetic; that is, the lungs, or a portion of lung, were harder, more impermeable, consequently hepatized. If from what has been said above, we wish to determine those forms of pneumonia in which Phosphorus is specifically indicated, we shall in the first place have to mention those which are not only characterized by dyspnœa and difficult breathing, but also by darting pains in the chest, especially such as are excited by breathing or cough; hence, pleuro-pneumonia in which the pleura is particularly affected (it never remains entirely unaffected in pneumonia), especially in the second stage of pleuro-pneumonia, when mucus or an admixture of blood and mucus is coughed up, and the physical signs are the same as those mentioned under the head of tartar emetic, viz.: dull percussion-sound in the region of the affected portion, bronchophony or bronchial respiration, and perhaps consonant rattling murmurs. So far it would seem that Phosphorus and Tartar emetic are indicated pretty much for the same conditions, and that they are distinguished only by some few characteristic symptoms. But there remains one group of symptoms under the head of Phosphorus which has not yet been considered, and which extends and alters the sphere of action of Phosphorus considerably. That group consists of those phenomena which, without changing the physical signs, were accounted for by older physicians by the fact, that the inflammation assumed a typhoid character. These nervous symptoms probably come on when the inflammation enters the third stage, that of gray hepatization, where paralysis of the lungs becomes imminent, and sometimes they exist in the first stages of those typhoid inflammations which have their seat in the lungs. The following symptoms generally appear when the inflammation approaches the third stage: depression of the mental functions, slight bland deliria with grasping at flocks, and subsultus tendinum, sudden debility, cold, viscid sweats, small, weak, frequent pulse, faint eyes, sunken countenance, dry lips and tongue, short, painful breathing, oppression and anguish, difficult cough and expectoration, frequent diarrhœic, involuntary stools. The physical signs remain the same as in the second stage, except that the percussion-sound is quite dull over a larger extent of surface, and the respiratory murmur is either not heard at all, or but feebly in that region.

The expectoration either ceases entirely or can only consist in purulent confluent masses. Almost all these symptoms are characteristic of Phosphorus, especially the delirium with grasping at flocks, the sunken, hippocratic countenance, with

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eyes retreating into their sockets, dry lips and tongue without thirst, anxious and short respiration with little and painful cough, and purulent expectoration, viscid sweats, cold face, small, quick pulse. To these indications we have to add the numerous, well authenticated observations at the sick-bed, recommending Phosphorus in the neglected, asthenic, nervous pneumoniæ, and the important recommendation of Dr. Fleischmann, whose views in this respect are derived from long hospital practice. From all this it appears that Phosphorus is not only specifically indicated in the second stage of pneumonia, but also in the commencement of the third stage, when the nervous symptoms are beginning to set in and even when paralysis of the lungs is threatened. In comparing Phosphorus with Tartar emetic, it will be found that Phosphorus has a much more extensive sphere of action than Tartar emetic, inasmuch as it will be of avail even in the more advanced stages of pneumonia, where Tartar emetic ceases to do the least good. It is of course doubtful whether Phosphorus will do any good when the purulent infiltration is considerably advanced; the probability is that no remedy will.

I beg leave to note here a remark made by Dr. Hering, in the second volume, second number of the Archiv., p. 159, who declares that Phosphorus scarcely ever cures except when the *left* lung is principally affected, all the other symptoms corresponding to Phosphorus; the same observation applies to Aconite and Bryonia. I cannot accede to that opinion, for I know not upon what it is based; the physiological symptoms put down in "Hahnemann's Chronic Diseases," do not justify that assertion; those symptoms occur just as well in the right as in the left side of the chest; there is no perceptible preponderance either way, for evidently those symptoms which relate to the heart cannot be accredited to the lung. Nor is Hering's remark substantiated by the experience of other practitioners. Generally, the localization of the effects of our drugs ought not to be carried so far as Dr. Hering seems disposed to do. Although it is true that the different drugs exercise a specific effect upon certain tissues, nervous centres, nerves, organs and parts of organs, and that the different drugs exercise similar effects upon the same organ in different degrees, yet the action of our drugs is not so regularly marked off as to make the action of one drug begin where that of the other terminates; least of all is this true in regard to pair-organs. A drug which produces morbid effects in the left eye of a prover, will certainly cure similar symptoms in the right eye, provided all things correspond; the same is true of the feet, extremities, lungs, etc.

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The same may be said of the skin; whether the eruption is seated on the right or left chin makes no difference; it is even indifferent whether the eruption be located on the abdomen or the extremities, except some kinds of eruption where the locality is characteristic. From these reasons it appears that it is not of as much importance as some would suppose whether the symptom appears in the right or left half of the body, except in a few particular cases; and, although it is perfectly proper that the locality of the symptom should be strictly defined by the prover, yet the treatment of disease agreeably to the law "*similia similibus*" does not require such a literal correspondence of the physiological symptoms of the drug and the morbid symptoms which the drug is intended to cure.

HOMŒOPATHIC CURES,

From the year 1840 *to* 1844, *collected from the various Homœopathic publications, by Dr. Kurtze, of Dessau.*

TRANSLATED BY CHARLES J. HEMPEL, M. D.

(Continued from Vol. V. No. 1 of the Examiner.)

In Angina, Belladonna is to be preferred when the outer parts of the neck are painful during motion; when the redness is of an erysipelatous character, superficial, not circumscribed. Mercurius is the specific when there is circumscribed redness, disposition to suppuration or real suppuration, ulcers in the mouth and fauces, salivation. When both series of symptoms were present, it was found expedient to alternate Belladonna and Mercury; the same alternation was likewise found useful when neither one nor the other remedy was clearly indicated. Five cases are mentioned which were cured in from two to four days. (Hygea.)

ANGINA FAUCIUM.

In the dangerous angina accompanying malignant scarlet-rash, where the tonsils and the neighboring glands were swollen to the size of a common ball, and hard, when the fetid ichor is discharged from the nose, with snoring intermitting breathing, hurried pulse, give Acon., Nit. ac., Bellad., Lycop., (which is especially useful in keeping down the stupor), every hour, in alternation, giving each remedy several times in succession. No patient who was thus treated, died during the epidemy of 1839.

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NOTICES.

A Manual of Homœopathic Cookery: designed chiefly for the use of such persons as are under homœopathic treatment. By the wife of a homœopathic physician. Published and for sale by William Radde, 322 Broadway, New-York.

This little volume has been compiled from the German by the wife of an American homœopathic physician; a number of American dishes have been added to the original. It will be seen from this volume that, although the homœopathic regime is very strict, yet it admits of the use of a variety of things sufficient to satisfy the most fastidious and refined palate. Any of the dishes contained in this volume may be used unhesitatingly by any person under homœopathic treatment, except by those who suffer with gastric diseases; all such persons have a number of things which do not agree with them; and all such things have to be avoided under any treatment. Moreover, this little volume does not supersede the necessity of a rigorous diet in acute diseases, or in convalescence from such diseases. It is chiefly designed for those well persons who wish to enjoy good living without violating the rules of homœopathic fare; or for those chronic patients whose digestive powers are not morbidly affected.

A Concise View of the System of Homœopathy, and Refutation of the Objections commonly brought forward against it. Dublin: J. Fannin & Co. For sale by William Radde, 322 Broadway, New-York.

This is a well-written volume, containing a clear and concise exposé of the principles and practice of homœopathy, and showing the incomparable superiority of the latter practice over allœopathy, by varied and sound criticism, and numerous statistical statements, and parallel tables of cases and deaths, derived from official sources.

CORRECTIONS: Vol. V, No. 2, page 79, fifth line from top, read "anterior," instead of "interior;" page 80, after twelfth line from bottom, add "with Ipecac. and Sulphur as intermediate remdies."

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ON THE VALUE OF AUSCULTATION AND PERCUSSION IN DISEASES OF THE HEART (ENDOCARDITIS RHEUMATICA).

BY DR. CL. MUELLER.

Translated, with Notes, by J. C. Peters, M. D.

PART III.

[Continued from Examiner, Vol. V., No. 2.]

DIGITALIS.

It causes in the *healthy* subject: Slight pain, aching and heaviness about the heart; increased activity of the heart, with slowness of the pulse; increased throbbing of the heart; palpitations which arouse one from sleep; palpitation, and commotion of the blood, with great anxiety, forcing one to get out of bed, with quickness of the pulse, congestion to the head, noises and roaring in the ears; diminished action of the heart; scarcely perceptible beating of the heart; very soft and weak beating of the heart; evident throbbing in the right side of the chest.

Pathological Anatomy: Several blackish and quite voluminous coagula in the right ventricle; bright-red and fluid blood in the left ventricle [in a vast majority of instances no blood is found in the left side of the heart after death,—the powerful muscular development of the left ventricle almost always seems sufficient to empty that cavity, even at the last throb which marks the cessation of life; hence whenever blood is found there after death, it denotes an unusual degree of relaxation, debility and utter exhaustion of the muscular structure of the heart], fluid, dark-red blood in the heart; extinguishing of the irritability of the heart.

[Digitaline, i. e., the active principle of Digitalis, according to Bonchardat and Landras, in doses of one-tenth of a grain, singularly modifies the circulation, and is capable of irritating the digestive organs in a high degree; all the patients to whom it was administered experienced a marked slowness of the pulse, the greatest depression taking place in general, some hours after the exhibition of the drug; in several instances it was diminished in frequency to the extent of nearly one-half of the normal condition, very often only one-third or one-fourth;

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the next morning it became rather more frequent, but always remained from ten to more beats below the normal pulse. In all these cases the pulse was also irregular, the irregularity being of two kinds—the first and most remarkable irregularity was that the intervals between the pulsations were unequal; sometimes the pulse would be hard and very quick, then hard and slow; at others it would be soft at times, then hard; again it would remain soft persistently. Some patients would experience light-headedness, annoying dreams and hallucinations, soon followed by more or less frequently repeated diarrhœa or bilious vomiting, which in spite of all precautions sometimes lasted two or three days; the appetite was lost at the same time; whenever it induced irritation of the digestive organs, the pulse again becomes frequent.]

[The marked depressant action of Digitalis on the heart, renders it homœopathic to dilatation, with thinning of that organ, which state, according to Hope, depends upon direct debility, or deficient power. In this affection the palpitations are of a feeble, oppressed kind, and more or less distressing, frequent and prolonged, according to the extent of the dilatation; in general they are protracted; the pulse is soft and feeble, and if the debility of the heart be great, the pulse is small; irregularity and intermittence are common during the protracted and distressing paroxysms of palpitation and dyspnœa; when the dilatation is attended with softening of the substance of the heart, the pulse is apt to be as small, weak, intermittent, irregular and unequal, as in the worst cases of disease of the mitral valve; œdema of the limbs is very common in this variety; also lividity of the face, lips, etc.; one of the most constant and characteristic of the equivocal signs of dilatation of the right side of the heart, is, permanent turgescence of the external jugular veins, without sensible pulsation. Among the physical signs of dilatation is a change in the character of the first sound of the heart; this, which is naturally dull and indistinct, becomes louder, shorter and clearer, so as to resemble the clear, distinct clacking of the normal second sound; the degree of the dilatation can be judged of by observing how far the first sound resembles the second; the greater the shortness and clearness of the first sound, the thinner will the walls of the heart be found. The dullness on percussion is increased, and is found lower down than natural; dullness over the inferior part of the sternum denotes dilatation of the right ventricle in particular. Although the heart be enlarged, the impulse is diminished, and in extreme cases absent, even during palpitation; when felt, it is only a brief percussion of the chest, not elevating the

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hand or ear of the examiner; sometimes several beats of the heart are heard, while one only is felt (Hope). There is old school authority for the use of Digitalis in this disease; Dr. Holland says: "The enlarged and flaccid heart, though on first view it might seem the least favorable for the use of this medicine, is perhaps not so; at least I [Holland] have reason to believe, that, in the dropsical affections so often connected with this state of the heart, the action of Digitalis is peculiarly of avail." (See Med. Notes, etc., p. 574.) Old school physicians also say that it helps in intermittent and otherwise irregular pulse; Pereira says: "In patients affected with an intermittent and otherwise irregular pulse, I [Pereira] have several times observed this medicine produce regularity of pulsation;" a circumstance also noticed by Dr. Holland. Dilatation of the heart is a treacherous disease to those who auscultate and percuss carelessly, as well as to the mere symptomatologist; for the heart may be two and a half times its natural size, and yet the impulse be by no means remarkably strong; and when the heart is much loaded and oppressed with blood, the sound of the valves, and even of valvular murmurs may become so faint that they cannot be heard, without the patient holds his breath. In a previous article we have referred to the homœopathicity of Digitalis to diseases of the mitral valve.]

SPIGELIA.

It causes: Oppression of the chest and palpitations; dull stitches occurring synchronously with the pulse, and felt where the apex of the heart strikes the chest; violent and audible beating of the heart, which may also be felt through the clothes, attended with anxious oppression of the chest, especially in the morning, soon after rising, also while sitting down; wave-like motion of the heart; want of harmony between the heart and pulse-beats; purring sound in the chest, especially in the cardiac region, resembling the purring of cats.

Spigelia has been recommended in inflammations and organic diseases of the heart, but we have as yet no pathologico-anatomical proof that it is really homœopathic to these affections. [It may prove homœopathic to pericardial chorea; Eberlee says that it causes spasmodic twitching of the face, alternate fits of laughing and crying, incessant inclination to run and skip about; Pereira says it often causes spasms of the facial muscles and even general convulsions; but spasmodic movements of the eyelids have been observed among the most

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common attendants of its narcotic action. It is not generally known that chorea may depend upon and mask acute pericarditis; Dr. Bright has seen cases in which there were peculiar spasmodic symptoms, like most fully developed severe chorea, except the convulsion was more violent than is almost ever seen in chorea; the head being thrown from one side of the bed to the other; the lips closed and opened with a smacking sound; the tongue protruded with all the grimace and difficulty as in chorea, and yet the only appearances found after death were recent and profuse effusion of lymph on the heart and pericardium, and recent vegetations of the semilunar and mitral valves. Spigelia may prove homœopathic and curative to this singular form of disease; cantharides also produce chorea, and may light up inflammation in almost any organ.]

Physical signs: Spigelia may be indicated when the percussion-sound is normal over the heart, or dull over a very large surface; the impulse of the heart increased, evidently and visibly elevating the walls of the chest at each beat; want of harmony between the heart and pulse-beats; [apex of the heart beating nearer the nipple than usual, or even outside of it;] valvular murmurs at various parts of the heart, as well with the systole as the diastole, or with both [friction or to and fro sound of pericarditis].

NUX VOMICA.

It causes: Palpitation in frequent short paroxysms, with commotion of the blood; pulsating throbs in the direction of the heart; great anxiety with severe palpitation.

In the numerous and careful post-mortem examinations which have been made in cases of poisoning with Nux, no organic alterations about the heart have been found; its influence upon the heart must be referred to the nervous system. It causes increased activity and evident irritation of the ganglionic system, which may be propagated to the mind and senses; hence the above-mentioned heart-symptoms may arise in conquence of sympathy with the ganglionic and mental affections. For this reason Hahnemann laid so much stress upon the mental symptoms excited by Nux, and mentioned the presence of vexability over sensitiveness to all impressions, hypochondriacal humor, passionate irritability and sudden choler, great anxiousness, starting in affright, fearful anxious dreams, &c., &c., as strong indications for the use of Nux vomica. Hence Nux cannot prove homœopathic to endocarditis, or any other

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heart-affection dependent upon any organic or material change of structure. From the above it becomes evident that even the negative results of physical examinations are of importance in the selection of a remedy.

[We take a different view of the action of **Nux**; it acts predominantly and specifically upon the motion-side of the spinal marrow and the muscular system in general, and tends more particularly to cause tetanic spasms. As the heart is a very muscular organ, it is very probable that it exerts a similar action upon it; in fact, the spasm of the heart may become so complete and persistent, that this organ remains tightly contracted for some time, during which little or no impulse is felt, the respiration being difficult and the pulse extinct; if the spasm of the heart be less complete and tonic, i. e., more clonic, then violent palpitation may ensue, but Nux constantly tends to produce long-continued spasmodic contraction of the heart; according to Sobernheim it often causes an asphyctic condition, dependent upon an extremely violent spasmodic contraction of the respiratory muscles and heart. Every one familiar with diseases of the heart, must be familiar with this state of things; a patient with organic disease of the heart will be suddenly taken with what he calls spasms; he sits in speechless agony, his hands clasped over the cardiac region, his eyes protruded, his face livid, &c.; the physician attempts to feel the pulse, and can scarcely find it, he places his hand or ear over the heart, and finds every thing as still and motionless as death itself; after a while the spasm relaxes; more or less palpitation follows, and the patient recovers for a time. Such attacks are often mistaken for paralysis, exhaustion, or debility of the heart, and treated with stimulants. Hence it will be seen that the action of Nux is exactly the opposite of that of Digitalis upon the heart; if the latter be homœopathic to dilatation with attenuation, the former will be so to contraction with thickening, i. e., to concentric hypertrophy, if any such disease exist. Iron, Bark, Nux vomica, Ignatia, &c., must prove the most homœopathic remedies to simple hypertrophy, i. e., where the walls of the heart are thickened, the cavity retaining its natural dimensions; also in that variety of hypertrophy in which the walls are considerably thickened and the cavity dilated; and in hypertrophy with contraction, in which the walls are thickened and the cavity diminished in size.]

PULSATILLA.

It causes: Stitches and anxious aching in the cardiac region, with difficulty of breathing, relieved by walking; heavi-

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ness, aching and burning about the heart; palpitation after slight mental emotions, from speaking, and after eating; palpitation with anxiety, forcing one to throw off his clothes; palpitation in violent paroxysms, with darkness before the eyes, want of breath, especially while lying on the left side.

Hahnemann has taught us that Pulsatilla is especially suitable for the female organism, for the sluggish, phlegmatic temperament, for gentle, quiet, and lachrymose individuals. If we seek for a reason for this, we will find it in a consideration of the general action and sphere of Pulsatilla; in its specific relation to the digestive process, it exerts a marked influence upon the formation of blood, and upon the venous circulation; every alteration of the chyme and chilification must produce changes in the blood; excessive exaggeration of the digestive process must produce increased formation of lymph and blood, and predominant venosity [?]. As women, in virtue of their sexual formation, require and use a greater quantity of blood, they are more subject to venous derangement, and hence Pulsatilla is particularly applicable to the female organism. Among the venous symptoms produced by Pulsatilla are: swelling of the hæmorrhoidal tumors, enlargement of the cutaneous veins, bleeding from the nose, cough with expectoration of pieces of black coagulated blood; redness of the conjunctiva; the presence of chills, constant internal coldness, predominant coldness of the body, all point to a marked predominance of venosity over arteriality; as a consequence of overfilling of the large veins of the chest, and of the right side of the heart, we find anxiety, great agony with palpitation of the heart, agony in the cardiac, or præcordial region, driving one to suicide; trembling anxiety, as if death were about to ensue, with fleeting heat of the body, coldness of the hands, paleness of the face, inclination to weep, &c.

At the bedside it has been found useful in passive congestion, with distention of the veins, and in tedious heart-affections; it acts principally upon the venous, i. e., the right side of the heart, and hence is rarely useful in the inflammatory stage of endocarditis; but when insufficiency of the mitral valve has occurred, causing, as it almost always does, hypertrophy with dilatation of the right side of the heart, and consequent excessive accumulation and activity of the venous blood in the heart and chest, then Pulsatilla comes in play.

Physical signs: Percussion sound over a large extent of surface, especially in a horizontal direction; the impulse of the heart either increased or normal; the sounds of the heart increased over the right ventricle, or a bellows murmur in the

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same place; the second sound of the pulmonary artery distinctly louder than the second sound of the aorta; normal sounds of the heart over the left ventricle, or a murmur with the systole; the jugular veins distended, and pulsating evidently [one of the most certain signs of enlargement of the right ventricle].

[To be concluded in the next number.]

A CASE OF NEURALGIA OF THE BRAIN FROM EXOSTOSIS OF THE CRANIUM, CURED BY REMOVING A PORTION OF THE BONE.

We extract the following interesting report of the application of the trephine for a neuralgic affection of the cranium, from the Boston Medical and Surgical Journal. The operator in this case was E. H. Dixon, M. D., of New-York. Exostosis of the cranium may produce that kind of epilepsy which Schoenlein terms *epilepsia cephalica*. Schoenlein's remarks on this form of epilepsy may be found in the fourth volume of his work on Pathology and Therapeutics, page 134.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—In the first No. of the New-York Journal of Medicine and Surgery, of July, 1838, there is a case published by myself, detailing the facts connected with the removal of part of the tenth rib, for a neuralgic affection of the intercostal nerve, consequent on a violent contusion of the bone. It is unnecessary to detail the nature of the accident or the steps of that operation. There was at the time an entire dissent to it of all the gentlemen who were consulted in the case, and it was only performed at the urgent solicitation of the patient, who had tried every imaginable means for relief, including tonics, cupping, blistering, &c. &c., suggested by our best surgeons, including those of the New-York Hospital. She was declining rapidly from constant loss of sleep, and innervation produced by the excessive use of morphine. The operation was completely successful, the pleura remaining uninjured; it produced instant relief, and the patient (a female) rapidly recovered her health and spirits, gaining twenty-three pounds of flesh within two months after the operation. She is now perfectly well, though it was performed eight years since. This case is well known to many gentlemen in this city—Dr. S. P.

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White and several others being present. The diagnosis is important, and as its evident verification by the result influenced me in the performance of the operation I am about to detail, I will briefly state it. The rib, as it proved upon examination of the piece removed, had not been fractured, though a small bony projection of the size of about half a pigeon's egg, as it appeared under the skin, it was supposed indicated either a fracture, enlargement of the bone, or a periosteal growth. This was not important, however, to the diagnosis; which was, "pressure upon the intercostal nerve by the enlargement," producing the violent pain constantly experienced in the epigastric region; that portion of the abdomen being supplied with nerves from the parallel intercostals, and the fact being well known that pain extends from an irritated nerve to its distribution.

June 18th, 1846.—Mrs. Bishop, of Easton, Pa., the widow of a deceased clergyman of that place, a lady of 50 years, and of a highly intellectual character and remarkable self-possession, about seventeen years since received a blow from the falling of a window-sash upon the upper and posterior angle of the left parietal bone. There was neither a wound nor suppuration consequent upon the injury, and it excited no further attention after the application of some simples to the bruised part, until a few weeks afterwards, when it became the seat of the most exquisite and constant pain. This observed no regularity in its accessions; it steadily increased, until it became so intolerable that she was obliged to resort to morphine, and eventually to sulphuric ether, both of which articles she eventually used in enormous quantities, though greatly opposed to all stimuli from previous education and habits of thought. Even when under their influence her mind was clear and unclouded; and she had occupied the long period of her affliction with the religious and polite literature of the day. Some idea may be formed of her state of mind, by the information that she was well acquainted with the manner of the operation and the diagnosis of her disease, at the period of my visit. Mrs. B. had requested my opinion some two years since; at that time there were no symptoms of epilepsy, however slight; neither had there been at any time the least loss of consciousness or disposition to fall. I proposed at that time a circular incision to the bone; and if that did not benefit, a caustic issue over the part. The operation of trephining was proposed as a last resort. This was not done. About a year before my last visit, Dr. Gross, of Louisville, an intimate friend of hers, and the accomplished author of the Pathological Anatomy, exam-

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ined her case whilst on a visit to Easton, and under the desperate circumstances acceded to her desire to submit to the trephine. She requested me to perform it, and I visited her for that purpose on the 18th of June last.

At this period there was occasionally slight loss of consciousness for a few moments, particularly when the circulation was hurried; still no symptoms of epilepsy. This symptom influenced me to perform the operation. The amount of morphine and ether consumed within the previous six months was almost incredible. The testimony of her son (the purchaser) and Dr. Sloan, of Easton, will authenticate the statement, which is indeed highly important in a medical point of view. The amount, as stated to me, was "from one to two drachms of morphine per week, and one hundred and twenty-six pounds of ether during the six months!" This enormous quantity, so perfectly accustomed to it had the system become, did not even exhilarate the patient, or for one moment cause her to lose her equilibrium. Her deportment was characterized by the utmost quiet, and that perfect calmness and self-possession characteristic of the well-bred woman. Even during the operation, when she had taken an unusual quantity, her conduct was quiet and natural. There was nothing peculiar or difficult in the operation; it was performed in the presence of Dr. Cooper, Dr. Sloan (the attending physician), and Dr. Inness, all of Easton. The patient placed her finger upon the spot; and after being engaged in conversation, was again requested to indicate it. She invariably recurred to the same spot. This precaution was necessary, for we had no other guide; not even the slightest elevation or eschar marked the seat of the injury. On removing the bone, the cause of the affection came to light; there was a considerable exostosis on the inner side, amounting to rather more than an eighth of an inch from the plane of the inner surface of the cranium. This, notwithstanding its comparative smallness, had been the growth of seventeen years. Immediately upon raising the bone, the patient's brow became elevated, and she declared "she felt free and had more room." All the unpleasant symptoms have vanished, and the patient is gradually discontinuing her morphine, which, although she has not the least vestige of pain, could not wisely be at once discontinued. She does not now take one-quarter the former quantity.

I hope the following remarks, appended to the case first stated, will not be thought irrelevant; they may serve to explain the motive for the performance of an analogous operation, which, but for the result, might have been thought imprudent.

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I conceive them to apply equally to this case; your readers will decide. "Should this operation be thought unwarrantable, I can only say I know of no other means of relief, and that the patient importuned me for months to perform it, after having been told by many surgeons of eminence, as well as by myself in their presence, that it might prove fatal. She uniformly answered that death was preferable to the life she endured. It is highly important that the extent and danger of operations that may conscientiously be performed for neuralgia should be determined, as the strongest constitution will in time yield to its undermining influence." E. H. DIXON.

New-York, August, 1846.

Doctor Pulte, of Cincinnati, has told us that he has cured three cases of epilepsia cephalica arising from exostosis of the cranium, by *the phosphate of lime*, third trituration.

TREATMENT WITH A VENGEANCE.

The last number of the Boston Medical and Surgical Journal contains a remarkable case of poisoning by Fahenstock's Vermifuge, described as a case of apoplexy with fatal termination, and treated by Francis Badgley, M. D., lecturer on the principles and practice of Medicine in the incorporated School of Medicine and Surgery of Montreal. The child, a girl of ten years, had swallowed two bottles of the vermifuge in divided portions daily, for four days; she had been kept from animal food, and had taken no other medicines. The symptoms of the poisoning were great pain in the stomach, followed by coma, dilatation of the pupils, occasional slight convulsive movements of the fingers; occasional borborygmus; constipation; weak and fluctuating pulse, 120. The doctor commenced the treatment with ordering fresh sinapisms to the feet and legs, and a long one from the nape of the neck to the last dorsal vertebra; hot fomentations to the chest and over the epigastrium, and bottles of hot water between her knees; burnt brandy was administered every ten minutes by the mouth, and an enema of castor-oil and spt. turpentine was thrown into the intestines. After all this devastation had been accomplished, Doctor Crawford was called in in consultation. In addition to the counter-irritation already made, a mustard-poultice was applied to the epigastrium, and a mixture of spts. æther sulph. and spts. ammon. aromat. given internally, alternately with the brandy. The enema was repeated. A dozen leeches were

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now applied to the temples, pounded ice to the top of the head, a blister to the nape of the neck, five drops of croton-oil diffused over the tongue and fauces, and another enema thrown up into the intestines. After this, ice-cold water was poured upon the head from a height of four feet. The result of all this was that the child died.

Among the inferences which the Doctor deduces from the above case, are the following:—

1. That this preparation, *of the nature of which so little is known*, must be ranked among the class of narcotico-acrid poisons, etc.

2. That oleaginous purgatives should be combined with it, etc.

3. That its effects from accumulation must be guarded against in the same manner as those of digitalis, etc.

We have mentioned this case as a proof that arcana and nostra are *recommended* and *employed* by established professors of allœopathic colleges. And these are the men who charge homœopathists with quackery!

ON THE USE OF CANTHARIDES IN PNEUMONIA.

BY JOHN C. PETERS, M. D.

In the last number of Braithwaite's Retrospect we find an article by Dr. Mendini, on the "Internal use of Cantharides in Pneumonia." See page 88. The author does not give this remedy as a certain specific in pneumonia, nor as applicable to all the varieties of the disease, nor as capable of taking the place of all other therapeutic agents. He observes that Cantharides only succeeds when the affection is of a decidedly inflammatory character, the constitution plethoric, and the general reaction well marked. In what particular way does Cantharides act in pneumonia? Dr. M. believes its action to be absolutely the same [?] with that of Tartar emetic; that is to say, it depresses and moderates the circulation. He does not hesitate to say that the power of Antimony in this respect is even less marked than that of Cantharides. "I have often," he says, "been obliged to suspend the use of Cantharides, owing to its depressing effects proving too powerful;" at times, indeed, he has been obliged to combat this effect by means of stimuli, but he has rarely been obliged to have recourse to

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similar precautions when using Tartar emetic. Dr. M. has now tried Cantharides in seventy cases of pneumonia—an infusion of twelve to eighteen grains in half a pound of water was taken at intervals in the course of twenty-four hours; in not one of the cases did the peculiar effect of this drug on the urinary organs prevent the continuance of the remedy; pain and heat in the genitals ceased in forty-eight hours, while the priapism never lasted over four days!

The treatment of pneumonia by Cantharides is entirely homœopathic, perhaps more so than the treatment by Aconite, or any other drug. So homœopathic and startling is this treatment to the editor of the Retrospect, that he exclaims: "However great may be the confidence, which both the name of the author and the utter want of any thing exaggerative in his statements inspire us with, we very much doubt if many practitioners will follow in his steps."

According to Hartlaub and Trinks, Cantharides causes violent burning inflammatory fever, nightly heat, sometimes burning, not felt by the prover, also heat in the whole body, with accelerated pulse, heat with thirst, general redness and delirious talk about business, etc. The pulse is accelerated, full, or *hard and full, as in inflammatory fever;* also full and slow; also small, hard and intermittent, or strong; frequent, hard, or quick; slow (only 55), feeble, vanishing.

The chest symptoms of Cantharides point to this remedy as one which may be useful in pleuro-pneumonia, for, according to Hartlaub and Trinks, it produces stitches and dartings in the chest, sometimes during an inspiration, in one or the other half or side of the chest; in the right side of the chest, after midnight, during every inspiration; especially in the left side, at night, during an inspiration, not permitting one to lie on that side, or when turning the body quickly, or when breathing quickly, with arrest of breathing; feeling of dryness in the chest; heat and dryness in the chest; stitches and dartings in the external region of the left and right true and false ribs, great sensitiveness of the chest to the touch, etc.

AMMONIUM CARBONICUM.

BY JOHN C. PETERS, M. D.

1. VOIBMER found one and a half grains to produce no particular effect upon himself; three grains increased the pulse

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from 68 to 72, with throbbing headache; six to twelve grains usually but not constantly caused increased frequency of pulse, with disorder of brain, manifested by pain, heaviness, throbbing, &c.; in one instance, the disposition to cough, with increased secretion of bronchial mucus, was extraordinary.

Pereira gave fifteen grains three times a day for two months, with no other effect than suspending epileptic fits during this time. This is singular experience for an old school physician, and especially for Pereira, who states on another page of his Materia Medica, that in almost all cases of poisoning with Ammonia, or its carbonate, convulsions are observed, apparently showing that it acts specifically upon the spinal marrow, and Pereira even assumes that the *gray* substance is especially affected. Seybert found that when injected into the veins of dogs it caused convulsions; Orfila, that when two and a half drachms were given to dogs, it caused gastritis with tetanic convulsions, the body ultimately becoming curved, with the head bent backwards, as in opisthotonos. Yet Pereira repeats that this substance has been supposed to possess a specific influence in relieving those disorders of the nervous system accompanied with spasmodic or convulsive movements. This looks like homœopathy, especially as it is regarded as antipathic to fainting fits, muscular weakness after acute diseases, &c. Noack proposes it as homœopathic to eclampsia, convulsions and tetanus, and says it causes convulsive trembling of the whole body, occurring in paroxysms; general frightful convulsions, and forcible contractions of the muscles of the face and trunk, but especially of the abdomen and limbs—opisthotonos.

2. AMMONIA-SCURVY.

Huxham has detailed a remarkable case illustrative of the evil effects resulting from the long-continued use of this drug. A gentleman had so habituated himself to the use of vast quantities of Ammonia, that at length he could eat it in a very astonishing manner, as other people eat sugar or carraway seeds. In consequence he brought on hectic fever; vast hæmorrhagies from the intestines, nose, and gums; every one of his teeth dropped out, and he could eat nothing solid; he wasted vastly in flesh, and his muscles became as soft and flabby as those of a new born infant; pustules broke out all over his body; his urine was always excessively high-colored, turbid and very fetid, perhaps *alkaline;* he died in the extremest degree of marasmus. The above state approaches most

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nearly to that of scurvy, in which, according to Magendie, hæmorrhages occur on account of a dissolute and deficient state of the fibrin of the blood; and this dissolved state of the fibrin is said to be owing to an excess of alkaline matter in the blood. James found the serum of scorbutic blood to exhibit a marked alkaline reaction; Denis and Henderson also found an excess of alkali; Fremy also found marked alkalinity of the blood in scurvy, and ascribes the non-coagulation of such blood to the large quantity of free alkali contained in it. In fact, all the alkalies tend to produce scurvy and Carb. Ammonia among the rest. A knowledge of this has led in the old school to the use of lemon juice, potatoes, vegetables and fruits containing citric, tartaric, or malic acids. Which is the most successful, the acid or the alkaline treatment of scurvy?

3. *Vogt's* resumé of the action of Carb. Ammonia is as follows [*see Mat. Med.*]: It causes more active transformation of tissues and *liquefaction* in the vegetative organs, viz., increased secretion from the skin, more ready loosening of bronchial mucus, more profuse secretion of urine with simultaneously increased absorption of lymphatic fluids from internal parts, increased and more hasty flow of the menses, increased flow of bile, &c. The most marked of all these actions is upon the skin, hence ammoniacal remedies have from time immemorial been regarded as excellent diaphoretics; but they are all secondary to its action upon the lymphatic, glandular, and vascular systems, whence follow its fluidizing, absorption-hastening and resolvent effects. If pushed too far, it causes heat and congestions, while its expanding, fluidizing, and liquefacient action becomes still more evident, for excessive and profuse perspiration set in, greater secretion of mucus and more profuse flow of urine. This liquefacient action may become so excessive as to overbalance the formative power, and cause a tendency to general solution and decomposition; we see evidence of this not only in the profuse secretions which it causes, but in the undermining of all the assimilative processes, viz., in the destruction of the digestion, in the solution of the chyle and blood, the want of contractile power in the fibrous system, the diminution of organic cohesion in all parts of the body, in short, by the occurrence of a *scorbutic* state! Such are the ultimate effects of Carb. Ammonia, owing doubtless in great measure to its alkalinity.

4. As an alkali it is used in old school palliative practice against acidity of the stomach; Wood and Bache say it is one of the best remedies in heart-burn, and for the relief of sick headache, when attended with acidity of the stomach: *Paris*

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states that it is more powerfully anti-acid than the fixed alkalies.

5. Its next degree of action has been termed its stimulating, exciting, heating, or calefacient, marked by a sensation of warmth in the mouth, throat, and epigastrium, frequently attended with eructations; by a temporary excitement of the pulse, with heat of the skin, which, however, quickly subsides; by increased capability of muscular exertion, while the nervous functions are executed with greater facility. These effects have led to its old school use, as a simple means of support in typhus fever and analogous affections; Wood and Bache state, that as a stimulant, it is exhibited principally in typhus fever; its principal advantage being its power to increase the action of the heart and arteries, without unduly exciting the brain. Paris says, in typhus fever it has been particularly recommended by Huxham and Pringle, while some physicians consider it superior to any other so-called stimulant on these occasions. Sobernheim advises it in typhus with predominant affection of the chest, paralytic weakness and laxity of the skin. Peter Frank advised it especially in febris nervosa stupida, when attended with a trembling, unequal, and intermitting pulse. But Carb. Ammonia does not add real strength and substance to the body, like animal food, wine and iron; a remedy which tends to produce scurvy cannot be the best nor the most antipathic remedy to typhus; *Sachs* thinks it tends to produce increased venosity, excessive liquefaction and decomposition, with tendency to atony and colliquation; all of which are also present in typhus; if this be so, then however useful single doses may be in an emergency, the long continued use of it in large doses cannot but prove hurtful; in fact this drug is too homœopathic to typhus fever to permit its being thus used.

6. AMMONIA-DIAPHORESIS.

The next in order of its more visible effects, is the occurrence of perspiration. Even while the heat of the skin is increased under the influence of Ammonia, there is a tendency to sweating, which if promoted by the use of diluents and warm clothing, frequently terminates in copious perspiration. Dierbach says it excites the vascular system, promotes perspiration, and even excites profuse sweat. In old school practice this effect has been taken advantage of in the treatment of scrofula, when the circulation is languid and the skin dry: Also in chronic rheumatism, in which it is regarded by some as the very best remedy. In suppressed eruptions.

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Singularly enough, although it is a diaphoretic, some old school physicians have advised it against the collquiative sweats which occur in the last stage of phthisis. Perhaps they defend this practice in the same way that Harnish defends the use of Opium in the perspirations of consumptive typhus, or putrid fever patients; he assumes that the perspiration in these cases depends in a considerable degree on debility of the skin, while Opium increases the force, strength and tone of the cutaneous vessels, and thus diminishes atonic sweats, although it causes active perspiration. However this may be, he states as the result of his own experience, that half a grain of Opium, with one grain of Camphor, will often check the profuse sweats of consumptive patients, when Sugar of Lead, mineral acids, and Alum have been used in vain.

7. AMMONIA-CATARRH.

The next most prominent local result of its general liquefacient action, is the production and more ready expectoration of bronchial mucus. Wood and Bache, however, think it is only under certain circumstances that it may prove expectorant, as when in the last stages of phthisis it facilitates the excretion of the sputa, simply by increasing the muscular power of the patient. According to Noack and Trinks, it is homœopathic to œzena, flowing catarrh and coryza, for it causes obstruction of the nose, which forces one to breathe through the mouth, and even awakes one from sleep; frequent forcible sneezing, violent catarrh, with obstruction of the nose, and unclearness of the voice; violent flowing catarrh, with rending pains in the cheeks, constant watery discharge from the nose, which excites burning pain in and excoriation of the upper lip; catarrh with deafness, and burning in the region of the stomach. In the old school it is advised in the last stage of hooping cough; in chronic pulmonary catarrhs; in pneumonia after the inflammation has subsided, or been subdued; in angina pectoris; in spasmodic asthma; in the teazing cough of phthisical patients; in erethistic chest affections, and in pulmonary consumption. The most of these recommendations are correct according to the antipathic law, for Carb. Ammon. is an acrid and heating remedy, and most of the above affections are of a chronic, sluggish, torpid nature. Noack singularly enough says that it acts quite specifically upon the lungs, and hence (?) is especially useful in chronic (!) affections of the same. We think it is more homœopathic to acute pulmonary affections. Noack proposes it as homœopathic to chronic ca-

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tarrh of the air-passages; bronchitis maligna; pneumonia notha; pneumonia hypostatica; teazing dry cough of phthisical patients; erethistic affections of the chest, and in phthisis. It causes: Roughness, hoarseness, soreness, scratching and scraping in the throat; increased accumulation of mucus in the throat; great rattling of mucus in the bronchi; cough with heat in the head and oppression of the chest; irritation in the larynx to cough; short, suppressed cough, with oppression of the chest; incessant dry cough, as if produced by feather-dust in the throat; nocturnal cough; extremely violent cough, as if proceeding from the deepest parts of the chest; excessive exhaustion after coughing in bed; cough, with mucous or mucosanguineous expectoration; coughing up of blood, with sense of burning and heaviness in the chest; shortness of breath, redness and heat of the face, nausea, anxiety and trembling of the whole body, &c. Certainly all these effects point to acute states of irritation of the chest, rather than to sluggish and torpid ones.

8. AMMONIA-DIURESIS.

All authorities agree that it causes a more abundant flow of urine; notwithstanding this, an old school English physician, Dr. Barlow, has recently recommended it in diabetes, several cases of which he has reported as relieved, if not cured by it; Pereira, however, states that in his hands it has failed even to afford relief, after a prolonged trial. Noack advises it as homœopathic to atony of the urinary organs; diabetes, especially in the insipid variety, occurring in hysterical persons. In mictus cruentus. It causes: frequent and increased flow of urine, especially in the evening, and through the night; nocturnal bed-wetting; turbid, or reddish urine, resembling water mixed with blood. It should not be forgotten that Ammonia is always found in the urine of man, but in combination with phosphoric, hydro-chloric, or uric acids. In injuries of the spinal marrow the urine often becomes alkaline, and ammoniacal, perhaps from the urine becoming putrid within the bladder; at least Ammonia may be obtained from putrid urine without the bladder, and the power possessed by the bladder, of preserving its contents unchanged, is indisputably dependent upon the integrity of the spinal nerves, and branches from the organic system supplying it. If, therefore, any injury, even of an indirect character, be inflicted upon these nerves, the result must of necessity be a diminution of the vital power of the organ, and the fluid it contains will become susceptible of

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changes analogous to those which occur in it when removed from the body. One of these changes is the union of the urea with the elements of water, and the formation of Carbonate of Ammonia. The urine thus rendered ammoniacal, acts as an irritant on the mucous membrane of the bladder, exciting a form of inflammatory action, and the result of this is the secretion of a large quantity of mucus of a more viscid character than usual. By persistence of the irritation, puriform mucus is at length poured out, and this, from the chemical influence of the Carbonate of Ammonia, becomes changed into a viscid, almost gelatinous mass, which greatly adds to the patient's sufferings, by preventing the ready escape of the urine, even when the contractile power of the bladder is not quite paralyzed. It must not be forgotten that the urine in these cases has its normal acidity when first secreted from the kidneys, and only becomes alkaline and ammoniacal after it has reached the bladder. (GOLDING BIRD.)

9. The next, and profoundest effect of its liquefacient action is the occurrence of hæmorrhages. Before these occur from a dissolved state of the fibrin and blood, i. e. from an ammoniacal-scorbutic state, they may arise from simple irritation and congestion, and then will be of an *active* rather than a passive character. *Noack* advises it as homœopathic to malæna; morbus maculosus hæmorrhagicus Werlhofii; in vomiting of blood; in flowing hæmorrhoids; hæmoptysis; apoplexy of the lungs; menorrhagia, etc.

It causes: A sensation of congestion to the end of the nose; blowing out of blood from the nose; bleeding from the nose, especially after eating.

There is no proof that it induces vomiting of blood at all, much less specifically.

It causes great swelling, protrusion and painfulness of the piles; discharge of blood from the rectum, both during and after stool.

Also cough, with mucous or muco-sanguineous expectoration; coughing up of blood, attended with burning and heaviness in the chest, shortness of breath, redness and heat of the face, nausea, anxiety and trembling of the whole body.

As for its homœopathicity to apoplexy of the lungs, it causes heaviness of the chest, as if an hundred weight were pressing upon it, caused by an accumulation of blood within the chest.

It also causes: Too early and too profuse menstruation, with discharge of entire pieces of black, acrid blood (metrorrhagia), attended with spasmodic or rending pains in the abdomen; *preceding* the flow of the menses, there is continual

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heat and anxiety, violent contracting and pinching abdominal pains, with nausea, waterbrash, chills and fainting fits; *during* menstruation, there are alternating heats and chills, sensitiveness to cold, rending in the forehead, confusion of the head, first redness then paleness of the cheeks, disgust for food, thirst, aching in the stomach, sense of fulness and trembling in the stomach, violent nasal catarrh, aching in the chest, piercing pain in the left side of the chest, sleeplessness, etc., all followed by a watery, acrid, burning leucorrhœa.

10. This is perhaps the most proper place to refer to Noack's recommendation of Carb. Ammonia as homœopathic to chlorosis. We have just seen that it is distinctly homœopathic to scorbutus, and hence its effects cannot precisely resemble the phenomena of chlorosis, although there may be a partial resemblance between them. In chlorosis there is generally a suppression of the menses; Carb. Ammonia tends to produce more profuse menstruation. Hæmorrhages are not apt to occur in chlorosis, while they form one of the most prominent features of scurvy. In chlorosis the quantity of the fibrin of the blood is not much diminished, but the number of the blood-globules is very much decreased; hence, according to Andral and Gavaret, no hæmorrhages occur; in scurvy the fibrin is very much diminished, nearly two-thirds, while the blood globules are as numerous as in health; hence hæmorrhages occur; again, scorbutic blood is thinly fluid, coagulates imperfectly, and has a dark, often blackish blood, while chlorotic blood is light colored, thin, and watery. In scurvy we have seen that the serum of the blood is alkaline, while in chlorosis there is great tendency to acidity in the stomach and bowels, and according to Rœsch, even in the blood. It is most homœopathic to the first stage of chlorosis in previously blooming maidens, subject to congestions, flushes of heat rapidly alternating with paleness, headache, vertigo, palpitation of the heart, quick pulse, spasms, hysterical attacks, etc.; in these cases the blooming aspect may still be retained for some time after the quantity of blood-globules has diminished in a marked degree, and the chlorosis consequently has already made progress.

11. Here we are almost forced to allude to Noack's assertion that Carb. Ammon. is most suitable and homœopathic to persons of an adynamic, weakly, nervous, venous or lymphatic constitution, and those of a torpid, phlegmatic and melancholic temperament, and for those who lead a sedentary life. At first view this looks like rank allœopathy, for the primitive effects of Ammonia are those of a diffusible stimulant and irritant;

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Noack involuntarily admits this when he continues that it is also most suitable for the female organism, where there is ready excitability, with little energy and steadiness of reaction, with delicacy and relaxation of the fibrous tissues, and predisposition to nervous affections. Ammonia first excites, then breaks up and dissolves, producing an alkaline and scorbutic dyscrasia, and finally destroys by colliquation; it is one of the last remedies to produce accumulations of fat, etc. Hence Noack is right in the main, but has put the cart before the horse; he was just on the verge of stating one of the profoundest and broadest general applications of the homœopathic law; a remedy which simply produces gleet is not the most homœopathic remedy to a like affection remaining after an acute urethrorrhœa; the beau ideal of a homœopathic remedy would be a drug which produces the first as well as the latter condition.

ON THE DIFFICULTIES WHICH ARE ENCOUNTERED IN THE TREATMENT OF CHRONIC CUTANEOUS ERUPTIONS, WITH SUGGESTIONS RELATIVE TO THE REMOVAL OF THOSE DIFFICULTIES.

BY CL. MUELLER, M. D.

Translated by Charles J. Hempel, M. D.

CHRONIC cutaneous eruptions have constantly been a source of great annoyance not only to mankind generally, but particularly to physicians; the principle, "contraria contrariis curentur," did not seem to be suitable in the treatment of those affections; nor was the general classification of drugs into tonica, excitantia, emollientia, etc., of any avail. Physicians were therefore induced to resort to the so-called alterantia and anti-dyscrasica, id est. remedies which could not be classed under any of the above heads, but had nevertheless an intense action upon the organism. From among these latter drugs some were chosen probably from some vague notions about their curative action, as the most suitable to remove eruptions, which they did do occasionally, and thus maintained their

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character and use until the present time. This is the rudest kind of empiricism which has ever existed. In employing these remedies, no scientific reasons were ever adduced to justify their use; and yet professors were unwilling to term them "*specifics*," which meant according to their own simple definition, remedies, the action of which could neither be explained nor understood. How many professors may have found themselves most painfully embarrassed when they had to explain to their pupils why Borax was recommended for aphthæ, and Dulcamara or Jacea for herpes. In spite of learned disquisitions, a suspicion was excited that the drug had originally been derived from domestic practice, or that it had even found its way to the chair of the professor from the humble cottage of a shepherd; but what was more mortifying than any thing else, was the want of success with which the remedy was frequently administered, exhibiting the learned ignorance of the professor in all its nudity, and causing it to fall even below the empiricism of the unpretending vulgar.

Homœopathy was promulgated to the world. At first sight all supposed that the treatment of cutaneous diseases especially must be materially facilitated by the law "*similia similibus curentur*;" when I say all, I not only mean the enthusiasts among homœopathists, who suppose that any difficulty in the treatment of disease has been removed by homœopathy, but I mean the calm and reflecting adherents of the homœopathic system; these too believed and asserted that the law of similitude was especially applicable to cutaneous diseases, and would soon establish light and order in the dark chaos of the remedies for cutaneous diseases. For no other organ beside the skin affords such manifest opportunities of comparing the symptoms of the disease with the pathogenetic symptoms of the drug; the most characteristic signs, and the most delicate differences may be noted among the cutaneous symptoms which are, almost all of them, visible and tangible appearances, and are moreover accompanied by the general symptoms of the patient, of which the physician may avail himself likewise as guides in the selection of a therapeutic agent. It cannot be denied that a most important progress was made in the treatment of cutaneous diseases, and that one might well be satisfied with the first results. Nevertheless, the cure of cutaneous eruptions has only been facilitated by homœopathy to a certain extent; difficulties were encountered very soon, which have not yet been conquered, and frequently embarrass the treatment of cutaneous diseases. It seems to me that the reason of this want of success is the following: first, the difficulty to

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find remedies somewhat corresponding to the cutaneous eruptions, and secondly, the wrong mode in which that difficulty has been attempted to be met, and by which new obstacles have been created. As to the difficulty of finding corresponding remedies, it arises from the nature of the symptoms expressed in our Materia Medica. The morbid cutaneous eruptions are far more numerous than those which we have succeeded in producing by drugs, and these latter symptoms are not sufficiently graduated to correspond to every case. This deficiency is not met by the objection that the same want of correspondence exists between the symptoms of any disease and its specific drug, and that the similarity will never be perfect. This is indeed true in some respects, but this want of similarity is nowhere more perceptible than in the cutaneous symptoms. These symptoms, as recorded in our Materia Medica, give a rather feeble, indistinct image of the disease; I may simply mention some of the more complicated exanthemata, such as lupus, old eczema, lepra, etc. I do not mean to speak of this imperfection of our Materia Medica in a censorious manner, for I know that it is unavoidable. All such diseases as consist chiefly in painful sensations, in arrest, diminution, increase, or alteration of the ordinary functions and secretions, may be and indeed are sufficiently represented by the pathogenetic effects of drugs; but this is much less possible in regard to diseases depending upon organic alterations and defects; such material symptoms which owe their existence to organic changes, can scarcely, if ever, be realized by a prover. This deficiency is, however, somewhat supplied by a considerable quantity of general subjective symptoms. Nevertheless, as regards cutaneous diseases, the local, material symptoms of those diseases are but scantily represented in our Materia Medica, and even the general symptoms accompanying the eruptions, the sensations of pain for instance, are so simple that they consist in scarcely any thing else but burning and itching, which ceases to be characteristic of any particular drug, for the simple reason that it belongs to all. To all this we have to add the additional difficulty that the few cutaneous symptoms which our provers have obtained, have not always been described with the necessary correctness and knowledge, being sometimes recorded under the general term "eruption," etc.

The deficiency of cutaneous symptoms in our Materia Medica is therefore a fact, and will probably remain so. We cannot expect that new and violent provings should be instituted with a view of obtaining a more correct image of the various cutaneous disorders, and the treatment of all such dis-

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eases as chiefly consist in eruptions upon the skin, will always be more difficult than the treatment of diseases which are characterized by numerous subjective symptoms. This difficulty has been felt more and more by practitioners. But strange to say, the remedy which has been proposed to remove the difficulty, was by no means adapted to its end. Instead of tracing the evil to those causes which have been enumerated above, an altogether different route has been pursued, leading away from the goal instead of to it. Rueckert has been the only one who made an attempt to classify our cutaneous symptoms and to adapt them to use; but it did not answer the purpose, the proof whereof is the fact that it has scarcely ever been used. Henceforth homœopathic practitioners ceased to regard the similarity of the cutaneous symptoms of disease and those of the drugs; and in the treatment of cutaneous disorders the remedy was got at from a different starting-point. This starting-point was based upon something like the following reasoning. The dispute about the itch, some considering it a local and others a general disease, tended to confirm the opinion among homœopathic physicians that not only the itch, but any other cutaneous disorder was merely the reflex of an internal constitutional malady. As regards that dispute itself, the truth was to be found between the two extremes, which is generally very seldom the case; at least either party was right or wrong according to the notion which was attached to the terms local or general; for, strictly speaking, there may be local affections in the organism, that is to say, affections which exist in a circumscribed region of the organism, without calling forth an opposing reaction of the whole system. If it be understood, however, that a general reaction is constantly going on in the organism against any local morbid symptom, then every anormal phenomenon, be it ever so inconsiderable, from a mere freckle and corn up to typhus and cholera, is the expression of some general constitutional disturbance (see Frank, *Archiv.* XX. 2, p. 18). Considering that the whole structure of homœopathy rests upon the recognition of dynamic or vital forces, it was a matter of course that the idea of local diseases should be more and more abandoned. But on the other hand it was likewise a necessary consequence of that abandonment that the material symptoms consisting in changes of structure, should be considered too little, that the general subjective symptoms should occupy the first and the local alterations upon the skin the second rank; and that the principal attention of the practitioner should be directed to the eradication of the former. This course was favored by the psora-theory,

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which was then promulgated. The spirit of that doctrine being imperfectly understood by practitioners, a sort of summary proceeding was henceforth instituted against all cutaneous eruptions. A careful discriminating classification of those eruptions was scarcely thought of any more. It was understood that any cutaneous eruption was the reflex of some internal psora which manifested itself by numerous other symptoms, and, not being restricted to the skin, might leave it entirely without being cured. A necessary consequence of this belief was that physicians neglected more and more the peculiar shape and character of the appearance upon the skin, so much more as the cutaneous symptoms in our Materia Medica are, as we have seen above, so little adequate to the various eruptions in disease. This was the state of things for a long while. It is true, many kinds of exanthemata were cured with those imperfect means, and especially with Sulphur, which is the chief remedy for many kinds of eruptions. It is true, the psora-theory has been established since then upon a more scientific basis; but the views which it had suggested to many in the beginning, have remained to a considerable extent. Dr. Hering, for instance, says in one of the last numbers of the Archiv (Neues Archiv., Vol. II. first number, p. 109): "It is wrong to pay too much attention to the similarity of the cutaneous symptoms themselves. If the subjective characteristic symptoms of the disease correspond to those of the drug, even if that correspondence should not exist between the cutaneous symptoms, the remedy will cure, no matter what appearance the disease may have assumed upon the skin. The characteristic symptoms are to be looked for in the temperament of the patient, the time of the day, in the relation existing between the symptoms of the right and left side, in the inclinations and favorite tastes of the patient, in the good or bad effects of certain kinds of food or drink," etc. These and similar declarations which can only be accounted for, although not justified, by the inadequate and unscientific manner in which the pathology of cutaneous diseases has been taught in the books, show what we ought to expect in the future. Cutaneous diseases were either entirely neglected, and whatever was not itch, was termed herpes, or the pathology of those diseases was based upon a one-sided, and, for that reason, inadequate system. The peculiarity of this so-called natural system consists in classing exanthemata according to their form and shape, according as they are vesicles, blotches, scales, etc. This principle of division was entirely sufficient to establish order in the chaotic pa-

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thology of cutaneous diseases; but, although correct in itself, it ought not to have been regarded as the ultimate boundary. If pathologists had considered that vesicles and pimples do not spring up arbitrarily, the cause of the difference would probably have been investigated and discovered, and would have been adopted as the most suitable criterium of classification, not only as regards order, but also the treatment and cure of cutaneous disorders. The question therefore, is: Why do vesicles form in one, and pustules or blotches in another cutaneous affection? In order to answer this question satisfactorily, all that we have to do, is to consider these morbid processes of the skin a little more closely. The vesicle is formed by an exsudation of the epidermis alone, which becomes raised (being a thin and yielding membrane); the blotch is a morbid excrescence of the corion, which is a thicker and deeper membrane, and the pustule results from a purulent secretion of the follicle. The difference in the locality of the affection is the cause of its different forms, and the different forms point to the difference in the locality. This fact becomes much more important upon studying in their relations to one another the various organs composing the skin, the particular importance, destination and functions of the epidermis, cutis, follicular apparatus, etc.; a comparative study of those parts shows at once that the exanthems which are so different as regards form and locality, are indeed different diseases. Or, would any one assert, that an affection of the epidermis, that is, of a layer of insensible, inactive, horny cells, and an affection of the follicles, that is, of organs which are destined to remove from the organism substances that have been excreted and are not necessary to its integrity, differ in their forms by mere accident, but are the same in essence? The external form being the only sign by which we can recognize and determine the nature and the locality of the cutaneous affection, it is self-evident that it becomes of the utmost importance to the practitioner whether he has to treat a miliary, vesicular, or pustular eruption, and that the similarity of the symptoms is by no means a secondary affair. Intertrigo and ichthyosis (nothing but atrophy and hypertrophy of the epidermis) are certainly different diseases from lichen (an affection of the mucous and cutaneous follicles), or from prurigo (an affection of the sudoriferous glands and their spiral canals), or from lupus (an infiltration of the cutis, generally depending upon a scrofulous dyscrasia), or from urticaria (probably the consequence of a spasmodic stretching and contracting of the interstitial tissue, as in

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the so-called goose-flesh), etc.; those different affections cannot be considered identical merely because their symptoms are located upon the skin.

So far I have merely endeavored to discover the obstacles and difficulties which are encountered in the homœopathic treatment of chronic cutaneous diseases, and to trace the causes of those difficulties; the next and more intricate question will be to inquire whether those difficulties can be removed. In order to conduct that inquiry with satisfactory clearness, it is above all things necessary that my readers should have an accurate perception of the position from which I start.

The principal difficulty which is encountered in the treatment of cutaneous diseases is, as we have seen above, the scarcity of the cutaneous symptoms in our Materia Medica, a scarcity which will probably not be supplied by new provings. Considering the intense action which drugs require to exercise upon the whole organism, considering the important alterations which they require to produce in the vegetative system and in the whole animal economy, it will become clear why it requires time and a perseveringly continued use of the drug to enable it to produce cutaneous symptoms, and why these symptoms will always be scanty. Few provers will be found willing and able to subject themselves to such a continued and intense action of a drug, the primary effects whereof are sufficient to affect the organism with great power. In cases of poisoning there are likewise few cutaneous symptoms, for this reason, that the period which elapses between the taking of the poison and the death of the patient is indeed long enough to admit of the organism being chemically destroyed in those parts which have been in immediate contact with the poison, but not long enough to admit of that organic reaction which is partly instrumental in realizing material changes upon the skin; cases of chronic poisoning, where a sufficient length of time is allowed for that reaction to take place, occur too rarely, or, at any rate, have been recorded too rarely and too imperfectly to be of much practical value in respect to the treatment of cutaneous eruptions. And the few cutaneous symptoms which have been obtained by proving, including those which have been derived from cases of chronic poisoning, are merely incipient symptoms, and are merely approximatively similar to the symptoms of disease, but do not correspond. This is more or less true in regard to any drug-disease; it is undoubtedly true that no drug will ever be proved sufficiently to produce those material alterations, adventitious formations, or-

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ganic changes and general disturbances of the organism, which the drug is able to cure, provided it is strictly homœopathic. China, for instance, has never produced a perfect fever and ague upon healthy persons, nor Cannabis or Petroselinum a real gonorrhœa, or Mercury a genuine chancre; and yet these affections are cured by the aforesaid drugs. But those remedies have produced in healthy persons anormal phenomena which evidently pointed to those affections, being similar to them: China has produced periodical chills, with subsequent heat, etc.; Cannabis an occasional burning in the urethra, with discharge of drops of mucus; Mercury has produced ulcers which looked very much like those in syphilis, etc. How little do the symptoms of Spongia and Hepar Sulph. correspond in violence to the symptoms of real croup, and what a distance is there between the lung symptoms of Aconite and Phosphorus and those of pneumonia, and yet innumerable cases of pneumonia have been cured by those remedies. This shows that the mere indications of the curative powers of drugs which we obtain in our provings are of the utmost importance, and are frequently decisive. Nature's language is not as dogmatic as the teachings of our books, and man is forced to apply himself to the correct interpretation of her signs. In order to accomplish this result, he is obliged to observe, or, to recur to the chapter of exanthems, he has not only to examine the outward form, but he has likewise to investigate the internal nature, the characteristic properties, the special locality both of the pathological and the drug-symptoms upon the skin, and he has to do all this in order to discover the degree of correspondence existing between them, to establish their similarity and dissimilarity even in the minutest particulars, and to carefully distinguish essential from accidental differences. It is known, for instance, that Sulphur has a specific relation to itch. But whence do we know that relation? Sulphur has never produced real itch with sarcoptes, either when given internally or externally; on the contrary, the eruption produced by Sulphur differs considerably, at least to the uninformed eye, from itch. But we know that both the itch and the eruption produced by Sulphur, are similar in all the essential points; the form of the eruption, development, contents of the pustules and vesicles, the itching which is increased in warmth, etc. That sort of correspondence is sufficient. We know that the essential itch-eruption is sometimes mingled with sanguineous spots, pustules, large hard blotches, crusts, etc., but we need not regard such appearances, for we know that they are accidental, that they occur only when the itch has existed for a long pe-

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riod, or in consequence of scratching, or of an irritability of the skin peculiar to the individual; no one will expect that these accidental appearances should be brought out by the prover. In this fashion we ought to examine every cutaneous symptom with the utmost attention, and we shall always be able to determine, even were the symptom ever so insignificant, whether it arises from the sudoriferous glands, or from the follicles, or from the epidermis; for, knowing the origin and development of the cutaneous affection to which that incipient cutaneous symptom corresponds, we shall then, by inference, be able to determine what the further development of that symptom would be, and how far the drug will correspond to the more violent and intense degrees of the cutaneous affection, upon the principle that a drug is able to cure those affections of which the prover has merely realized a beginning and an indication in his own person. But it is not sufficient to investigate the seat of the affection, it behoves likewise to determine the mode in which the affection has made its appearance. This is not a very difficult problem, for we know that all morbid changes upon the skin take place in about four different ways, and that an eruption must therefore be developed according to one of those four modes. They are: 1, an injection of the vessels, without any morbid changes, as in erythema; 2, extravasations of blood forming spots, as in scorbutic exanthems, purpura, roseola, etc.; 3, exsudations of fluids; according as they take place upon the surface, or in the interstitial tissue, or the follicular apparatus, or the subcutaneous cellular tissue, they form either vesicles or blotches, or pustules; to this class belong herpes, eczema, itch, lichen, prurigo, impetigo, etc.; and, 4, morbid reduplications of the parts constituting the skin, hypertrophies, as in ichthyosis, and intertrigo in the case of the epidermis. A careful investigation of the origin, seat, development, and shape of the cutaneous drug-symptoms, will make them much more valuable than they now are, as indications of the drug which we ought to employ in any given cutaneous disease, and, even though the drug-symptom should be a mere feeble outline of the natural disease, yet it will suffice to point to the agent with which we shall be able to combat the more formidable enemy. It is true, to perfect such a discrimination, a more extended physiological and pathological knowledge of the skin, and of its morbid appearances and processes, is required than we now possess.

There seems to exist a more direct mode to supply the want of cutaneous symptoms, and to obtain a more energetic and intense action of drugs upon the skin. Upon considering our cu-

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taneous symptoms, we shall find that many of them have been occasioned by the direct contact of the skin and the juice or vapor with the drug. This is the case of Rhus tox., Mercurius, Euphorbium, Sulphur, Ranuuculus bulbosus and sceleratus, Urtica ureus, etc. These are not local symptoms, they are the specific effect of the drugs which are realized, no matter whether the drug is applied internally or externally, with this difference, however, that the local application brings out symptoms in the region where the application is made, with more certainty and rapidity than the internal use, where the drug is required to pass over a circuitous route before it exercises its action upon the skin. Strictly speaking, there are no more local symptoms and remedies than there are local diseases, except such drugs as by their chemical action destroy the organic fibre; this appears best from the fact that many remedies which are applied locally, cause a number of internal and external phenomena in remote organs, the same as if those remedies were taken internally. It is of course necessary to distinguish rigorously the purely chemical and the dynamic specific effects of the drug, but those two orders of effects are generally so distinct from one another that it is scarcely possible to confound them. The nitrate of silver for instance, produces ulcers, scurf, etc., upon the skin when touching it, but this is not in virtue of a specific action upon the skin, for the nitrate of silver has a similar effect upon every organic tissue, and destroys in the same manner the mucous membrane of the stomach, of the bronchi, a serous tissue, muscular fibre, etc. This sameness of action in all the parts of the organism does not apply to the serous exsudation which the Rhus tox. realizes in the epidermis. This action of Rhus is specific, and upon no other organ of the body does Rhus produce its characteristic vesicular eruption; the skin is the essential seat of that eruption. The best proof that the various eruptions which certain remedies produce upon the skin are not chemical, but specific dynamic effects, resulting from a peculiar affinity of the remedy to the skin, is the characteristic difference distinguishing the various eruptions from one another; if those eruptions were purely chemical effects, that is, changes from the organic to the inorganic, they would all be alike, and would differ merely in degree, but not in form; whereas, we know that one drug realizes a serous, another a purulent exsudation; one drug causes an injection of the vessels, another affects the cutis, another the follicular apparatus, etc.

Profiting by the fact that certain remedies have a specific action upon the skin, we will be led to apply them in our prov-

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ings, externally as well as internally, in order to facilitate their specific action. They may be applied as ointments or washes, or the mere vapor of the drug may be sufficient, according as the drug is solid or liquid. In this manner the cutaneous affections peculiar to every drug, will be produced in a sufficient degree of violence, and in a sufficiently marked manner, to exhibit whatever correspondence the drug may have to the most violent degenerations of the skin. In this manner every one may easily observe the characteristic cutaneous eruptions of Sulphur, Mercury, Iodine, etc. Every itch-patient who had been treated with Sulphur-ointment, exhibits the characteristic Sulphur-eczema, which likewise frequently appears after the use of Sulphur-baths. The Mercurial ointment frequently brings out a peculiar kind of eczema, which is different from the Sulphur-eczema, and has been described as one of the symptoms of hydrargyrosis. Similar results may be obtained from drugs which have a specific action upon the skin, and which have been obtained unintentionally from Rhus tox., Ranunculus, Euphorbium, Pulsatilla, etc. By proving the drugs externally, the disproportion which now exists between the pathological cutaneous symptoms and the cutaneous symptoms contained in our Materia Medica, would perhaps be entirely removed. At any rate, my proposition seems to deserve the consideration of provers, inasmuch as the chronic cutaneous diseases are of great importance to us, and their successful treatment depends in a great measure, as I have shown above, upon the exact correspondence of the natural and the artificial cutaneous symptoms.

In concluding, I wish to guard myself against a probable misapprehension. It might be supposed from what I have just said, that I consider cutaneous affections as mere local ailments, independent of the general organism. But, not to speak of experience, which is contrary to such a view, the functions of the skin are too intimately interwoven with the activity of the general organism not to affect it more or less when they themselves are impaired, even if the cutaneous affection had its origin in a local cause. But no more could we maintain that a cutaneous symptom which is produced by the external application of a drug, is a mere local symptom, and cannot be satisfactorily accounted for upon the principle "similia similibus curentur;" for the same relation exists in this case; there are no more purely local cutaneous affections except those which have been mentioned above, than a remedy, no matter how applied, has local symptoms. Nor would I base my selection of a drug upon the mere similarity of the cutaneous symptoms; I fully ap-

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preciate the value of the constitutional symptoms, and I merely wish to guard against the one-sidedness of those who look to the constitutional symptoms chiefly or exclusively, without considering the form and character of the eruption.

TWO CASES OF ECLAMPSIA OF LYING-IN FEMALES.

BY DR. GENZKE.

(From the Hygea.)

This disease is not very frequent. There are physicians who pretend that it is very frequent, but they probably confound it with hysteric spasms which occur frequently during or after parturition in irritable females, who had suffered with such spasms formerly, and which are not very dangerous. Sometimes eclampsia is confounded with real epilepsy.

Mrs. P., twenty-four years old, plethoric, of a florid complexion and rather fleshy, had been confined twice in the country. She had suffered a good deal during her first confinement, having borne twins, and the labor having been preternatural; afterwards, however, she was well, except an occasional rush of blood to the head. During the latter half of her pregnancy (in the city), she had several attacks of rush of blood to the head; attacks of stupefying headache with vertigo, a feeling of heat, and strong pulsations in the temporal arteries; these symptoms were removed by a few doses of Belladonna. On the 15th of March, 1845, she was delivered of a boy without any difficulty. She was tolerably well during the first days. On the third day, she had exhibited great restlessness and anxiety, complained of confusion in the head, vertigo, nausea with oppression in the præcordial region; in the night following she was very restless, occasionally delirious; on the 19th, in the morning, the disease broke out fully. When I arrived, the paroxysm was still continuing, her face was puffed and bright-red, she rolled her eyes to and fro, the pupils were dilated, she had lost all consciousness, the muscles of the whole body exhibited the most violent convulsions, the thumbs were clenched, the head felt hot, the temporal arteries and the carotids pulsated violently; her breathing was irregular, the air was expelled with a jerk as it were; a hissing noise

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was heard when the air rushed through the spasmodically closed mouth, during which time some foam made its appearance at the corners of the mouth; the radial pulse was small, contracted, 88–90, regular; the skin was somewhat warmer than naturally, and dry. The lochial discharge was much less. I mixed four drops of Bellad. 4, decimal scale, with two ounces of water, of which two teaspoonfuls were introduced into the mouth of the patient as well as could be done through the firmly clenched teeth. The convulsive movements abated in about five minutes, the breathing became more regular, consciousness returned, she answered the questions which were put to her, and recognized the persons around her; her looks continued unsteady and staring. Soon after she fell into a sound sleep; during which the breathing was irregular, and a slight jactitation of the muscles of the hands and a twitching of the corners of the mouth was perceptible. The above mentioned solution was continued, a teaspoonful every four hours. She awoke in the afternoon, complaining of confusion of the head, a bruised feeling in the limbs, and great debility; she had violent thirst, which was allayed by drinking small quantities of fresh water; the rigid and turgid breasts were freed from their contents by means of a breast-pump, and an hour after the babe was put to the breast. Another paroxysm of the spasms occurred in the evening, during which consciousness did not disappear entirely, according to the statement of the nurse; nor was it followed by a deep, continuous sleep, as in the first paroxysm; the pulse continued from eighty-six to ninety, was full, but easily compressible; the head was still confused and hot (on which account cold applications were made). In the night her sleep was restless, accompanied with slight jactitation of the muscles, frequent startings and occasional delirium. 20th of March: The head was almost entirely clear, painless, without any increase of temperature; the eye had its natural expression; the patient's consciousness was undisturbed; she complained still of great lassitude; the pulse was seventy-six, full and soft. The patient slept a good deal; her sleep was sound and undisturbed; no jactitation of the muscles. Continued the medicine every two hours. 21st: Patient slept well all night; had nursed her child several times, and declared herself entirely free of her disorder. The lochial discharges had reappeared profusely. Violent after-pains had likewise set in again, and troubled the patient a good deal in the forenoon of the 21st. Took Arnica 2 (one dose every four hours). The pains disappeared very soon, and the patient recovered so fast in every respect, that she was soon able to leave her bed.

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Only on one occasion, when her mind had been excited, she had a rush of blood to the head afterwards, accompanied with aching pain, and a spasmodic jerking of the muscles of the arms in the subsequent night; these symptoms were permanently removed by a few doses of Belladonna.

The second case occurred in the family of a veterinary surgeon of this place. Although the lady was tall and of a vigorous constitution, yet she was very irritable, and was frequently visited with disease. She had been married for a few years past and did not live very happily. She miscarried during her first pregnancy, to prevent which she had been bled and had taken various drugs. The lady became again pregnant, and as it is well known that one miscarriage induces a disposition for a return, she was again seized with labor-pains in the fifth month of her pregnancy, in consequence of a mental irritation, and began to lose blood. The miscarriage was prevented by the timely application of homœopathic drugs, and especially of Secale cornutum. Mrs. K. went through her pregnancy without any farther trouble, and was delivered at the commencement of August, 1845, of a healthy girl, without any untoward symptoms. Seven days had already elapsed, and the patient had spent a few hours out of her bed. On the morning of the eighth day I was suddenly summoned to her: the patient had a violent attack of eclampsia. From what I heard, I inferred that a friend had excited her jealousy the day before by telling tales; in the evening she had complained of nausea and violent headache, she had been delirious all night, and had several times started up as in affright, with vacant looks. Her condition was pretty much the same as in the other patient, except that in the second case the tonic spasms prevailed, the whole body was stretched as in tetanus, and was frequently tossed up by violent jerks. The head felt hot, the eyes were staring, the balls rolling to and fro, and the pupils being dilated; she had lost her consciousness entirely; her mouth was firmly closed, the lower lip being pressed tightly between the teeth; the upper part of the face was tinged blue-red, the lower portion was quite pale, owing to the spasm in the muscles of mastication. The breathing was irregular, the air being expelled with a sudden jerk as it were, the pulse was small, contracted, irregular, upward of a hundred. The paroxysms had continued almost a whole hour without any interruption, previous to my arrival. After having made various unsuccessful attempts to disengage the tongue which was pressed in between the teeth, I ordered cold applications to the head, and poured several teaspoonfuls of a solu-

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tion of Hyosciamus 3 (two drops in two ounces of water) through the apertures between the teeth, which caused the spasm to terminate in about ten minutes, and brought back her consciousness. She recognized the persons around her, and on being asked what ailed her, she said that she felt no pain except in the lip, which had become swollen and blue-red, and showed the marks of the teeth; her speech was, however, hurried, her eyes staring and almost wild. About fifteen minutes after the spasm had subsided the patient fell into a stupor. I left her, with direction to continue the cold applications, and to give her a teaspoonful of the solution every hour. I informed the husband, who seemed to consider the illness of his wife a simple spasm, about the danger to which she was exposed if the paroxysms should return with the same violence.

When I saw the patient again in the afternoon, she had not yet awoke from her stupor. I perceived bloody spots in the linen, and after pressing inquiries, I learned that the husband, impelled by an uncontrollable anxiety, and may be by the advice of other persons, had called in an officious physician who happened to be in the neighborhood. This man, a vampyre of the first order, had given it as his opinion that there was no immediate danger, but there was danger ahead; he had opened a vein, had ordered mustard plasters to be applied to the pit of the stomach and the calves, and had ordered something to be taken internally. I had the blood shown me, which was about twelve to fourteen ounces; there was a slight appearance of an easily separable buffy coat, which floated in a quantity of serum. The medicine was a mixture of four ounces of an infusion of Ipec. with twenty-four grains of the extract of Hyosciamus, and one ounce of aqua laurocerasi, of which the patient was to take a spoonful every hour. She had already taken some of the medicine. I do not know any thing of the further course of the disease, for I was unwilling to see the patient any more, as a matter of course. The patient died in the following night, the spasms returning shortly, as I was told by an eye-witness, and continuing until her death, alternating with wild delirium.

What is curious in these two cases is, that the paroxysms should have set in some time after delivery, whereas they generally set in during labor or shortly after.

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PRACTICAL CASES.

BY DR. GENZKE.

(From the Hygea.)

CYSTOBLENNORRHŒA.

CATARRHS of the bladder are not very rare, at least in the northern parts of Germany. In damp and wet weather, when it continues for a time, the affection is even pretty frequent, especially in people who are rather advanced in age, or whose sexual organs have become weakened by former excesses, and whose constitution has been shattered afterwards by the abuse of spirituous drinks. At times, when both local and general causes coincide, the disease seems to assume an endemic and even epidemic character. I may remind my readers of the epidemic catarrhus vesicæ which prevailed on the Lower Rhine in 1782, combined with the influenza of the same year, and continued through the fall and winter until the commencement of the following year.

From among a considerable number of cases which I have had to treat for the last five years, and some of which I either cured entirely or merely relieved, especially in individuals advanced in age, I select the following for publication, upon the ground that, although it lasted a long while and was very intense and inveterate, yet it was cured in a comparatively short time.

About the beginning of December, 1844, I was requested to take charge of a carman, short and thick-set, and 48 years old, who had been suffering for the last four months with the most violent difficulties of the urinary organs, which had increased lately in spite (in consequence?) of the drugs which had been administered by an allœopathic physician. The complaints were detailed by the messenger as follows: Frequent desire to urinate, scanty emission, accompanied with violent burning pains; sometimes the desire to urinate was ineffectual, which caused the most acute suffering to the patient. Pressed by engagements, I was unable to institute an ocular examination; I therefore sent the patient several doses of Nux 3, with direction to take one every evening, and to report in a few days. The painful urging for urination abated in the first days, and he passed a larger quantity of urine; this being a

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mere palliative, the complaint rose again to its former violence on the fourth day. The patient now exhibited the following symptoms: he was emaciated, his face was sallow and somewhat bloated, and had that peculiar expression which is gradually realized by violent and continuous pains. The patient complained of frequent and violent desire to urinate, with burning sensation at the tip of the glans, the urine being passed in slight quantity, at first in drops and gradually in a thin stream; this stream was interrupted frequently, and it took the patient generally from eight to ten minutes to void the urine in the above described fashion. Urination is frequently preceded by a violent, continuous spasm in the bladder, which is so painful that the patient moans and exclaims; after which a few drops only are passed by dint of pressing. Even when there is no desire to urinate, the patient experiences a troublesome burning and occasional tearing in the hypogastric region; on touching this region, I found it somewhat distended, warmer than the surrounding parts of the abdomen, and very painful even to slight pressure. The general health of the patient is very much disturbed by his affection; he is frequently attacked with fever, first intense chilliness followed by violent heat, but no sweat; the pulse is from 86—90, small and soft; the patient sleeps scarcely ever; for scarcely has he fallen asleep, when he is roused by the desire to urinate and forced to void the urine with renewed exertions; he is sad, desponding, and wishes to die. His appetite is diminished, the tongue is somewhat coated with mucus, the food tastes well; the stool is hard and somewhat delaying, and the evacuations are painful; the thirst is increased, but the patient refrains from satisfying it, lest he should increase his desire to urinate; general debility and tottering gait.

The urine, which, in accordance with my directions, had been kept in a tumbler, had all the symptoms of a cystoblennorrhœa in a very high degree. Under a layer of brown, turbid, fetid urine, was seen a considerable sediment of a white-gray, slimy substance, constituting more than one-third of the whole of the contents; after the urine had been poured off, with great care, the sediment either sank to the bottom in threads like albumen, or part of it dropped out of the glass, or it appeared in the shape of small balls, and particles of skin were discovered in it here and there. Upon examining with more care, it was found that the urine was but slightly, but the sediment considerably alkaline; upon boiling the sediment flocks formed at once, which showed the presence of the albumen, and, upon adding a little nitric acid, a rose color was

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perceived arising from the uroxanthin which was present in the urine—a phenomenon which I have frequently perceived in cystoblennorrhœa, but to a much greater extent in the urine of patients affected with Bright's disease. A microscopical examination of the urine for the purpose of discovering pus in it, led to no satisfactory results; I discovered, indeed, the well-known epithelium and a quantity of small globules, but I was unable to observe any distinctive marks among the latter, not even after acting upon them by means of vinegar.*

The alkaline reaction of the sediment, the peculiar nature of the pains, and the phenomena accompanying them—the statement of the patient that the urethra was sometimes clogged up with pellicles, which had to be pressed out with the utmost violence, and the occasional discharge of blood, justify the supposition that the bladder was partially ulcerated, that real pus was contained in the mucus, and that therefore the disease had to be considered as a case of very violent cystoblennorrhœa, or, as modern authors term it, as a case of incipient phthisis vesicalis.

On the 15th of December I gave the patient Uva ursi 1, a dose morning and evening. I recommended light food and the frequent drinking of water. The result of this was that the violent desire to urinate and the other pains abated within a fortnight, the patient's appetite increased, and he enjoyed several hours' quiet sleep at night, the sediment diminished likewise, and the urine became clearer; pressure upon the hypogastric region was less painful. As the drug did not seem to be attended with any further improvement, I administered on the 5th of January Cantharides 3, in the same manner as the Uva, but had to discontinue this remedy, inasmuch as its use was attended with a perceptible aggravation of the symptoms;

* Vogel and others pretend to be able to ascertain by the microscope whether particles, which are no longer visible to the naked eye, contain pus or mucus, inasmuch as it is possible, they say, to distinguish the cells of the epithelium, the pus-globules, and the different transition-degrees in either. It seems to me, however, that this can only apply to normal mucus and unmixed pus; for every morbidly secreted mucus contains the globules which Vogel has seen in pus (they are partly round, partly of an irregular shape, indented, yellowish, and are here and there covered with dark fine granules; the granules disappear from acting upon them with vinegar, the cells or envelopes become indistinct, and the sharply bounded yellowish nuclei are seen to the number of two or three); hence we must suppose that every morbid mucus contains pus, or else that the mucus cannot be distinguished from the pus by means of the globules. Hence the expressions "puriform mucus," and "muco-pus."

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the most violent spasms set in again, and deprived the patient of all rest. I returned to the Uva ursi. The condition of the patient had so far improved until the 24th of January, that he was occasionally able to pass his urine without any pain; his appetite was so great that it had to be moderated; the patient looked better, he slept well, and his strength increased visibly. The urine, which had become light-yellow and clear, ceased to react as an alkali, and the mucus had become reduced to a thin layer. A cold, which the patient took, occasioned another aggravation of the symptoms, which, however, was of short duration. The Uva Ursi was continued until the middle of February, but the desire to urinate continuing all the time, and some mucous sediment being still present in the urine, I gave Cannabis I. two doses a day. The pains disappeared more and more, and the mucus diminished gradually, and disappeared at times altogether. In the last days of February the patient was able to attend to his ordinary business as a carman. By way of precaution, the patient continued to take the Uva and the Cannabis at longer intervals, alternating every eight days. The complaint did not return, in spite of the great exertions which the patient had to undergo in his business.

TRISMUS NEONATORUM.

This disease is so violent in our district that there is no instance on record of a child ever having recovered from that disease. I treated two cases in 1844, both of which I lost. One was a boy of eleven days when he was attacked. The period of the convulsive movements of the muscles of mastication and of the face, had passed away; the spasms of the former continued so that the jaws could only be separated to the distance of one line and a half from one another, and were firm and immovable; the child of course was no longer able to take hold of the nipple and to nurse. I had some warm milk poured into his mouth, which he swallowed with great avidity; and I employed in the first days a solution of the spirits of camphor and water (four drops of the former to one ounce of water), giving half a teaspoonful every hour. The spasms became indeed much less; the voice, which had been squealing heretofore, assumed a natural tone, and the child took a quantity of nourishment. The spasms returned with the former violence on the third day, accompanied with distention of the abdomen and constipation. Belladonna 6, one dose every four hours, and an injection of milk, had no effect; the symptoms became worse, the breathing became short, panting,

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and, notwithstanding I tried Stramonium and Cicuta, the child died, nevertheless, on the ninth day of the treatment, and the eighth day of the disease. Under allœopathic treatment the children die on the third day.

The second case occurred in the family of a laborer. The child was sixteen weeks old; the case was already considerably advanced, for the jaws were so tightly closed that only a scarcely perceptible fissure could be realized between them; the trunk was stretched as in tetanus, the breathing was short and panting, violent palpitation of the heart, inability to swallow. I tried Belladonna, as above, but the child died on the following day.

Some accoucheurs assert that this disease originates partly in the cutting of the umbilical cord when it is still pulsating. This requires confirmation. Neumann, who is of the same opinion, condemns that proceeding in the strongest terms, as well as the furibond mania of the blood-spilling doctors who approve of it. He observes that the infant is brought into the world with a bleeding; and that the cutting of the umbilical cord, which is moreover frequently performed with a pair of rusty scissors, almost always brings on trismus. (See Neumann's Contributions to Medicine and the Natural Sciences, 1845, Vol. I. p. 138.)

EPILEPSIA.

The observations which I have been able to make in former years, relative to epilepsy, have been abundantly confirmed in the latter years of my practice. If the subject be young, or if the attacks have not become too inveterate, some forms of epilepsy are easily cured; but in persons who are more advanced in age, or in inveterate cases of epilepsy, all that we can expect to accomplish is to give relief to the patient, or to establish longer intervals between the paroxysms. Moreover, the physician labors under great disadvantages in this disease, in regard to selecting the proper drug; being scarcely ever called to the patient during the paroxysm, the physician has it not in his power to carefully individualize the form of the malady; he has to rely upon the imperfect statement of the attendants, and has to prescribe more or less empirically those drugs which he knows are specific to epilepsy generally. In some cases, however, he is enabled to guide himself in the selection of a drug by a knowledge of the exciting cause. From among a number of cases which I have treated during the last years, I select the following for communication, both because it is a strikingly

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characteristic case of epilepsia peripherica, and because the effect produced by the homœopathic remedy is more favorable, although perhaps only temporarily so, than could be expected, considering the long continuance and intensity of the affection.

Mr. Papenhagen, from Gr. Belitz, a tailor, twenty-seven years old, thin, and of a weekly constitution, had been subject to epileptic fits ever since his fifteenth year. He had enjoyed good health until then, had never had any cutaneous disease, and could not assign any cause for the disorder. At first the paroxysms consisted in a sticking contractive cramp-pain in the left hand, which was afterwards accompanied with a spasmodic jactitation of the muscles and turning of the whole arm inwards, with sensation as if a mouse were creeping up the arm, with fits of vertigo and obscuration of sight, without, however, any loss of consciousness. This condition lasted a few years. The paroxysms occurring very rarely, and the general health remaining good, no physician was consulted. After the lapse of that period the brain became affected, and the paroxysms set in in a more perfect form; for the local irritation and the spasmodic turning of the arm inwards were now followed by falling down without conscieusness and by the most violent convulsions, after which the patient fell into sopor, from which he woke with a bruised sensation in the limbs and some confusion in the head. Several physicians were now consulted, one after the other, but they attempted in vain to combat the malady. On the contrary, the paroxysms, which had occurred every six or eight weeks in the beginning, now occurred at shorter intervals; moreover, a paralytic condition of the arm and great weakness of memory supervened. In the middle of December, 1844, the patient came to me, after his malady had reached the most intense degree of violence during his last course of medical treatment; the paroxysms did not only come on every week, and sometimes two or three times a day, but the arm had become so paralytic that the patient was not even able to continue his business as a tailor; his mind was frequently confused. The paroxysms continued of the same nature as was described above; the falling down with loss of consciousness was preceded by the pain in the hand and the spasmodic turning of the arm inwards; this arm had become very much emaciated, the muscles looked flaccid; he experienced a constant numbness in that arm, and so much paralytic weakness that he was unable to use the arm for any business, and that he scarcely felt the pressure of the hand.

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The general functions of the system were regular, except great general debility.

I gave the patient twelve doses of Belladonna 3, with directions to take a dose every other evening. The patient saw me again on the 13th of February, 1845. He reported that he had not had any real paroxysms ever since he had been taking the medicine until a few days ago, when he had felt the local irritation in the hand and arm, accompanied with a sensation of giddiness; there had neither been loss of consciousness nor convulsions. The Belladonna was continued in the same manner. I did not hear any thing of the patient until the 3d of July. He told me that he had been entirely well until the 1st of July, but that he had had a regular paroxysm on that day. From this period forward the patient has continued the medicine pretty regularly in the manner above-mentioned, and has not had any paroxysm until the present time (Dec. 1845), except a local irritation which took place in the middle of September. The paralytic arm improved visibly under my treatment; the man is not only able to attend to his trade, but he is even able to perform more fatiguing exertions, which he had not been able to do for years past.

I do not expect to remove this malady entirely; I feel disposed to believe that the paroxysms will recur with more or less violence, for an epileptic patient cannot be considered cured unless the paroxysms have ceased for a year and-a-half or two years, and the general health is perfect; but it is proper to consider a success, such as has been obtained in the present case, extraordinary, considering that the condition of the patient had become so much worse under the treatment of a number of physicians. My poor patient, who now enjoys life, is persuaded that he is perfectly cured. Upon the strength of that belief he intended to marry, which I have, however, advised him not to do.

HAHNEMANNUS SEU DE HOMŒOPATHIA NOVA MEDICA SCIENTIA LIBRI OCTO.

BY Q. GUANCIALI.

(*Second edition.*)

This epic poem, which has been received by all the literary men of Italy with the most unanimous approbation, and

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has enjoyed the honor of a most brilliant and unqualified acknowledgment of the Royal Institute of France, describes the life and struggles of Hahnemann, and the history of Homœopathy, from its origin up to its final triumph, in a manner which would do honor to the classic poets of yore. This poem has been ranked side by side with the poems of Virgil and Lucretius, and its author has been honored with the following letter from the Royal Institute of France, which is the highest literary and scientific corporate authority in the world:

"Institutum Franciae Academia regia inscriptionum et liberalium disciplinarum C. A. Walchenaer, h. D. Academiæ perpetuo a secretis, Viro Clarissimo Quintino Guanciali S. P. D.

"Accepit Academia librum tuum cui titulus Hahnemannus et cet. Adjunctae erant ad me missae literae, egregiam erga me benevolentiam tuam ostendentes. Quibus duabus rebus a te nihil nobis potuit afferri gratius. Itaque Academia decrevit eum librum tuum multis luminibus ingenii, multa arte distinctum, et illo antiquorum hominum stylo et elegantia redolentem in bibliothecam nostram inferri, et tibi a me significari, tuum nobis munus et optatissimum et jucundissimum accidisse. Vale. Dabam Lutetiae Parisiorum. MDCCCXLII."

(ENGLISH.)

"The Academy has accepted your work entitled, 'Hahnemannus,' etc. I thank you for the kindness which you express towards me in the letter accompanying your poem. Nothing could have afforded us greater pleasure than the reception of that poem and letter. The Academy has therefore decided that your work, which is distinguished by brilliancy of imagination, by deep sense, and by a truly classic style, be received into our library as a most agreeable and beautiful present. Paris," etc.

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HOMŒOPATHIC CURES,

From the year 1840 *to* 1844, *collected from the various Homœopathic publications, by Dr. Kurtze, of Dessau.*

TRANSLATED BY CHARLES J. HEMPEL, M. D.

(Continued from Vol. V. No. 1 of the Examiner.)

In three days Aconite cures the slight rheumatic affection with painfulness of the muscles of deglutition, and light, streaked redness; if the redness spreads more on the fourth day, if deglutition becomes more difficult, accompanied with strangulating pain, the fauces drier (first stage of catarrhal inflammation), then give Bella., whereas Puls. corresponds more to the second stage with increased secretion of mucus; if the swelling of the tonsils becomes still more considerable at the end of the fourth day, with stinging pain, and almost entire inability to swallow, one or two doses of Silic. are sufficient to cause the bursting open of the tonsillar abscess even previous to the fifth day, and the cavity heals until the ninth day, except in patients affected with some sort of dyscrasia, especially with gout or herpes, in which case it may be necessary to give Sulphur every eight or twelve hours in ordinary cases, Hepar sulp. after abuse of Mercury, and Psoric. after abuse of Sulphur.

Quite different from the Angina faucium, is the *Angina aphthosa*, of which there are two essentially different forms: 1. *Angina aphthosa* (miliary), where the tonsils, which are swollen and exhibit the form of bullets, are at first covered with single white stigmata, which become confluent as they increase, and spread, accompanied with increasing burning-stinging; they disappear from the fifth to the ninth day, as if the epithelium peeled off. In the first days give Aconite, then Carbo veg. 2. *Angina exulcerativa.* After a violent fever of two or three days, during which the tongue is coated white, with red edges and a red tip, the swollen tonsils, in which lancinations are experienced, become covered with white pimples of the size of a pin's head, which very soon burst, and form flat, lentil-shaped, painful, white, or in bad cases gray-colored ulcers, accompanied with increased flow of saliva, metallic taste, fetid breath, swelling of the submaxillary glands. First give Aconite, then Mercurius, which is not sufficient, but a few doses of which favor the action of the true specific in this case, Acidum nitricum.

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In two cases of *Angina gangrenosa*, affecting two weakly girls of twenty years, and characterized by violent pain, fever, vertigo, sopor, several abscesses formed which opened on the ninth day, discharged a brownish ichor with flocks of disorganized cellular tissue; with large orifices, surrounded by patches of gangrened mucous membrane. In the first case, where delirium, and subsultus were present, Valeriana, Serpent., Camph., Chin., and afterwards injections of China and Camphor, acids, etc., were administered, but without success; after a few doses of Carb. veg., an improvement soon commenced, and the patient recovered slowly. In the second case, where Bellad. and Silic. were given, the abscess opened, after which a few doses of Rhus tox. 3, changed the character of the pus to a good pus, and affected a speedy cure. (*Goullon, in Archiv.*)

Griesselich has treated three cases of diphteritis in three sisters of eight, six and four years, who were taken sick one after the other, in the space of a week. The affection commenced about the tonsils or uvula, thence descending into the windpipe with great rapidity. A watery discharge from mouth and nose, smelling like mercurial saliva, and swelling of the submaxillary glands, were the first symptoms. Whole patches were coughed up, but they were speedily reproduced. Two of the children died, one was saved by the local application of the aqueous solution of nitrate of silver, resorted to at the commencement of the disease. Post-mortem examination showed exsudations, partly tubular, extending from the fauces down to the finest bronchial ramifications. (*Hygea.*)

Lycopodium in inflammation with exudations in the fauces and mouth, which are generally of a herpetic nature; hence it may be used in aphthæ, when the improvement is accompanied with intertrigo. (*Goullon, in Archiv.*)

In persons who were affected with syphilis in former times, an herpetic eruption of the following nature sometimes makes its appearance. It resembles the skin of the hands of washerwomen, commences at the tonsils, and extends along the borders of the tongue as far as the tip, perhaps as far as the larynx, occasioning hoarseness and violent irritation, with cough. It is very rare that all those parts are affected at the same time; warm food and the smoking of tobacco cause a burning in those parts. Lycop. 6–9, is of great use in that affection. (*Hartman.*) Similar cases, where the palate and the velum palati appeared lined as if with lard, whether syphilis was or was not suspected, were always promptly cured by Lycopodium. (*A. h. Z.*)

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Acidum nitricum 3 is a specific for almost any kind of ulcers in the fauces or mouth, especially when arising from the abuse of Mercury. Frequent repetitions and a continuous use are indispensable. (*Archiv.*)

A man of thirty years, being heated, drank cold water, after which he experienced violent pains in the middle of the chest, extending as far as the back, increased by every movement, and especially by deglutition; that which he swallowed, felt as if it remained adhering to one place. Fever. In the last days he was scarcely able to lie on his back, from pain. Aconite 12, 4 pellets every four hours. Cured in two days. (*Hygea.*)

GASTRIC CONDITIONS.

In the recent saburral conditions, when the food has remained in the primæ viæ, Puls. is the specific; but if it is pretty certain that all the food has passed off, and that nothing but gastric fever, or a dyspepsia without fever (or want of appetite, thirst or else aversion to drinks, tasteless eructations, diarrhœa, periodical headache or stupefaction), remains to be combatted, Ipec. 2 is the best remedy. If those complaints become chronic, as is generally the case where the digestive organs have been affected previously, Sepia almost always corresponds to those conditions, relieving the obstinate coating of the tongue in a very short time. (*Archiv.*)

Acute polycholic conditions, such as bilious vomiting or diarrhœa, with violent colic, are cured by Chamomilla 3.—Chronic conditions with excessive secretion of bile, and frequently accompanied with bilious pleurisy, are cured by the carbonate of potash. (*Archiv.*)

A slender and tall young man of seventeen years, having always been weakly, complained of the following symptoms: coated tongue, slight appetite, the stools partly hard, partly diarrhœic, the gums being of a nut-brown, standing off from the teeth, and bleeding frequently; he was lazy and drowsy, and was frequently attacked with cramp in the calves. Took Antimonium 6, one drop at a time, two doses, one every eight days. Got well entirely in a little longer than three weeks. (*Archiv.*)

A man of twenty-four years, had felt debilitated for the last fortnight, complained of heat alternating with chilliness, dull pain in the forehead, aversion to food, tongue coated white, increase of thirst, flat taste, sensitiveness of the region of the stomach. Ipec. I, every three hours, procured a speedy cure.

A girl of sixteen years, had violent vomiting after having

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eaten too much cake with plums. After the lapse of five days, the following symptoms had set in: the head feels obtuse, with bitter taste, coated tongue, nausea, eructations, slight thirst, distended and painful abdomen, frequent diarrhœa with flatulence, slow pulse, alternate coldness and heat. Antimonium 3, every four hours. (*Hygea.*)

A female of forty years had been suffering with the following symptoms for the last six weeks: oppression of the chest, great nausea, short and hacking cough, increased by the least movement. For the last eight days she had been complaining of oppression in the pit of the stomach, intolerance of contact in that region; violent nausea, even when merely thinking of food; coated tongue, with shrivelled, brown, dry tip; obtuseness of the head, pale-yellowish color of the face, circumscribed redness of the cheeks; cool, viscid sweat; alternation of chilliness and heat every night, sleep disturbed with fancies, occasional delirium. Repeated doses of Ipec. 12. Recovered entirely on the fourth day. (*Mosthaff.*)

A man of twenty-nine years, of a venous, athletic constitution, having had the itch several times, had been affected with oppression of the chest for the last six years, which was relieved every year by venesection. Last March, and also in the present month of March he had been affected for seven days past with nausea, which seemed to ascend from the stomach, and increased after a meal; inclination to vomit, pressure and warm feeling in the region of the stomach, which was full but not distended, accompanied with throbbing, and by an otherwise painless pressure; tongue, appetite, thirst and pulse were in their normal condition; he feels constantly debilitated, and inclined to stretch; sweats easily; feels sick after becoming heated or when exposed to external warmth. Tart. stib. 2, one grain. Improved in four days, recovered in six. (*All. h. Z.*)

A patient had been complaining of the following symptoms for several days past, beside a diarrhœa which had stopped of itself: nausea, thick yellow coating of the whole of the tongue; complete want of appetite; vertigo, headache. Ant. crud. 4, one drop. Entirely well next morning. (*All. h. Z.*)

After eating a good deal of pork, a man had much aversion to any kind of food or drink, nausea with inclination to vomit, sensitiveness of the pit of the stomach, pressure, stinging, perceptible pulsations. *Pulsat.* 6, one drop, two doses, in the evening. Felt quite well in the morning, and the appetite had not returned. (*All. h. Z.*)

Asafœtida removes trouble brought on by eating fat, especially when consisting in burning, distention, ascension of a foreign body, and a kind of watery vomiting. (*Helbig.*)

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Natrum carb. and Carb. veg. are the principal remedies against the bad effects from drinking wine. (*Helbig.*)

A girl of twenty years, who had had several attacks of gout, had been troubled for some time past with homesickness and indigestion, and had had fever for a few days past, with frequent vomiting of mucus in the night, obtuseness of the head, frightful fancies, the tongue being quite clean, flesh-colored, dry, smooth; pulse frequent, large, uncertain. Took Bryonia 24, every four hours. Recovered in three days. (*Mosthaff.*)

Rhus and Hypericum are principal remedies in recent cases of pains in the small of the back, but especially of a status gastricus (coated tongue, want of appetite, confusion of ideas), and even paralytic weakness of the intestinal canal, when those symptoms are occasioned by lifting of heavy loads, stretching, great muscular efforts. (*Helbig.*)

CARDIALGIA; VOMITING.

According to Diez, Nux vom. and Arsenic, and sometimes Sulphur, Calc. carb., and Carb. veg. are the best remedies against cancer of the stomach. Nux vom. is most suitable in the beginning, in persons of an atrabiliary disposition, and with tendency to hæmorrhoids, when there is indolent stool, and a predominance of crampy pains. Arsenicum when the disorganization is more fully developed, when there are violent burning pains, and habitual diarrhœa. Sulphur at the commencement, when there is a disposition to hæmorrhoids, and when the itch had been suppressed by ointment. Calc. carb., especially in females affected with chlorotic complaints and profuse menstruation. Carb. veg. when there is too much acidity, burning, and sore feeling in the stomach.

A man of forty-eight years, stout-built, yellowish, having had the itch in his childhood, had been affected for three years past with oppressive contractive pains in the stomach; they were more violent in the winter than in the summer; stitches in the back and in both sides of the thorax; sour eructations and vomiting of food with mucus and bile; tongue slightly coated, diminished appetite, sensitiveness of the pit of the stomach when pressed upon. Took tincture of Sulphur, ten drops, Sacch. lactis, two drachms, two doses a day, as much each time as would cover the point of a knife. The vomiting ceased entirely in eight days, the pains continued. Took Nux vom. 2, one drop, twice a day; the pains disappeared entirely in a fortnight, and have not returned since.

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TRIAL OF DOCTOR PELLETIER,

IN THE COUNTY OF PUKEDOM,

CHARGED WITH PRACTISING HOMŒOPATHY, AND CONDEMNED TO BE EXPELLED FROM THE RANKS OF THE "REGULAR" PROFESSION.

It may seem incredible to men who live under our glorious institutions of exalted freedom, that an honest man should, at any place or time, be persecuted for his opinions in political, religious, or scientific matters; but alas! the age of persecution has not yet passed away from this earth, and the advocates of a new doctrine must expect to meet the bitterest enmity from their conservative opponents. Would that that opposition were at all times based upon honest zeal! It is not, however: it is too often the fruit of selfish interests and passions.

A trial has lately come off in the county of Pukedom, which shows that even in that remote and scarcely known corner of the world, all the evil passions which the human heart is heir to, have been let loose against that redeeming daughter of heaven, Homœopathy.

Doctor Pelletier, an honest and inquiring practitioner, had heard of the wide-spread fame of Hahnemann, and of the increasing persecutions which that devoted martyr to the cause of truth had suffered; and, being naturally inclined to side with the oppressed, he determined to investigate Hahnemann's doctrines, and not to condemn the man until a careful knowledge of his doctrines should have been obtained. He read the Organon, the Chronic Diseases; he examined the statistical tables exhibiting the results of homœopathic treatment; he read the journals where Hahnemann's doctrine and its application to the treatment of disease is expounded; he compared the elegance, simplicity and precision of the homœopathic treatment of disease to the filthiness and uncertainty of the old-school practice; and the result of his investigation was not a condemnation but an unqualified adoption of Hahnemann's doctrines. Although despised at first for his defection from the sound doctrines and his allegiance to the absurd importation from the land of mysticism and transcendental vagaries, and even left by some of his best families, yet nothing daunted he unfurled the banner of the holy cause of truth and progress in medicine, and openly avowed himself an adherent of the New System.

Not content with practising it for his own gain, he endeavored to serve the cause of Truth by making converts, and

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succeeded so well in his laudable efforts, that his opposing brethren soon began to feel the effects of his teaching upon their pockets.

It is scarcely necessary to say that the vengeance and hatred of the alicœopathic physicians increased proportionally to the reduction of their bills, and that they unanimously determined to annihilate their homœopathic brother.

On an afternoon, when he had dispensed the blessings of his art to numerous patients, the homœopath received an invitation from the County Medical Society to appear before them, and to answer a charge of malpractice for having cured Eva Glutton in the space of two minutes of violent spasmodic vomiting, brought on by eating excessive quantities of fish and sweet potatoes, and for having perpetrated that cure by an insignificant and deceitful pellet of the so-called thirtieth potency of Nux vomica.

The patient having been requested to state the facts of the case before the County Medical Society, testified as follows:

That she had eaten a considerable quantity of fish, sweet potatoes and apple-dumplings, that three hours after dinner she had begun to vomit, and that this vomiting had continued until two o'clock in the night with unabating violence; that she had thought her stomach would burst from her efforts to vomit; that for the last four hours she had vomited nothing but mucus and water; that she had used every means in her power to stop the vomiting but without any success, and that finally Dr. P. had cured her in the short space of two minutes by placing upon her tongue a small grain of something, which had a sweet taste, and of the nature of which she knew nothing except that it quieted her stomach as by a charm.

The defendant was thus interrogated by the President of the Court in relation to that matter:

P. Is it true that you deviate from the regular practice in the treatment of disease?

D. I do.

P. Is it true that you have forsworn the time-honored processes of bleeding, purging, blistering, vomiting, sweating, and the various other derivative means of our noble art?

D. I have.

P. Is it true that you prepare your own medicines, thereby depriving our associates in the noble and lucrative trade of physicking of an immense per centage which, in many cases, amounts to several hundred cents on the dollar, and part of which goes into our own pockets?

D. I have abandoned the profits accruing from the phy-

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sicking business as an illicit gain, and prefer giving my medicines gratis.

P. Is it true that you cure diseases without giving any medicines?

D. I give medicines, as every homœopathic physician does, but instead of giving large quantities of the crude drug, I triturate the drug with sugar of milk, and afterwards dissolve a portion of the trituration in alcohol, shaking the solution well and then mixing a portion of this solution with new alcohol, shaking this new solution again powerfully, and continuing in this fashion, making new solutions and developing new powers of the drug ad infinitum.

P. Why do you not prepare your drugs as our apothecaries are in the habit of doing?

D. Because the common processes of our apothecaries frequently destroy the remedial virtues of many drugs, as may be seen by boiling onions, pepper, mustard-seed, etc., all of which lose their virtues by boiling, but keep them when triturated, and even manifest them in a much higher degree. Homœopathic physicians act upon the disease directly by means of the dynamic power of the drug, and not in a round-about way by poisoning the organism and breaking down the constitution with large doses of the crude drug.

P. That will do, sir, you may take your seat.

The Court here adjourned for an hour; after the lapse of which period the President charged the members as follows, in the absence of the defendant:

"Gentlemen:—It is with feelings of dismay and deep sorrow that I announce to you the melancholy fact, that the new German humbug, which has been so much talked of in the newspapers and has upset the brains of a number of the best and most respectable members of our profession, has infected this remote abode of sound medical doctrines, and is likely to cast a firebrand amongst us which will consume our influence, our bank-bills, our privileges, and enkindle a flame of horror and indignation against us in the hearts of our deluded patients. Can we expect to succeed in stemming the current of this new opposition? Would it be safe to expose ourselves to a shameful defeat in attempting to crush an infant which, like Hercules in the cradle, might prove a terrific giant? Friends, I scarcely know what to advise in this perplexity. If we could enjoy the fruits of our imposition ten years longer we might have succeeded in amassing snug fortunes and retiring from practice, leaving the field to that pest of reformers which it shall be my constant prayer the devil may take to himself to all eternity,

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to the great comfort of our weary and lazy souls. It is true, gentlemen, and we all confess it among ourselves, that we ought to be ashamed of ourselves for the gross deception which we are constantly in the habit of practising upon our patients, making them believe that we know all about the nature and origin of disease, and have an absolute control over the results which we intend to effect with our drugs; whereas we know that we are in the darkest ignorance on all those subjects, and frequently effect much less by means of our cumbrous and ludicrous prescriptions, than a common peasant does with a simple drug from domestic practice. However, can we yield without losing caste with our patients, who have suffered themselves to be duped for thousands of years past by our practices and imposing and dignified charlatanism? Shall we admit to those homœopaths—the devil take their souls—that we are a pack of dunces, as we know we are; a gang of shameless pretenders and remorseless vampyres, sucking the blood of our fellow-beings, and chuckling at the good-natured simplicity with which they suffer themselves to be humbugged by our cunning and poisoned by our nostra? Shall we renounce influence and income? Shall we consent to be made the laughing-stocks of the present and of all future generations? Shall we admit that we are a parcel of gross and beastly materialists, and that our practice is characterized by the most disgusting filthiness, and by any thing else which can offend the refined feeling of a man of education and a christian? We shall have to do so after a while; we shall have to bid farewell to our pots and kettles, and to the racking brews with which we have inflicted untold tortures upon our deluded fellow-beings; but shall we not rather continue wielding power as long as we can, and use it to satisfy our insatiable appetite for gold? My brethren, we cannot think of making any concessions to the homœopaths; they are a band of determined, industrious and conscientious inquirers after truth; they inflict pain upon themselves in order to ascertain the most expeditious mode of freeing their patients from it; and their appeals to the common sense of men are so powerful and irresistible that they finally must triumph over the most obstinate opposition. But as long as we can, let us remain in possession of the wealth of the world; and in order to accomplish that purpose let us lie and cheat, and let us unite in giving out the homœopaths for what we are ourselves, scoundrels, quacks and impostors."

This brilliant, eloquent address was boisterously applauded by the members of the Court, and it was decided to expel the homœopath from their ranks.

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This gentleman having been called in to hear his sentence, it was read to him in the following terms by the President:

"Whereas it has been proved by your own admission that you have ceased to respect the sublime leech and the glorious mustard-plaster; that you have sworn destruction to our salves and decoctions, and contemn the unfathomable arcana of our art, which are deeper than all human understanding: therefore we have decided, for the dignity of our craft, that you be expelled from our ranks as a traitor, a dynamist and a homœopath."

The homœopath received the sentence with a smile, and left that company of pretenders without regret.

But so far from losing ground by his expulsion from the Medical Society, his patients clung to him with so much more zeal. The following address was issued by them in behalf of the persecuted physician:

"Fellow-citizens:—We have heard with astonishment and regret that Dr. P. has been expelled from the County Medical Society on account of his practising homœopathy. It is not our intention to defend homœopathy for its own sake; but whereas we can affirm as men of honor that our sufferings are much more speedily, thoroughly and permanently relieved by homœopathic means than they ever were before by the usual mixtures and decoctions; that it is just as pleasant to take a homœopathic powder as it is disgusting to swallow the common pharmaceutic potions; that the apothecaries now have never any bills against us, whereas formerly we had not only to pay our doctor's fees, but also large sums for drugs which scarcely ever did us any good; therefore we take great pleasure in recommending Dr. P.'s system to the adoption of our fellow-beings, and in urging them to set down Dr. P.'s expulsion from the County Medical Society as the result of malice, vengeance, and disappointed selfishness.

(Signed) P. Stormer,
F. Truthteller,
W. Goodman,
And many others.

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HOMŒOPATHIC SPECIFICS

Sometimes act with a remarkable and almost instantaneous effect. We will relate a few cases.

1st Case:

A lady of middle age had been suffering for three days past with agonizing cramp pains in the right groin along the course of the lateral ligaments of the womb; the paroxysms set in every five or ten minutes day and night. The patient had used teaspoonfuls of laudanum and had applied hop poultices without any effect. Gave the patient one powder of the Muriate of Magnesia 18. The pain disappeared in one minute without ever returning.

2d Case:

A female had had rheumatism of the chest for upwards of three years; she felt a stricture across the chest which was extremely painful, and impeded respiration; on taking a deep breath, she experienced violent dartings in the region of the heart; the chest and the epigastric region felt sore to the touch, and in the latter region she felt a pressure as of a cold load. The pain generally was so violent that she was unable to walk, or to enjoy any rest at night. Took Aconite 3 in water. *All the symptoms* disappeared in two days, and have not returned yet.

3d Case:

A lady had been complaining for some days with excruciating neuralgic pain over the right eye, and great soreness of the eyeball; the pain occurred in paroxysms after breakfast, and lasted until evening. During one of the paroxysms she took Belladonna in water. After the second dose the pain disappeared and has never returned.

4th Case:

A gentleman had a violent chagrin, and was affected with the following symptoms in consequence of it: Coma, white-coated tongue, etc.; it was only with the greatest difficulty that he could be roused from his comatose condition for a mo-

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ment. He took Opium 18, one powder, and in half an hour all the symptoms had disappeared.

5th Case:

A gentleman had a violent attack of influenza: Violent sore throat, dark-red and stinging, inability to swallow, delirium, hot skin, excessive weariness all over, and sensation in the joints as if bruised and lame. Took the tincture of Aconite and the first attenuation of Nux. vom. in water; the symptoms had disappeared entirely in twenty-four hours, during which time the patient perspired so profusely that he had to change his linen six times, and the bed-clothes had likewise to be changed.

6th Case:

A young lady who had had scarlet fever, had an affection of the right eyeball for months after. Every morning on waking, the eyeball felt extremely sore; light was intolerable. The affection sometimes lasted all day. The child took a very small portion of a drop of the tincture of Spigelia, and has not complained since.

7th Case:

A young gentleman, a pupil in the Institution of the Rev. Mr. Muhlenberg, near New Rochelle, had been on a visit to his parents who resided in the West, in a district where the bilious remittent fever was epidemic at the time, and proved fatal in a great number of cases. On his return here he was seized with the disease. The first paroxysm commenced at about 11 o'clock in the morning; the fever was anticipating. We saw him shortly after the third paroxysm. The paroxysms commenced with giddiness and chills; the tips of the fingers became blue and icy cold; the feet likewise were very cold; the head felt hot and painful, eyes burning; after the chill the skin was hot all over; the region of the liver was extremely painful; the patient was unable, on account of that pain, to take a deep inspiration; tightness as of a band across the hypochondria and epigastric region; excessive vomiting, some thirst, coated tongue and bitter taste; the appetite continued pretty good. The patient took a few pellets of China 30 in water, after which the paroxysms ceased, and the patient was able to resume his studies in a few days.

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8th Case:

A lady was attacked with a violent sore throat, the symptoms being: Dark redness of the velum and uvula, ulcers on the sides of the throat, stinging during deglutition, and a shooting pain from the internal angle of the lower jaw to the ear. Took one drop of the tincture of Ignatia in water. The patient was relieved very soon after commencing taking the medicine, and was entirely well in two days.

This case convinced us of the importance of attending to symptoms. The indication for Ignatia in this case was the stinging during deglutition and the shooting from the internal angle of the jaw to the ear. We are persuaded that many practitioners would have jumped at Aconite or Belladonna in a case like this, and would have signally failed in curing their patient.

9th Case.

A gentleman was attacked with a violent sore throat from substituting a thin cravat for a heavy one. The velum, uvula and tonsils were very much inflamed; the fauces were covered with little ulcers; deglutition was excessively painful. Took Chamomilla 30, a few pellets in water. Felt the good effects of the medicine in about five minutes after commencing taking it, and was well on the second day.

10th Case.

A young lady of sixteen had been dozing on a sofa under a window, the consequence of which was a frequent desire but inability to urinate. Aconite 30 relieved her at once.

11th Case.

A patient of ours was operated upon for cataract by Doctor Wallace of this city. A most violent inflammation set in after the operation. The pain in the eye was agonizing. A similar pain was experienced in the temple and above the eye in the forehead as high up as the vertex. This pain was accompanied with retching and a sensation as if the stomach would die with nausea. The sensation of nausea was felt in paroxysms and ascended from the stomach into the head. There was involuntary weeping and tremulousness of the muscles. The patient took a teaspoonful of black coffee sweetened with

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sugar. In about ten minutes she fell into a sound sleep, which lasted about an hour. On waking, the nervous system was perfectly quiet, and the patient assured us that she enjoyed the most delightful repose. The inflammation was easily controlled by a wash of two drops of the tincture of Aconite in a cupful of water.

12*th Case.*

A lady of great sensitiveness had been suffering with diarrhoea for a fortnight. The diarrhoea produced a feeling of humid warmth at the anus. She took a cup of coffee (her usual beverage is tea or cocoa) and had not a single diarrhœic stool after that.

13*th Case.*

A girl of nine years had been suffering for a week past with great burning at the anus after every evacuation, loose or hard. Three powders of Mercurius 3 removed the pain in twenty-four hours.

We may here state that we have a great many remedies for burning at the anus, but that there is scarcely any which is a better specific for burning at the anus *after* an evacuation, be it loose or hard, than Mercurius. Arsenic relieves burning which disappears during an evacuation.

14*th Case.*

A lady of middle age had been losing blood from the uterus for about a fortnight; she lost about a pint a day. She had to lie in her bed, the blood keeping oozing all the time; she had great bearing down pains and the abdomen was extremely tympanitic. She took a few pellets of Nux vom. 30 in water, and next morning the abdomen had its natural shape, and the hemorrhage and the pains had ceased entirely.

15*th Case.*

A lady of about twenty-five years had been suffering for a month past with violent ulcerative pain in the pit of the stomach; one single powder of Mercurius 3 removed the pain entirely.

16*th Case.*

A lady had been affected with a yellowish diarrhœa for

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several months, which prostrated her a good deal without impairing her appetite. One dose of China 30 stopped it entirely and permanently.

17*th Case.*

A lady of middle age had been affected for a number of years with tenesmus of the rectum, and with prolapsus of that organ after every evacuation; the stools were habitually hard, and the rectum had to be replaced with the fingers. A drop of Ignatia in water, and two powders of Mercurius 3 were sufficient to cure this long-standing complaint.

18*th Case.*

A lady was suffering with swelling of the right side of the head, excessive and indescribably painful numbness of the posterior part of the head and the nape of the neck with sensation of weight in that region, excessive buzzing in the ears, heaviness about the wrist and elbow-joints; the pulse was down to forty-five. All these troubles arose from suppression of the menses. She took two drops of the tincture of Digitalis in a large tumblerful of water. The menses made their appearance that very night; the pulse rose at once to seventy-five, and the symptoms gradually disappeared.

19*th Case.*

A lady had been affected with ascites for eight years past. She had been tapped eight times, and latterly required to be tapped every three weeks. When we took charge of her, she exhibited the following symptoms: Dropsical enlargement of the abdomen; great dislocation-pain in the liver; burning in the epigastric region; difficulty to pass the urine, which was sometimes dark, turbid and burning; debility; restless nights, the sleep being disturbed with bad dreams; pain in the small of the back, oppression at the chest. We gave her Mercurius 3, and Arsenic 3, in alternation, two doses of each; this improved the pain in the side, and the urine, but did not stop the swelling. The patient had to be tapped again. She then was put upon the use of Arsenic 3, and the tincture of Prunus spinosa, taking two doses of each medicine in alternation, the doses of the Prunus being one drop each. A fortnight after having taken these remedies, she was tapped again, inasmuch as there was a return of the swelling, and it is not advisable to

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leave the water too long, lest it should act as a heterogeneous and irritating agent. This time the water was entirely changed. Instead of looking clear and transparent, as it had always done heretofore, it had a milky and turbid aspect; all the other symptoms had improved. The patient continued the same remedies, and was restored to perfect health. This lady had been given up by some of our most distinguished allœopathic physicians. The homœopathic treatment of that case lasted five weeks.

From a letter which she sent to her sister in this city some time ago, we have been permitted to quote the following: "I have not been so well in some years. My swelling has not returned The urine is perfectly clear and has the natural appearance. I am not troubled with thirst. My appetite is very good; I can eat any thing that happens in the way. The burning on the stomach and the pain in the side have left me. My skin is moist and in a natural state. As for my strength, it has improved very much; I get stronger every day. I go to bed at half past eight every night, and do not know or hear any thing until five the next morning. Upon the whole, I may say I am doing very well."

THUJA OCCIDENTALIS.

AN ESSAY.

BY CARL MAYRHOFER, M. D.

[We recommend this splendid Essay, which we shall republish in successive numbers, to the most careful perusal of our readers. We would suggest the propriety to Carlisle of adding in the next edition of his work on "Heroes and Hero-worship," one of the most interesting classes of heroes, of whom he has probably never thought of; we mean *the provers of drugs*. Can any man read such provings as those which Mayrhofer and his friends have instituted with Thuja, without being overwhelmed with astonishment at the devotion which those martyrs exhibit for our cause and for suffering humanity? Shall we ever behold the day when our American brethren will emulate such glorious examples?]

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CHAPTER I.

Etymology, synonymes, description and chemical ingredients of Thuja.

THE term "*arbor vitæ*," has a threefold acceptation in literature; a pharmacological, botanical, and anatomical.

Van Helmont has written a special treatise entitled "*arbor vitæ*," by which he understands a macrobiotic mixture, among whose ingredients the wood and resin of the cedar hold the principal rank. It was supposed that life was prolonged by the continued use of that drug; that it was a prophylactic against every disease, and that it gave strength to patients; it was looked upon as a sort of elixir of life, such as are found in abundance in the older books on medicine, as so many evidences of the mystic faith of those times, and as are sold even now to the credulous public for heaps of gold.

Every physician knows what is meant by "arbor vitæ" anatomically. On making a deep longitudinal cut through the lobes of the cerebellum, the substance of the brain offers the appearance of a tree called *arbor vitæ*, for no other reason than this, that the cerebellum was supposed to be the principal seat of life.

The subject of our essay is a real tree, called *Thuja occidentalis*. At the time of Francis I., king of France, this tree was imported into France from Canada. The first specimen of that tree was seen by Clusius in the royal garden of Fontainebleau. He has furnished a tolerably correct figure and description of it under the name of arbor vitæ. (See Caroli Clusii Rarior. Plantar. Histor., 1601.) The Greek name *θύα*, also *θύεια* or *θύια* from *θύειν*, *suffire*, to fumigate, signifies a resinous tree, and is first seen in Theophrastus Lesbius, disciple of Aristoteles; in his work, "*περι φυτων ἱστοριας*," Theophrastus describes a tree resembling the cypress and called *θύον* (*δένδρον*) or *θύα* (*ἰδεα*, *species*). Roman authors have latinized the word *θύα*, changing it to Thya, Thuya, Thuia, Thuja. (In a similar manner the word *θυς*, Gen. *θύεος*, has been changed to *thus*, Gen. *thuris*, and the word *κυπαρισσος* to *cupressus*.) In this essay we have adopted the spelling *Thuja*, which is most frequently used and is most correct.

The copious synonymes which all seem to indicate our tree, are somewhat confused. According to Theophrastus, the precious carvings in the temples of the ancient Greeks were made of the indestructible wood of the *θύα*. In his Natural

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History (Hist. Nat. lib. xiii. cap. xvi.) Plinius quotes Theophrastus, adding the remark that the tree which was called by the Greeks θύον or θύα had already been known to Homer. Clusius says (loco cit.) "*Ad quam arborem veteribus descriptam referenda sit* (*arbor vitæ*), *non facile quis conjiciat*," adding, that it is the belief of most that the arbor vitæ is the θύα of Theophrastus. Bauhinius calls the arbor vitæ *Thuja Theophrasti*, and even in our time the belief is entertained by some that the Thuja Theophrasti is our Thuja.

We do not accede to that opinion. The native region of the Thuja of Theophrastus, according to his own narration, is the territory of Cyrene, in Africa, in the neighborhood of the temple of Jupiter Ammon, whereas our Thuja is a native of North America and Siberia, and could not, therefore, be known to the ancients.

Our own inquiries have led us to assume that the Thuja of Theophrastus is the *Thuja articulata Vahl*, who has shown to a certainty that it is from the Thuja articulata that we obtain sandarac, and not, as has been falsely believed heretofore, from a species of juniper. Shaw has described that tree as a species of cypress, but in the Flora Atlantica by Desfontaines we find it described as a species of Thuja; recently we have obtained the certainty, by the expedition of the French in Algiers and Morocco, that sandarac (el grassa), of which Morocco furnishes from six to seven hundred weight, is derived from the *Thuja articulata*, which the French botanists have found all over the territory of Algiers, and which probably likewise exists in Tunis and Tripoli, the ancient Cyrene.

The terms "*arbor vitæ*, *arbor paradisea*, *arbre de vie*, *tree of life*," were introduced by the French, who were the first to cultivate that tree; Clusius thinks that the term *arbor vitæ*, which was afterwards adopted by all authors, was chosen from the permanent verdure of the tree, *immortalis coma*, and from its strong odor, which was deemed suitable to health.[1] Dioscorides calls our Thuja *Cedrus major;* Bellonius, *Sabina altera;* Targione, *Cupressus arbor vitæ;* Camerarius calls it simply *Thuja*, and Mœnch, *Thuja obtusa.* Linné has been the first to designate it *Thuja occidentalis*, in contradis-

[1] We take this opportunity of observing that the provers of Thuja were by no means reminded of the golden fruits of paradise by the effects which they experienced from that plant; but the consciousness of having exposed their own health in order to relieve the sufferings of their fellow-beings, transports them into that paradise which the accomplishment of a difficult but noble duty is sure to realize in the soul. (M.).

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tinction from the *Thuja orientalis*, which was brought to Europe from the northern parts of China.

The Thuja occidentalis, which is found in the West Indies, in the United States of North America and in Canada, belongs, according to the natural system of plants, to the family of the *Coniferæ Strobilaceæ*, and more particularly to the variety "cypress;" according to Linné's sexual system it belongs to the class *Monoecia*. The common Thuja attains a height of from thirty to forty feet; its branches spread horizontally in the shape of a fan; they are broad and flat; the scales of the leaves are placed over one another like the tiles of a roof; every scale is provided with a gland in the middle of the upper surface, from which the Thuja-oil is secreted. The small cones are egg-shaped, and contain winged grains which are provided with two cotyledons; whereas the varieties of pine are of the class *polycotyledoneæ*. On pressing out the oil from the glands by rubbing the branches, they emit a strong odor.

The native regions of the Thuja are the northern parts of the continent of America, and Siberia. In Germany it is frequently used as an ornament in parks, etc. In upper Austria single Thujas are frequently found on farms.

The Thuja orientalis is distinguished from the Thuja occidentalis by its erect branches, the furrowed scales of its leaves, its unwinged seeds, and an absence of any peculiar odor.

Constituents of the Thuja occidentalis. Besides the ordinary constituents which are found in every plant, the Thuja contains, like most coniferæ, an ethereal oil of a strong odor, and resin which usually accompanies the oil.

The ethereal oil, which exists in a lesser quantity in the Thuja than might be expected from its strong smell, is obtained by distilling the branches of Thuja with water. Recently that oil has been examined and analyzed by Schweizer with great care. It is a mixture of at least two kinds of oil, each of which contains oxygen. It does not contain any carburetted hydrogen. The presence of oxygen distinguishes the oil of Thuja from the oil of Sabina and from turpentine, these two latter oils being free from oxygen and having a similar composition. C. 10 H. 16. The recent oil of Thuja is entirely colorless, but it soon assumes a yellowish color. The oil occasions the peculiar odor of Thuja and possesses an acrid taste. It is lighter than water, is but sparingly soluble in that liquid, but it dissolves readily in alcohol and ether.

The anhydrous oil, the water having been removed in two

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different ways by the chloride of calcium, was found to contain:

C. 77,99	77,25.
H. 10,73	11,11.
O. 11,28	11,64.

CHAPTER II.

Notions about the medicinal virtues of Thuja, existing previous to Hahnemann.

Hahnemann, whose masterly provings have shown us how we ought to dig for the treasures contained in drugs, has been the first to establish the remedial properties of Thuja upon a scientific basis.

His own words in relation to that subject are: "Before me no serious use has ever been made of Thuja in Europe; the remarks of Pertinson and Hermann about the virtues of Thuja are mere speculative theory, according to the fashion of the poor *Therapia generalis.*

Clusius says (l. c.): "*Non dubium est, quin ad pleraque sit utilis (arbor vitæ); nemo vero illius facultates nostro æro prodidit. Cum tamen magnam habeat partium tenuitatem, et amariascula sit, verosimile est digerendi et abstergendi facultate proditam esse.*"

We may excuse the age of Clusius for the desperate conclusion that the Thuja must have a dissolvent and a cleansing power because it is a fine and bitter plant.

Tabernæ Montanus, a dutiful disciple of Galenus, expresses himself as follows: "The taste and odor of Thuja show that it must be of a warm and dry nature; but we do not yet know what it is good for."

Camerarius (Hort., p. 186) expresses himself in a similar manner: "This tree ought to be esteemed highly not only on account of its strong smell, but also on account of its other virtues. A water and an oil may be made out it, which is said to be an excellent remedy against gouty pains, if properly used."

In the Cynosuræ Materiæ Medicæ Pauli Herrmanni, which was continued by Bocclerus (2d edition. Argentorati, 1747, p. 565), the following virtues are ascribed to Thuja: "*Folia* (Thujæ) *resolvunt, exsiccant, flatus pellunt, et sudorem cient. Parkinsonus folia tenera et cruda cum butyro*

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pani illito comesta ad tenaces et viscidos humores expectorandos nonnullis is usu esse scribit."

Krunitz (Encyclop. B. 66) mentions the preceding paragraph (probably from the first edition of Herrmann's Cynosura) in the following words: "The leaves disperse, dry, expel flatulence, and bring out sweat. The wood is cleansing, it is good for the head, excites sweat, resists poison, and is good in diseases of the eyes and ears either in the shape of a powder or decoction."

Krunitz must have been staggered by the unbounded praise which Herrmann bestows upon Thuja, for he adds: "I dare not relate all the marvellous things which Herrmann tells of Thuja."

According to Boerhaave, the water which has been distilled with the branches of Thuja is useful in swellings; according to others, a decoction of the cones is useful in fever and ague.

According to Halm, the natives of America prepare an ointment from the crushed leaves, and rub with it the limbs when affected with pain.

These few quotations, which might be increased, are sufficient to show that, previous to Hahnemann, scarcely any thing was known of the curative virtues of Thuja, and that the supposed remedial properties above mentioned were merely speculative notions.

The Thuja occidentalis has never been used as a regularly established drug by the physicians of the Old School, and is not mentioned in the common works on pharmacology, not even in Vogt's pharmacodynamics.

It is therefore to Hahnemann that the first application of that jewel of a drug to the treatment of disease is exclusively due.

CHAPTER III.

[This chapter contains the provings of Hahnemann and his disciples; as the results of those provings have been fully communicated in the Materia Medica, translated by Dr. Hempel, we omit them here in order to save space. HEMPEL.]

CHAPTER IV.

Results of our own provings of Thuja upon the healthy organism.

This drug has been proved by twenty-six persons, among

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whom eighteen males, five females, and three children. All the provings have been instituted with the tinctures and the attenuations of Thuja, except one, which was instituted with the oil and the branches of Thuja.

A.

Dr. Böhm instituted two provings.

First proving, with the first trituration of the dry branches (1 : 99).

On the 12th of Nov., 1844, Böhm took five grains of the first trituration an hour before breakfast (milk and bread); in the forenoon he experienced slight vertigo and dull pain in the region of the root of the nose, with a feeling of warmth as if a cold would set in; in the evening he experienced several times fleeting stitches in the heel and in the ball of the right foot (the prover had never experienced that sensation before).

No medicine on the 13th.

On the 14th, in the morning, B. took ten grains of the first trituration. In the forenoon he experienced an increased feeling of warmth over the forehead and a pressing in the right temple from without inward; bleeding at the nose in the evening.—On the 15th, in the morning, took ten grains. Experienced drowsiness in the afternoon and evening; restless sleep at night, and *frequent urination.*

Took no medicine on the 16th and 17th.

On the 18th, in the morning, took again ten grains of the first trituration. Experienced an aching pain in the forehead, with obstruction of the nose, from which a quantity of blood was blown in the evening. Experienced moreover intense *stitches in the glans.*

No medicine on the 19th. On the 20th took ten grains in the morning. This produced *confluence of a quantity of saliva in the mouth,* frequent sneezing, bleeding at the nose, and striking drowsiness after dinner.

On the 24th, took again ten grains of the first trituration in the morning: unusual dryness in both nasal cavities, *frequent micturition,* with urging at first as if he had to urinate again all the time, afterwards without urging; fleeting stitches in the heel and big toe of the left foot.

Took no medicine for seven days.

On the first of December B. took twenty grains of the first trituration. The result was: dryness of the palate; slight

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swelling of the tonsils, painful, and inducing frequent deglutition; small white *vesicles* on the tongue, *resembling miliary rash.*

On the 4th of December took another twenty grains. The above-mentioned vesicles on the tongue, which had almost disappeared, reappeared with burning, especially after eating warm food. This was accompanied with painful compression in the region of either malleolus of the left foot, and slight *burning* during urination, the urine being redder than usual.

On the 8th of December, B. took another 20 grains of the first trituration. They produced frequent eructations, as of rancid grease; *desire to urinate;* great drowsiness in the evening.

Another twenty grains on the morning of the 12th. They occasioned rancid eructations, *violent bleeding at the nose* almost every time he blew it, and frequent micturition with *burning* in the fossa navicularis.

Second proving, with the tincture.

After an interval of two months and a half Dr. B. instituted a second proving with the tincture of Thuja. He diluted ten drops of the tincture with six ounces of distilled water, of which he took two tablespoonfuls on the morning of the 3d of March, 1845, before breakfast. After the lapse of two hours he experienced frequent eructations; frequent *urging to urinate* in the daytime. Next day: obstruction of the nose, *which began to bleed* as soon as he attempted to expel air from the nose.

On the morning of the 5th B. took four tablespoonfuls of the above mentioned dilution. The effect was: aching in the forehead with warmth, *frequent urination with urging*, slight *burning* under the sternum, painful pressure in the region of the pressure of the nose. Those symptoms disappeared gradually within three days.

On the morning of the 10th, B. took eight spoonfuls of the same dilution. Result: continued rancid eructations; oppression of the chest; frequent hawking and hacking; continued *burning* along the whole length of the sternum; frequent urination followed by long-continued *urging.*

On the morning of the 15th, B. took ten drops of the undiluted tincture on a lump of sugar. The effects were: rancid eructations (during a space of eight hours); fluent coryza, disturbing the night's rest; weight on the chest; intensely painful stitches in the big toe of the left foot; *frequent micturition with urging.* All those symptoms increased on the day fol-

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lowing, decreased again afterwards, and disappeared entirely in a few days.

It is to be regretted that B., whose organism seemed to be so susceptible to the effects of Thuja, did not prove the drug with more energy and perseverance.

B.

Doctor Fröhlich has proved the Thuja on himself, and on one girl and two rabbits.

I.

F.'S PROVINGS OF THE THUJA ON HIMSELF.

F. has instituted six separate provings with Thuja.

First proving, with the juice of the chewed branches of Thuja.

F. began his proving on the 20th of December, 1844, with chewing a few recent branches and swallowing the juice. He did not experience any change in his feelings.

On the morning of the 21st he repeated the experiment, and experienced, in the afternoon, protrusion of the hæmorrhoidal vessels, with stinging in those vessels when walking; in the evening, ten hours after swallowing the juice, he felt a tearing in the left knee-joint, extending into the middle of the calf, commencing while sitting and lasting only a short while.

On the morning of the 22d of December the experiment was made a third time. Soon after he felt a continuous, digging and burning pain in two upper hollow molares of the right side; in the evening, ten hours after swallowing the juice, he experienced short but frequently returning paroxysms of a lancinating pain from the left acetabulum down to the calf, deep in the bone (while walking in the street). The toothache was removed by a dose of Merc. sol. 3.

No chewing on the 23d, lest the toothache should occur again. Nevertheless the toothache returned whenever he entered a warm room from the street and remained there a little while. He tried the nitrate of silver 6 with but temporary success; cold water was the only palliative for the pain when it was very violent. It disappeared gradually in some days.

Second experiment, with the third attenuation.

On the 2d of January F. took three drops of Thuja 3 in a

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spoonful of water, before breakfast. The symptoms of the former proving had entirely ceased for a few days past. No result.

On the 5th, in the morning, he took six drops of the same preparation. The results were: *a painful stitch through the centre of the left eye and commencing in the centre of the brain;* a few stitches in the external tuberosity of the left thigh when walking; the above-mentioned toothache again made its appearance, but only under similar circumstances.

On the 12th F. took twelve drops in a tumblerful of water. After walking in the open air for half an hour, he entered a warm room, where the above-described toothache again made its appearance, but soon abated, and disappeared again after using cold water. This symptom returned as often as F. entered a closed apartment, whether heated or no, and remained in it for a while. The toothache was diminished immediately by inhaling the open air for a few moments. On this same day the following symptoms were observed: drawing *tension in the nape of the neck* (more on the left side), recurring several times; weak feeling in the chest; frequent emission of flatulence which had not much smell; drawing, and *fleeting deep stitches* in various parts of the body.[1]

No medicine was taken from the 8th to the 19th; the toothache continued during all this time under the circumstances indicated above, although several remedies, such as Merc. sol., Camphora, Sabina and Nux were taken to remove it.

Third proving, with the tincture.

On the 22d of January, after the toothache had subsided entirely, F. took twenty drops of the tincture in a glass of water. That same forenoon the toothache returned ten minutes after having entered a room without fire; after dinner he experienced a piercing stitch in the soft region below the left ribs, and a continuing squeezing-sticking pain in the concha of the left ear.

On the morning of the 23d F. took thirty drops. At noon he was unable to distinguish the taste of the soup, and could not tell what soup he was eating (it was very dark). Nor was he able to discern the vegetables by the taste; black coffee tasted to him like water, without aroma.

On the 24th, took forty drops: stitches in the region of the liver when sitting.

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[1] These fleeting stitches resemble slight electric shocks. (M.)

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On the 25th, took the same dose, which produced a slight colicky pain in the small intestines and a few stitches in the right thumb.

On the 26th another forty drops: painful stitches in the inner side of the left knee-joint when standing.

On the 27th, took sixty drops. In the forenoon he experienced a few deep stitches in the soft parts below the left ribs.

On the 28th, he took eighty drops. In the forenoon: pinching pain in the stomach, and a feeling of fulness and of being bruised in the chest under the sternum; the last symptom had been observed for a few days past.

No Thuja was taken from the 29th of January to the 3d of February. During this period the following symptoms were observed: single deep stitches in the soft parts below the left and right ribs; gnawing-stinging pain in the stomach (coming on in bed and going off after rising); drawing-sticking pain in the head of the left femur; dulness of the sense of taste and smell.

On the 3d of February F. took one hundred drops of the tincture in a tumblerful of water before breakfast. An hour after he experienced a single stitch through the lower portion of the lungs from behind forward. This was accompanied with a bruised sensation in the chest and dulness of the head, sad mood and discouragement, being the same in the open air and in the room. Afterwards the well-known toothache made again its appearance with the usual paroxysms, and in the evening, while sitting in a crowded theatre, he experienced a drawing-sticking pain in the right forearm, extending from the elbow to the wrist-joint.

On the 4th he experienced a painful stitch through the occiput from above downward.

On the 5th the troublesome toothache came on again as often as F. entered a closed apartment from the open air, and continued until the 23d of February. During that period F. had several characteristic symptoms of Thuja, especially in the limbs, but which were not noted down on account of several remedies, such as Sabina, Rhus, Mezereum, having been administered against the toothache with but a passing effect.

Fourth proving, with the eleventh potency.

On the 4th of April, before breakfast, F. took twenty drops of the 11th potency, in three ounces of distilled water. While proving the attenuations, he avoided every kind of spirituous beverage, and took but very plain nourishment.

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On the 6th he felt vertigo with fulness in the head, and the hands became easily stiff and tired when moving them.

On the 7th, before breakfast, he took twelve drops of the 11th potency. Result: in the forenoon, while walking in the street, he felt a few deep stitches in the right groin; afterwards he felt a violent drawing tearing from the left elbow-joint as far as the two middle fingers; vertigo at home, with vanishing of the letters when reading, and a continued digging pain in two upper hollow molares of the right side, relieved by cold water, but increased by warm soup and tobacco-smoke.

On the 8th, F. feeling *debilitated all over as by fatigue, and gloomy*, he took a little wine, after which all the above symptoms disappeared.

Fifth proving, with the tincture.

On the 22d of April, after all the symptoms of Thuja had ceased, and the carious teeth had become entirely free from pain, F. took eighty drops of the tincture before breakfast, after which he swallowed a glass of water. No effects were observed either this or the next day. On the 24th and on the 26th he took one hundred drops each day. On the latter day the prover experienced considerable dulness of the head and *seeing through mist;* on the dorsum of the right foot a small blotch was discovered with a *red areola*, which impeded the walking in boots.

On the 28th took another hundred drops. The blotch is diminishing, and nothing remains of it except a dark-red, somewhat elevated spot with a lighter areola, still impeding walking. General weariness during the day, as if he had not gone to bed all night. These symptoms are accompanied by dulness of the head, *sad mood*, dulness of taste, *indistinct sight*, and bad sunken appearance.

On the 30th F. took another hundred drops. In the forenoon: dulness of the head, with vanishing of objects when attempting to fix them. In the afternoon: painful *stiffness of the nape of the neck* when moving the head, bruised sensation in the chest, dulness of taste and *very gloomy mood*. The efflorescence on the dorsum of the foot began to subside.

On the 2d of May he took another hundred drops, without eliciting any new symptoms.

No medicine was taken on the 3d and 4th of May; during this period F. observed the following symptoms: dulness and feeling of fulness in the head, with ill-humor and drowsiness. After a siesta of three quarters of an hour: vertigo so

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that he was scarcely able to walk without holding on to something, great sensitiveness of the skin to cool air.

On the 5th F. took the last hundred drops. Result: lancinating tearing in the right tarsal joint in the forenoon, while walking. Another *little blotch* makes its appearance in the still existing red spot on the dorsum of the right foot, impeding the walking very much.

On the 6th, in the morning, in bed: sticking beating in the right hand extending as far as the tips of the fingers and in the anterior half of the right foot. Towards noon: aching pain in the head with pressure in both eyes; accompanied with gastric uneasiness and red urine. F. had to lie down on account of his increasing debility, and was not able to fall asleep under a couple of hours.

On the 7th, he felt a general debility as from fatigue; feeling of fulness in the head; a paralytic *burning sensation*, which had been felt already for some days past in all the *muscles* of the forearm, and which extended as far as the tips of the fingers, was particularly troublesome (coming on when moving the arm, going off in rest). In the afternoon and evening he experiences a feeling of coldness through the back, with debility and stiffness in all the limbs; dulness of the head; sticking pain in the left patella when going up stairs; debility as if broken in the small of the back and feet, and a feeling of weakness in the chest.

On the 8th, after having spent a night full of dreams, F. woke considerably improved; the head continued dull, and he was attacked with turns of vertigo after talking a little too long; at noon he felt *chilly* all over, especially on the extremities; he was *ill-humored* and *fidgety*, and had canine hunger without thirst. A small quantity of wine which he took at dinner without relishing it, aggravated the headache very much, and smoking increased it to vertigo.[1] At eight o'clock in the evening: *aching pain*, especially in the *frontal eminences* and temples; vertigo when walking; bruised pain in the shoulder joints and upper arms; weak feeling in the chest with pressure under the sternum and difficulty of breathing, especially while going up stairs.

On the 9th, F. felt better in every respect, all the symptoms disappeared gradually, except the weak feeling in the chest and the difficulty of breathing on going up stairs, which did not disappear entirely till the end of the month.

[1] This aggravation seems to be owing to the meal rather than the wine.

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Sixth experiment, with the recent juice.

On the 21st of May, F. swallowed before breakfast a tablespoonful of recently expressed juice, obtained by stamping the branches of Thuja and pouring upon them a mixture of equal quantities of distilled water and alcohol. Of this disgusting juice F. took another tablespoonful on the first and second of June, and two tablespoonfuls on the third.

On the last day he experienced in the forenoon frequent paroxysms of tearing and sticking in both hands, which became so violent in the middle of the right ulna while he was writing, that he had to give it up. In the afternoon, while driving in a carriage, he experienced a very violent tearing in the left forearm, which was especially violent in the epicondyle of the humerus, that region becoming very sensitive to the touch. Moreover, *prickings in the fingers* of the same hands. These symptoms continued while driving, and did not abate until F. got into a profuse perspiration in the evening, while in a crowded theatre. Upon moving the hand quickly and strongly he felt *a burning* pain in all the *muscles* of the forearm.

On the 4th, F. took another two tablespoonfuls of the recent juice, which did not produce any new symptoms. The tearing pain in the anterior tuberosity of the left humerus continued, was increased by motion, and was heightened to a burning pain by contact, especially after the painful region of the arm had been knocked against something slightly. The red spot on the dorsum of the foot impeded the walking very much. Under the sternum he experienced an oppression with a bruised sensation in the chest. These symptoms were accompanied by frequent hawking of mucus, dulness of taste, with great appetite and swelling of the hæmorrhoidal veins.

On the 5th the following symptoms were observed: sensitiveness of the anterior tuberosity of the left upper arm, especially when touched, in the afternoon; feeling of fulness in the head with drawing pain in the nape of the neck; feeling of weakness in the chest; painful stiffness in the left forearm extending as far as the fingers, and impeding motion; pressing sensation in the *turgid hæmorrhoidal veins;* stinging-burning pain in the external tuberosity of the left tibia (coming on when sitting and increased by pressure). All these symptoms disappeared gradually on the following days except the great sensitiveness in the tuberosity of the humerus, which seemed to become more and more circumscribed every day, but which disappeared entirely only after a week. The *hæmorrhoidal congestion* was the last to yield.

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II.

FRÖHLICH'S PROVING OF THUJA ON AN UNMARRIED FEMALE.

First proving, with the third potency.

Caroline Philipp, of forty-five years, the same who assisted in proving Colocynthis, took ten pellets of Thuja, three on the 14th of November, 1844, before breakfast. Two hours after that she experienced a *drawing* from the left axilla as far as the elbow-joint; afterwards a *drawing* along the vertebral column and in the calves, with a feeling of weakness in the feet.

On the 13th, the prover took another ten pellets, which elicited the following symptoms: *drawing* from the right wrist-joint as far as the tips of the fingers, and from the right calf as far as the malleoli, with the sensation as if that foot were lame; afterwards a drawing from the right elbow as far as the wrist-joint; afterwards a quickly passing feeling of lameness in both thighs as far as the knees.

On the 14th, after another ten pellets, she experienced a weakness in the knees and a decrease of appetite.

No medicine was taken on the 15th, 16th, and 17th; during the first two days the above symptoms were yet slightly felt.

From the 18th to the 23d, Caroline took ten pellets every day, and observed the following symptoms: *drawing sticking* in the right upper arm as far as the elbow-joint, and in the right thigh as far as the knee; *sticking* in the right forearm as far as the finger-joints; *drawing* in both scapulæ in the direction of *the nape of the neck*, in both legs from the knees to the malleoli, and at the same time in both forearms from the elbows to the wrist-joints. These symptoms generally appeared three or four hours after taking the drug, and lasted from ten to sixteen hours.

The prover discontinued the medicine until the 26th of November, when she took another ten pellets. On that day she experienced a *sticking* in the left thigh as far as the knee, *single* stitches in the left tarsal joint, and in the evening *drawing* in both thighs.

On the 27th and 28th of the same month, she again took ten pellets each time, after which she experienced a tearing in the left upper arm, afterwards in the left leg; sticking in the left wrist-joint extending as far as the tip of the index-finger; *drawing* in the left calf, afterwards in the right forearm from the elbow as far as the wrist-joint.

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On the 5th, 6th, and 10th of December, she took ten pellets each time without experiencing any new symptoms. The same drawing and sticking was experienced in various parts of the limbs. On the inner surface of the left forearm a *red, round, itching spot* (of what size?—M.) was observed with *white vesicles* raised upon it, which burst, poured out a yellowish lymph, and left a yellowish crust behind.

Second proving, with the two hundred and second potency.

On the 12th of December, before breakfast, the prover took ten pellets of Thuja 202, without knowing that the preparation was different from the former. Results: *drawing* in both hands and feet, afterwards only in the forearms as far as the wrist-joints, and *sticking* in both sides of the chest.

On the 13th, she took another ten pellets, with the same result.

On the 19th and 20th, she took the usual number of pellets, and observed the following symptoms, beside those mentioned above: *drawing in both hips* from without inward and from above downward toward the *ossa pubis*. After an interval of twelve days, the prover took ten pellets of Thuja 202 on each of the following days: 2d, 3d, 4th, 6th, 7th, and 9th of January, 1845. After every dose she experienced *tearing, drawing* or *sticking* sensations, accompanied with repeated attacks of vertigo, and *a feeling of stiffness in the feet* and back, as far *as the nape of the neck*.

The prover having taken cold, in consequence of which she was attacked with toothache and a swelling of the cheek, the experiments were concluded. F. mentions that the prover had frequently asserted with great positiveness, that she had experienced with more intensity all her former symptoms ever since the 12th of December, when she took the first dose of Thuja 202. We ought to state that the prover observed a very plain diet during the whole period of the proving.

From the results of the two last provings, Dr. Frölich draws the following inferences:

1. The Thuja affects specifically the serous and fibrous tissues.

2. It frequently shows its effects in the extremities, and mostly from joint to joint.

3. The symptoms of Thuja produced by the different potencies remain much more similar to one another than is the case with other drugs.

4. The highest potencies are capable of exercising a patho-

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genetic action upon the body. Dr. F. is by no means astonished at this, inasmuch as the prover lived very plainly, was delicately organized, and inasmuch as the Doctor had seen decided effects of the highest potencies in a number of patients.'

(To be continued.)

GONORRHŒA.

BY CROSERIO.

TRANSLATED BY JAMES KITCHEN, M. D., OF PHILADELPHIA.

(From the Journal de la Medicine Homœopathique.)

It is a common question, How do you treat Gonorrhœa? Most practitioners find that it is long, and occasionally very difficult. Accustomed, for the most part, to the prompt effects of Copaiva, and of caustic injections, our recently converted brethren complain that they find no homœopathic remedies nearly so efficacious. God be thanked they do not; I say God be thanked, for though our means have not generally an effect as prompt, their employment is neither followed by consequences nearly so severe as those left by allopathic measures on the alimentary canal, in the urinary passages, urethra, prostate, bladder, and even on the muscular tissues and articulations; homœopathy produces a much surer cure than allopathy. It would be superfluous to describe to you the sad Iliad of evils following the treatment, called rational, having it so often before your eyes in the hospitals of our city.

All authors have divided Gonorrhœa into acute and chronic; in the meaning given by Hahnemann to the word chronic, this division becomes more important than the old school supposed; for we should ask, Are there really acute Gonorrhœas? that is to say, Are there Gonorrhœas produced by virus, and others that are not so produced?

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[1] Until we shall be in possession of a greater amount of facts relatively to the efficacy of the highest potencies, I shall feel disposed to believe that the highest potencies are only suitable for highly sensitive nerves. (M.)

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This question, in controversy for a long time, among the writers who have occupied themselves with the subject, has been at last resolved in the affirmative by common consent. If Broussais and his followers have, for a long time, maintained the non-virulence of Gonorrhœa, his principal disciples have at last agreed, that there are cases, sufficiently numerous, where a general affection of the organism had only been preceded by a simple Gonorrhœa. Often, it is true, no sign, no indication reveals this difference during the acute stage; nevertheless, the complications attending it, the excrescences, the buboes, the venereal ulcerations, clearly announce the nature of the virus.

This may be either syphilitic, sycosic or psoric. Much dispute has taken place to discover whether Gonorrhœa had not a peculiar virus. And this question is not yet resolved according to my view; for if we examine the ease with which the gonorrhœal flux is communicated, we may be tempted to admit its existence, and yet we all know with what facility the diseases of the mucous membranes communicate with each other; coryza, bronchitis are examples, and we cannot admit a distinct virus for each of these diseases.

With allopathic practitioners these questions are of high interest—but not so with the homœopathic, as they should always consider the entire system, even in the most supposed simple cases, so that I shall spare my readers with longer developments on these controverted points, and pass at once to the treatment, which divides itself into *preventive* and *curative*.

1. *Preventive Treatment.* Should an individual be exposed to a doubtful contact, he should immediately clean himself with water and soap, and take, as soon as possible, *Merc.* 30 every night during three or four days. He should live plainly and avoid all excitement. This counsel has succeeded with all to whom I have given it, and who have strictly followed it. What led to the choice of this preservative were the symptoms of the remedy, which no other presents so fully. The symptoms of Gonorrhœa are: continual ineffectual efforts to urinate; inclination to urinate day and night, at least every hour; burning in the urethra, every time he begins to urinate; continual desire to urinate, at least every ten minutes; he only passes a few drops at a time; when he desires to urinate, he cannot hold his water; burning in the urethra during the emission of water; cutting pains in the morning when urinating; when urinating, pains burning, then prickling; burning in urinating; he passes blood by the urethra; beating in the urethra, pricking at the end of the canal during emission of water; sensation

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of obtuse spots in the urethra; cutting, biting pain all along the urethra, especially at the orifice, during the emission of the last drop of water; at the same time he cannot urinate quickly enough, so that some urine passes out involuntarily before beginning; drawing lancinations all the time he is urinating; itching of the glans; pricking in the glans after urinating; swelling of the anterior portion of the urethra with matter between the glans and prepuce, which is red and painful to the touch, also during motion, &c. But what is chiefly indicative is, the general symptoms of this remedy, the excessive weakness and uneasiness. These symptoms which so fully point out its action on the nervous system, are felt by sensitive and attentive persons, who are exposed to the contagion, before the appearance of local symptoms.

2. *Curative Treatment.* Fortunately, the homœopath, in the treatment of Gonorrhœa, is not influenced by theoretical ideas on the virus of this disease and its nature. The remedies acting on the whole organism by their dynamic virtue, they cannot cure the disease but by destroying the cause. Moreover, the majority and the most powerful being antipsorics, there is no fear that a repercussion can take place, as so often happens when the perturbing allopathic practice is resorted to.

We should scarcely regard the division of the disease into acute and chronic or secondary, were this last not always the certain sign of an internal virus; for, the most frequently, we cannot have other indications than the complete sketch of symptoms, composed of the previous condition of the patient, of his physical and moral constitution, and of the actual symptoms, general and local.

In the acute stage, as there is a marked inflammatory condition, we should, as far as we are able, keep away all hygienic causes capable of maintaining it; all exciting drinks and aliments should be prohibited; he should live chiefly on farinaceous articles; pure water, milk, or almond emulsion; slightly diuretic ptisans, such as milk and water, whey, are injurious.

Absolute repose is of great utility to a prompt cure; at least all fatigue should be avoided, also reading, conversations, &c. which might in any way produce lascivious thoughts. The greatest cleanliness, frequent lotions with warm water are necessary. The penis must be enveloped in linen rags, and sustained by a suspensory. As soon as the patient presents himself, and there appears to be the least sign of a local affection, such as a slight running or itching, or even a few transient prickings, or itching in the fossa navicularis, I would give Acon.

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30 in a tumbler of water, a teaspoonful every two or three hours; it is the only means that I have yet found to cut short the disease, and to prevent its development. Unfortunately we don't see the cases at this stage; they suppose it is merely a passing irritation, and wait till the running and pain leave no doubt on the subject; in this stage Aconite is no longer the remedy; we must have recourse to remedies which offer symptoms applicable to this stage; these are *Merc.*, *Cannabis*, *Acid. Nitric.*, *Thuja*, *Puls.*, *Nux vom.*, and *Petroleum.* According to the symptoms we must choose the remedy, and if our choice is a good one, the disease will not exceed six weeks, and sometimes only one will be required to cure it.

When there is a mucous discharge, with or without pain in urinating, or when the end of the urethra and prepuce are inflamed and painful, the urine abundant and frequent, *Cannabis* is indicated. Many physicians advise to give several drops of the mother tincture, morn and night; but Hahnemann had already remarked that, "the highest dynamizations, and even the very highest, develop the medicinal virtues of this plant to a much greater degree." So that during the last years of his life he always gave the 30th, dissolved successively in two glasses of water. The experience of my illustrious friend, Dr. Gross, proves how great and far-sighted was the genius of our great master, for he has proved that with a single dose of the 200 of *Cannabis*, he succeeds better than with the mother tincture, repeated morn and night; besides, Dr. Hartmann advises to let the *Cannabis* act eight days before repeating it; and if we fail so often in the cure of this affection, it is from too frequently repeating the dose of the medicine.

Mercury, as I have already mentioned, has yet still greater homœopathicity with the disease than the preceding remedy; it is especially preferable when the local inflammatory symptoms are highly developed, either by the neglect of the patient, or by bad treatment; also, when the discharge is bloody, or pure blood is passed, when the erections are very painful or chordee takes place, swollen prepuce, &c. In such cases, if there is fever, one dose of *Aconite* 30 will calm the symptoms in one night; then *Merc.* 30 may be given and repeated in three days, according to circumstances; but as soon as an evident amelioration takes place, all medicine must be suspended. Dr. Stern, physician to the Hospital at Miskolty, in Hungary, uses no other medicine but *Merc.* in the cure of Acute Gonorrhœa, and since I have made more use of it, I have had more success.

There are different opinions as to the dose: the specifists

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chiefly, and even respectable homœopathists, advise never to go above the 3d trituration; but Hahnemann never used, in such cases, lower than the 30th; and Gross has proved that a single dose of the 200th can entirely cure the disease, if it is permitted to act a suitable time. I cannot too much caution you against the too frequent repetition of doses and change of medicines.

Thuja is chiefly indicated when there are condylomata, also in phymosis and paraphymosis, when the patient experiences the feeling of a liquid passing along the urethra, drop by drop, with many erections at night. This remedy is, above all, beneficial in the female sex, in which Cannabis is of little value; it should be given in the 30th.

Pulsatilla is suitable to lymphatic, timid constitutions, in whom the pain on urinating is trifling, and accompanied or not with vesical tension; also, when the discharge is white and thick and involuntary emission of urine, *Puls.* 30 generally is alone equal to the cure; but is above all indispensable in swelled testicle and ophthalmia. As we shall learn further on, it is also useful in the female.

Nux vom. is applicable when, after the discharge has ceased, there is a distressing tenesm of the urethra, accompanied with frequent desire to urinate, with retention or emission of a very small quantity at a time; *Nux* 30 in a tumbler of water, a teaspoonful at a dose, every six or twelve hours, affords the greatest relief, especially should there be a hemorrhoidal tendency.

Sulphur.—When the medicines above enumerated have acted their parts, and suitable regimen attended to, the disease generally ceases. If, however, a discharge of a pale color, or viscous or watery consistence, should remain, with little or no pain in urinating, one dose of *Sulph.* 30 generally suffices; I, however, think that 800 would be preferable, judging from the experience of the most enlightened homœopaths.

Cantharis.—It sometimes happens that violent pains are developed in the region of the bladder, chiefly at the neck, accompanied with retention of urine, flow of blood, priapism, anguish, agitation, burning, excessive thirst, etc. In such cases the highest potence (400) of *Cantharis* at once calms all, and the treatment should then be terminated according to symptoms remaining.

Petroselinum.—This remedy has not answered the praise bestowed on it by our friends at Versailles. Given at the beginning of the disease, it bears no comparison to *Cannabis* or *Mercury*. It is now only used in cases of tenesmus, and even

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here the preceding remedies are much more effectual. I have entirely given up the use of it.

Acid nitric.—In patients who have taken Mercury allopathically, or where the disease is complicated with excrescences or superficial ulcerations of the glands or throat, or even a chronic inflammation of this part, *Ac. nitric* 30 may be employed with success.

CHRONIC GONORRHŒA.

I shall give this name to Gonorrhœa when, all pain having ceased, the discharge continues, after six weeks or two months' treatment. I have said, in the beginning of this paper, that I did not hold to the explanation of the immortal Treatise of Chronic Diseases. The reason is, that I consider the acute stage as being also itself the effect, in most cases, of an internal virus.

Nevertheless, I have admitted this division because each one claims in preference a series of particular medicines; thus, in this condition or stage of Gonorrhœa, *Sulph.*, *Sepia*, *Lycop.*, *Natr. mur.*, *Agnus cast.*, *Clemat.*, to which we may add *Merc.*, *Cannab.*, *Puls.*, *Nux*, will always perform a complete cure, provided the disease has not been poisoned by astringent or caustic injections or bougies, or by too heavy doses of Mercury. In the choice of medicines to combat this disease, so poor in local symptoms, we can only direct our choice by the general condition of the patient, his physical and moral constitution, his preceding diseases, and his actual feelings.

Sulphur is to chronic Gonorrhœa what Mercury and Cannabis are to the acute. When the discharge is serous, painless, with itching in the urethra, *Sulph.* 30, or, better still, 400, one dose, will often be sufficient to cure, especially if there is constipation, or if there are symptoms of psora or of a preceding abuse of Mercury.

Sepia.—Where *Sulph.* does not cure, we should alternate it with *Sepia* every two or three weeks. Sepia is especially serviceable in patients of a sad, melancholy turn, delicate and nervous.

Lycopodium is suitable when the urine is scanty, when there is a yellow or brick-dust sediment, pains in the kidneys, and, above all, when the chronic Gonorrhœa is the consequence of a retrocession of gout or rheumatism; especially if the character of the patient is mild and timid. The dose should be of the highest potence, and be left, as with *Sepia*, to act a length of time.

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Acid nitric.—I will add to what I have said in relation to its administration in the acute stage, that of the diminution in the volume of the stream of urine.

Clematis.—I have oftentimes found this remedy useful in the strictures of the urethra, as proved by the bougie; it is of course of great value when the discharge is kept up by this cause, the urine flowing drop by drop, without pain, with frequent painful pollutions, etc.

Agnus castus.—This is valuable when there is a complete absence of erections and even of venereal desires. I cured a case of six months' standing by a single dose 30.

Natrum muriat.—A young banker at Cologne applied to Stapf. He advised him to put a pinch of common salt in a tumbler of water, and drink it every morning. In three weeks he was well. Dr. Stapf says he never gives any thing else. I cite this fact to prove the efficacy of this article in these cases. Its high dynamizations are employed advantageously when the urine is frequent and very abundant, the itching excessive at the orifice of the urethra, or when there is prickling; also when there is a whitish or yellowish mucous discharge, the itching excessive in the glans and penis, and when the gen ral condition of the patient answers to this remedy.

As to the circumstances which exact the use of *Merc.*, *Cannabis*, *Nux*, and *Puls.*, in chronic gonorrhœa, I will add to what I have said of their use in the acute stage, that they may be of great utility as intermediary remedies. and indeed, from the powers they have received from the dynamizations of Gross, I doubt not but that their employment will be followed by the happiest results, even in the chronic stage. I have seen the least good result from the use of *Capsicum*, notwithstanding the laudations of Hartmann and Hering; I have never given *Ferrum* a trial.

Shall I mention *Gonorrhœin*, recommended a long time ago, then entirely abandoned, and again brought forward by Dr. Stern, at the Central Homœopathic Society at Mecklenburg in August, as producing very satisfactory results, when other medicines failed him. I prepared some very carefully, as high as the 30th, but failed with it entirely. Isopathy is yet wrapt up in darkness; like animal magnetism, its employment is yet without rules and principles founded on disinterested experience and observation.

TREATMENT OF CONDITIONS ACCOMPANYING OR TAKING THE PLACE OF GONORRHŒA.

Bubo, when recent, and there is no fluctuation, yields

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readily to *Merc.*, which is the surest remedy; sometimes, however, it is useful to alternate it with a dose of *Thuja*. When fluctuation is evident, we should make use of *Sulph.* or *Hepar Sulph.;* I have occasionally resolved them even in that stage by their aid; if very large, *Silicea* is preferable. These medicines generally bring the tumor to an opening without pain, and this should always be preferred to opening it with a lancet. If it is hard and scirrhous, we should alternate *Clematis* with *Sulph.* How mild, prompt and sure the cure is by these means! We never see phagedenic ulcerations, carrying off half of the penis, nor gangrene threatening the very life of the patient, as in the abuse of Mercury. If we should be called to a bubo in a gangrenous condition, we should give *Arsenic*, in the highest dynamizations, using only warm lotions to the part; after which *Silicea* or *Sulph.*, according to circumstances.

Orchitis.—Puls. is an almost infallible specific. If any hardness remains, *Arnica*, *Clematis*. A suspensory should be used.

Cystitis and *Ischuria.*—Sharp pains in the region of the bladder and kidneys, with impossibility or difficulty to urinate and frequent desire, especially if the urine is watery or red or bloody, if there is tenesm, pains in the testicles, a general dry heat, &c., we should give Cantharides, in the highest potence. After the most acute symptoms have subsided, *Merc.* or *Nux* are indicated, this last especially if there are any remains of irritation at the neck of the bladder, such as frequent desire to urinate and constipation with tenesmus; *Merc.* is called for if the symptoms have their seat especially in the urethra.

Ophthalmia.—This dreadful gonorrhœal condition exacts the most prompt and best directed care to prevent the utter disorganization of the eye. Aconite is here the first remedy, if we are called before the eye is destroyed. The acute, deep pain, pulsation, swelling, redness of the eyelids and conjunctiva, weeping, &c., all call for this medicine. As to the dose, we have thus far employed the lower dilutions, believing them to be the most proper in such rapid cases; but according to cases reported by the most experienced practitioners in relation to the 200th dynamization, and from what I myself have seen in analogous cases, I should not hesitate to have recourse to this potence, precisely because the case is very acute and requires prompt relief.

After the action of Aconite, should the muco-purulent discharge of the conjunctiva and eyelids be very abundant, *Mercury* may be given successfully. Should there, on the other hand, be dryness, *Belladonna* is the remedy; if this

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should not act promptly, *Sulph.* in the highest potence. In such cases this medicine is the most powerful antiphlogistic.

If we were called at the commencement of the metastasis, before the inflammation was highly developed, *Pulsat.* given at once might arrest it and reproduce the discharge in its primitive seat. The most severe rules of hygiene must be attended to, such especially as absence of light, a severe diet and rest.

Prostatitis.—Difficulty and even impossibility of urinating, pain and tension in the perinæum, weight in the rectum, which should be examined with the index finger. If the tumor is large and the emission of urine impossible, we should give *Puls.* But if, after some hours, no urine passes, we must introduce the catheter of gum elastic and continue the treatment with *Puls.*, which is the medicine which offers in its pathogenesis the greatest number of symptoms in accordance with this disease; *Sulph.* and *Thuja* come next, then *Petrol.* and *Cantharis.*

Rheumatism.—Following the imprudent suppression of gonorrhœa, sometimes articular rheumatism comes on, especially of the knees, the inferior extremities and loins; here again *Puls.* is the leading remedy; if not sufficient, we must have recourse to others beneficial in rheumatic affections.

TWO CASES OF ANGINA MEMBRANACEA IN WHICH BI-CHROM. POTASS. WAS USED.

BY JAMES KITCHEN, M. D., PHILADELPHIA.

As this disease is one of the most formidable we meet with, it is the duty of practitioners, on the trial of new remedies recommended for its cure, to give a transcript of such cases in which they may have used them—with these ideas I send you an account of the following cases:—

1. Alberson, aged six years, a thin, unhealthy boy from his birth, of poor parents, was taken with fever and dry hoarse cough three days before I saw him, which was on Oct. 14. He had all the symptoms of Angina Membranacea, for which I gave Spong. and Acon., in alternation, at short intervals. Next day he was no better, and the parents wishing to give him an emetic, I consented, believing that no treatment could be of

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any avail. This proving abortive, vomiting the child but imperfectly, I then administered the Bi-Chrom. Potass. 6 in water, a teaspoonful every hour. This evidently had a better effect than any of the other remedies; the cough was slightly loosened, and he occasionally, with great agony, expectorated shreds of yellow mucus tinged with blood, and a bloody speck here and there. Owing to the ignorance and dissatisfaction of the parents, this remedy was only tried about twelve hours, when a resort was had again to emetics, and the child died the third day after my first visit.

2. Boggs, slightly made but healthy female, light complexion, eighteen months old, had had a dry cough three or four days, having suffered under the whooping cough previously. Oct. 31, was called to see her at 9 A. M., but owing to business did not get to the house till noon. The father told me that the attack commenced the previous evening at 9 o'clock, and that she was croupy all night. I considered her in a very dangerous condition, and told the parents of my fears as to the result. As they were intelligent, and put every confidence in me, and in homœopathy, I commenced the treatment, I confess, with a great degree of mistrust as to the means. I gave Spong. and Acon. 3, in alternation, every ½ hour. At 6 P. M. there was less fever, but the intense drawing in of the breath, shrill cough, &c., were the same. I now gave Tart. Antim., which I have frequently found to promote the secretion of bronchial and tracheal mucus in these cases, and produce relief—the dose was a teaspoonful of a saturated solution in half a tumbler of water, of which a teaspoonful was to be given according to circumstances. Sometimes it vomits, but not always. Nov. 1, at 3 o'clock, A. M., I was called up with the disagreeable intelligence that the child was dying, and that the parents wished me to come around. I complied, of course. My own opinion, on looking at the patient, coincided with that of the by-standers. Nevertheless, I dissolved some Bi-Chrom. Potass. 6 in half a tumbler of water, and put a teaspoonful into the mouth of the child; with agony it was swallowed. I remained till 4 o'clock, and then went home, never more expecting to see that child a breathing one. To my surprise, however, on driving to the house at 9 o'clock, I found her alive, but on examination, still in a very bad condition. One symptom was favorable; some yellow sputa had been ejected by coughing, which she endeavored to restrain as much as possible; here was something to lay hold of; possibly only a straw; still it was encouraging to go on; the other symptoms were the same. At noon, all again was obscured; the child appeared worse;

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the breathing intense, alæ nasi flapping, white circle around the mouth, eyes sunk, disposition to sleep. I got off with as good a grace as possible, with no view of returning, as I had no hopes left, and it is not a pleasant thing to be among mourners. As I was sitting in my office at 6 P. M., the father entered, as I supposed to demand a certificate, but what was my surprise, when he told me that his daughter was much relieved, and had eaten a piece of bread, the first morsel of food for three days. At 9 I called to see her; all the symptoms had wonderfully abated, and she had had some trifling expectoration and several passages. Nov. 2.—She is improving, and a distinct flapping, on inspiration and expiration, can be heard in the windpipe, no doubt the anginous membrane in a loosened state; this disappeared in the course of twenty-four hours, and free expectoration took place, no doubt softening and carrying off this membranaceous exsudation in the larynx and trachea. This was certainly a wonderful escape, and as it was made under the use of the Bi-Chromate, the question is, whether it was attributable to that, or whether it was by the sole efforts of the system. A solitary case proves nothing. I put not confidence in solitary cases. I want evidence of many, very many.

With such feelings, I call upon the profession to try the remedy, and let us know the result. It is important that it should be tried, as we have no reliable remedy in this disease. Nearly every case proves fatal. We hope, then, we shall have it tried, faithfully tried, and the results published.

COPPER POISONING.

RELATED BY CROSERIO.

TRANSLATED BY JAMES KITCHEN, M. D.

From the Journal de la Medicine Homœopathique.

M. C., forty-five years old, with his son, aged sixteen, eat artichokes, which had been preserved in a copper vessel. The young man, who had only eaten the leaves, was taken, immediately after dinner, with violent colicky pains in the stomach and bowels, quickly followed by vomiting the food eaten and liquid stools, which continued a part of the night; he then slept and awoke in the morning quite relieved.

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M. C., of a very nervous and irritable constitution, had been in 1832 very seriously indisposed for ten months from an attack of cholera, since which he has been so sensitive that every time he is exposed to any kind of disease, epidemic or endemic, he is sure to be the first one affected. He is of a regular and sober habit.

After dinner he was taken likewise with colic followed by evacuations of diarrhœal stools, for which he only took some fresh water in which he had mixed a small quantity of meal. The night was good, with deep sleep, and at morn he felt a kind of uneasiness, like a drawing in the left side of the head, extending to the face, ear, behind the ear and to the neck of same side, as if the whole was on a stretch at the same time. In the belly, he also felt a similar sensation, and on the same side, from below the false ribs to the groin, without any other pain, so that he could attend to his ordinary business; yet, being uneasy in relation to the consequence of the accident, he came to consult me.

The expression of his face was natural, tongue a little white, mouth dry, no appetite. The abdominal region, when examined, had no painful feeling, pulse was regular; he had taken no nourishment. Although he had no appetite, he felt a hollowness and a want of food. From his present symptoms, and the evacuations which took place, I presumed that there could be no poison in the alimentary canal, and that these symptoms must be the effect of its absorption into the blood and its dynamic action on the organism; besides, they seemed so slight that I thought that nature herself would be equal to dissipate them; nevertheless, I gave an antidote, the choice of which was difficult on account of the paucity of symptoms; as they seemed to be limited to one side, I gave *Cocculus* 300 to be taken in eight spoonfuls of water, one spoonful every three hours, and I advised a light farinaceous diet and a small quantity of meat, looking to a prompt re-establishment of health. At 3 A. M. I was sent for in haste; he had been easy till evening, had eaten a light dinner without pleasure or appetite, and had gone to a deep sleep. At 2 A. M. he was awakened (lying on his belly contrary to custom) by an abundant liquid stool, which partly passed into his bed, it came so quickly; he had colic at the time and violent pains in the head, which increased so much that he sent for me: I found him in great agitation, his face very red and swollen, especially the eyelids, which were imperfectly opened with great difficulty; the veins of the temples swollen and hard; intense headache at intervals, paroxysmally; lancinating pains, at

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one time in the forehead, at other times in the vertex, temples or occiput, which the least pressure increased considerably; stricture of the head and especially of the temples, as if by an iron band. Head heavy, pain in different parts, separately, a singular indescribable sensation of the hairy scalp of the superior part of the head like a pricking itching. The hairs are sensitive and as if painful to the touch; on bending the head backward, a lancinating feeling in the nape; a feeling like the pricking of pins from within outwards in the skin of the face, cheeks, forehead, in the head and different parts of the body; mouth dry without thirst; taste of copper in the throat, burning in the stomach, rising into the throat and mouth; dull, constant pain, of a crampy nature, in the middle of the belly and in one side or the other, but mostly in the left; colic with constant desire to go to stool. Tenesm violent, painful; stools very frequent, liquid, with much bright colored blood and scrapings of the intestines, at times in small quantity, then very abundant, containing occasionally pieces of solid fœcal matter; after stool, cutting at the anus, spasms and sensation of weight and uneasiness of the rectum; urine suppressed; prickling in the hands, especially at the ends of the fingers; great anxiety. Constant talking; hard, full, frequent pulse; dry and parched skin, slightly yellow, especially of the face and conjunctiva. The cause of these symptoms was doubtless the action of the copper by absorption, the patient having been very careful in his diet, and not having been exposed to any thing else which could have deranged his health. Considering then the multiplicity of the symptoms before me as the effect of the dynamic action of the copper on the organism, I knew that evacuants would be useless; I therefore contented myself with prescribing a mucilaginous drink, to satisfy the prejudices of the friends, and I sought for the antidote which would relieve the troubles of the economy the most successfully.

Aconite appeared to me to be the remedy, the symptoms of which were most in accordance with those of the disease.

The symptoms of 16, 30, 44, 62, 63, 66, 70, 108, 125, 129, 136, 185, 192, 210, 214, 223, 363, 369, 390, 484, 514, 540, responded perfectly to the actual symptoms of the case; and notwithstanding this remedy was not classed among the antidotes of *Cuprum*, I did not hesitate to prescribe it. I therefore gave *Aconite* 300 in a large tumbler of water, to take a teaspoonful every five minutes.

I gave the medicine at such short intervals on account of the constant action of the poison. The relief was prompt;

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after the third dose the head was free of pain, except a narrow circle round the forehead; the face less swollen and red, pulse less frequent and softer, heat of skin natural, back of hands moist, and the mind quite calm. However, nausea came on; the white of egg and water, which had been given, was vomited forcibly, without mixture, except a piece or two of meat undigested; after vomiting no uneasiness or pain in stomach; the pains in the belly continued, also the tenesm, the bloody stools and the pains of the rectum; at the same time he passed a large quantity of limpid urine. At 6 P. M. he felt easy, except the desire to go to stool in small quantity with blood and tenesm. I now gave *Merc.* 300 in same way, every half hour, and desired him to go to bed. As soon as he was in the horizontal position, the symptoms which had disappeared (the retention of urine excepted) immediately returned; the head at once became violently painful, shooting in different parts, especially on moving it, and it seemed as if fixed on the shoulders by a long stake; when he moved it, he felt a stitch under the left scapula; the face became red and swollen, especially the nose, and fluent coryza came on with watering and burning of the eyes, burning in the belly and stomach, rising into the throat; tenesmal stools more frequent; gaping and tendency to sleep, but unable to obtain it, because his head was overwhelmed with ideas which he could not drive away. I returned to *Aconite*, in alternation, however, with *Merc.*, every half hour same alternation, requesting him to remain in bed, notwithstanding his sufferings, to cover himself with more clothes, and to drink warm sugar water to facilitate the perspiration which these medicines have a tendency to produce. At 7 o'clock he slept deeply, with an abundant sweat. On awaking at 11 o'clock, he felt quite well, after passing much wind downwards. He then took a warm bath of an hour's continuance, supposing it would benefit him; but it had a contrary effect, arresting the perspiration. Notwithstanding, he continued easy and took food, and had a good night. The next day he felt well, except a slight binding of the temples and at the root of the nose, and an indescribable sensation at the sides of the belly, but without pain; no evacuations for twenty-four hours.

I prescribed a more nourishing diet, and from existing symptoms and disposition to constipation, as well as his sedentary habits, and as antidote to copper, I gave *Nux* 600. The next day he arose quite well; but having breakfasted on coffee, the antidotal effects of this beverage soon showed themselves. Colicky pains, stools streaked with blood, throbbing and heavi-

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ness of the rectum, as in hemorrhoidal discharges, soon took place; these feelings, however, were dissipated by the resumption of the medicine.

The manner in which the above symptoms developed themselves confirms the the theory of our school as to the action of medicinal agents on the living organism.

Large doses, that is, the poison in material quantity, only acted on the digestive tube, exciting colicky pains and evacuations upwards and downwards; but after the passing off of this material mass in the second case, the smallest quantity sufficed, after twenty-four hours' incubation, to produce an Iliad of sufferings, invading every part of the organism, and even endangering life, had not the antidotes neutralized its influence.

The symptoms observed in the two patients are almost literally found in *Cuprum;* and they would have gone far to suspect poisoning by that article, had it not been evident previously. This light furnished by the Pure Materia Medica to legal medicine, has once been brought to bear by our great symptomatologist, the Baron de Bönninghausen, in a case of poisoning by Arsenic. He was once told that a man had died of such and such symptoms, but without the least suspicion of poisoning, when he at once said that he must have taken Arsenic. This was reported to the local magistrate: the man was disinterred, and Arsenic was detected in large quantity.

The symptoms of *Cuprum* mentioned in this observation (Maladies Chroniques, 2d ed.) are those marked 6, 39, 40, 42, 43, 59, 601, 69, 73, 90, 101, 129, 130, 150, 155, 169, 180, 195, 204, 205, 208, 210, 219, 289, 356, 359, 365, 395. These pains are somewhat ill defined, often cease, and suddenly return by touch or motion.

A well-marked phenomenon in this case was the amelioration of the symptoms in the upright position, and their excessive aggravation on lying down. No mention is made of this peculiarity in the Pure Materia Medica; it is, on the contrary, indicated in a sense opposed to symptoms 50, 186, 190, 266, 306. It proves how insufficiently this powerful medicine is yet known, and shows the necessity of submitting it to more rigid scrutiny. This symptom approaches *Cuprum* to *Arsenicum.*[1] We may remark that *Cocculus*, one of the antidotes to *Cuprum*, did not prevent the development of a great many sufferings many hours after its administration. However, may we not suppose that it prevented the development of some

[1] And in some symptoms to Ac. oxalic. TR.

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crampy or paralytic symptoms, so striking among the phenomena of *Cuprum*, except a slight prickling in the fingers, and which are characteristic of *Cocculus*? may we not, I say, suppose they were neutralized by it before they had time to show themselves, the same as *Belladonna* prevents the manifestation of scarlatina, *Veratrum* that of cholera, and, as I have much reason to believe, *Mercury* that of small-pox? In addition, I may say that I am frequently consulted by workers in copper, who are all more or less affected by crampy and paralytic feelings of the muscles of the chest and extremities, and who all receive considerable relief from *Cocculus*.

Aconite, *Merc.* and *Nux* were chosen according to the law *similia similibus*, which should always be kept in view, even when seeking for an antidote, which, according to the above facts, can only really be such a substance, the pathogenetic effects of which have the greatest analogy with those of agents of which it may be recognized as the remedy. The word employed to designate this property is then completely antipathic to the doctrines of homœopathy, and is a vulgar word borrowed by Hahnemann from the allopathic school, and to be exact, should be replaced by the word homœopathic, or an equivalent.

All the effects related above were obtained by dynamization, 300 and upwards. What a rebuke to the partisans of large doses in acute affections! Here, in the very presence of the morbid cause, the prompt action of the highest attenuations could not certainly have been surpassed by massive doses, and the materialists, even the most obstinate, cannot withstand the evidence of facts.

The injurious effects produced by taking coffee would seem to weaken the principles I have just laid down in relation to antidotes, since its action in some measure destroyed the beneficial effects of the remedies administered, though in its symptoms we find neither bloody stools nor tenesm, etc. But who can flatter himself that he knows all the symptoms that this protean substance is capable of producing? Is it not owing to this multiplicity, to this almost infinite variety of symptoms, that this substance owes the property of being, with a very few exceptions, the universal antidote of all the medicinal agents in nature?

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A CASE OF TYPHOID MENINGITIS.

BY DR. HEMPEL.

We record the following case, not from any desire of exhibiting our own success, but because it was a case of great importance in itself, and one which shows the effect of a higher potency in a most striking manner, provided the remedy be well chosen.

The importance of the case, humanly speaking, (for before the tribunal of God all cases probably are equally important,) consisted in this, that the patient was the only son of one of our first families, of great wealth, and whom we had converted to homœopathy. They were Dr. Washington's patients, and left him on account of his bungling. The death of that boy would have occasioned an awful fluttering, and, in some quarters at least, would have been a terrible blow at homœopathy. Be this as it may, the child was saved from death, triumphantly as we conceive, and owed his preservation to the truly magic effect of a teaspoonful of a solution of eight pellets of *Hyosciamus* 30 in half a tumblerful of water.

Thomas S....., of this city, of a very psoric constitution, had a fall against the sharp edge of the chimney, inflicting a very trifling wound in the scalp. The boy stumbled in running after his sister. There did not seem to exist any disagreeable effects from the fall, and the wound was so slight that the parents did not mind it at all, and contented themselves with applying an Arnica plaster. A week after the accident occurred we were informed that the wound would not heal, and went to examine into the condition of things. The patient had no pain about the head, but the wound suppurated considerably. We made an ointment of *Silica* 3 to be applied to the wound, and, inasmuch as the boy had caught a bad cold and suffered with a dry barking cough, we prescribed *Belladonna* internally. The cough ceased entirely on the third day after using the Belladonna, but the wound would not heal: the edges of the wound began to become raised, and the scalp was detached from the skull to the extent of a quarter of an inch all round. Nevertheless the boy seemed to be well, and did not complain of any thing. Precisely one fortnight after the fall, on a Friday, the boy spent an hour and a half in one of the parlors, where some upholsterers were at work, and which had not been warmed this season. This was

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between six and seven in the evening. Upon entering the third parlor, where the family sat in the evening, the boy had a severe chill, and complained of drowsiness. On the Sunday evening next after the Friday, we were sent for, and found the boy with an inflammatory pulse and burning skin. On the supposition that the boy had caught a fresh cold, we gave him *Aconite* and *Dulcamara*, the latter on account of the psoric nature of the patient. The fever subsided in the night, the boy perspired, and on Monday morning he seemed to be entirely well, and complained only of weakness. In the afternoon the fever broke out again, and seemed to be of an inflammatory nature. Prescribed again *Aconite* and *Dulcamara*. The fever continued unabated all night. We suspected that it would turn out to be either scarlet or some kind of nervous fever; if the former, that it would be similar to another case of scarlet-fever which had occurred in the family some years ago without eruption or sore throat, and terminated fatally with effusion into the brain, a sort of indistinct rash having made its appearance on the last day.

On Tuesday morning all the symptoms of a typhoid meningitis had made their appearance. Dry heat all over the body; great pain in the temples, forehead, and all over the hairy scalp; occasional delirium; great giddiness, the boy complaining all the time that his bed was rocking; pulse 110; tongue thickly coated, with a brown streak along the mesian line; fetid breath; great pain in the bowels; jumentous urine; cracked tongue and excessive thirst; the edges of the wound had a very bad appearance, and the wound itself secreted a badly-looking pus. The child took *Belladonna* 1 in water every two hours. This medicine was continued at longer or lesser intervals until Friday evening, in alternation with *Sulphur* 30, which was given on account of the psoric nature of the patient. On Friday evening, at the time when the paroxysm set in, the symptoms suddenly assumed an alarming appearance. The pulse became wiry, very feeble, 130; the extremities were cold; delirium of a more or less furious character set in; the eyes became suffused with redness and insensible to the light of the candle. We administered *Hyosciamus* 30, eight very small pellets in half a tumblerful of water, of which solution the patient took a dessert-spoonful. Fifteen minutes after taking the medicine, the patient fell into a sound sleep, which lasted three hours. In the morning the pulse was down to 89, the skin was uniformly warm, and the wound on the head healed in that one night. The patient had a natural evacuation of the bowels, and complained of nothing but some

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very slight pain in the temples and forehead. Took *Belladonna* at long intervals. On the Monday following, the patient complained again of pain in the bowels and an inability to evacuate them, notwithstanding a frequent desire; the same desire and inability existed in regard to the urinary organs. The tongue remained very much coated, and the breath had a sour smell. The pulse became suddenly intermittent, and went down to 50. That same evening the boy took a dose of *Digitalis* 30, four pellets upon the tongue, next morning a dose of *Calcarea* 30, four pellets upon the tongue. The Calcarea was given on account of an excessive dryness of the hair, which is constitutional with the patient, and a scaly tinea capitis which had made its appearance, and, together with the bad tongue, the pain in the bowels, sour breath, etc., betokened an extreme want of nutrition in the substance of the brain. The desire to evacuate the bowels continuing, but remaining ineffectual, the patient was ordered an injection of tepid water, mixed with a very small quantity of castor-oil. There was danger of congestion to the brain from over-distention of the colon, which was filled with hard fæces; the castor-oil was added because the tepid water alone had proved insufficient. The patient was kept upon the alternate use of *Digitalis* 30, and *Calcarea* 30, and was dismissed cured a fortnight after he experienced the first chill. Before concluding, we ought to state that immediately after using the Hyosciamus the boy experienced an itching all over the hairy scalp, and that on the day following, a vivid redness made its appearance on the hairy scalp and forehead, which disappeared in the course of a week, going through various shades, from a light to a darker red.

A CASE OF EXTRA-UTERINE ABDOMINAL PREGNANCY.

PHILADELPHIA, Nov. 8, 1846.

DEAR SIR: My friend, Dr. Gesewisch, of Wilmington, Delaware, has communicated to me the following case of *Graviditas Extra-uterina Abdominalis*, which, should it meet your approbation, you will please to have inserted in the Examiner. Very truly yours, C. NEIDHARD.

DR. C. J. HEMPEL.

The subject of the subsequent observation, Mrs. M—, was a healthy, blooming woman, mother of three children, which she has had at intervals of from two to three years. The youngest child is ten months old, not yet weaned. I had attended the family for the last five years in different diseases.

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On the 7th of November, 1845, 7 o'clock, P. M., whilst she was engaged in undressing the children, she was seized with a violent spasmodic pain in the abdomen, to cure which, she took some lavender. I saw her between 8 and 9 o'clock. The pains continued in a slight degree; at intervals she had attacks of sickness of stomach. The skin was cold and the pulse became almost imperceptible. On trying to lie down, she lost her breath and fainted. By degrees the pains in the abdomen abated, but instead of them, she complained of violent pain in the breast and on the right shoulder; she was also very irritable, and not satisfied with any thing that was done for her. I visited her again next morning at 9 o'clock. The pains had diminished in violence, the attacks of fainting with nausea and vomiting of a brown substance resembling chocolate, were more frequent, complete consciousness, distention of the abdomen, facies hippocratia. About 11 o'clock, she observed to the women surrounding her, that she expected her monthly return, (being just the time according to her calculation,) and half after 12 o'clock, A. M., she expired in one of these fainting fits.

The post mortem examination showed us the immediate cause of death—internal hæmorrhage. Dr. Gesewisch removed with the sponge nearly four quarts of fluid blood, and the small pelvis was entirely filled with coagulated blood. The right Fallopian tube was lacerated, and in the coagulum was discovered an embryo. The small vessels in the right side of the uterus were in a more congested state than on the left side, as well as the right Fallopian tube; the blood generally was found more on the right side, so that the liver was p essed upwards, toward the right lung (which may perhaps account for her pain in the right shoulder). Much bloody serum was also found in the right chest. The lungs and heart were bloodless. Nothing abnormal was found except a kind of cartilaginous deposit in the Fallopian tube.

HOMŒOPATHIC CURES,

From the year 1840 *to* 1844, *collected from the various Homœopathic publications, by Dr. Kurtze, of Dessau.*

TRANSLATED BY CHARLES J. HEMPEL, M. D.

(Continued from No. II. of the Examiner.)

A thin countryman of forty-six years, and a bilious disposition, had been suffering for the last five years with contrac-

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tive, burning, cutting pains in the stomach, accompanied with copious empty eructations; the pit of the stomach was very sensitive to the touch; the appetite was entirely wanting; stool sluggish. The pain sometimes intermitted a few days, was most violent after breakfast, and was not much aggravated by food, although it oppressed the stomach. Took Nux vom. 2, ten drops, with two drachms of sugar of milk, two doses a day, on the point of a knife. After the lapse of eight days the pains were more violent, the evacuations more regular. Took Arsenic 2, in the same fashion. The pains disappeared speedily, and have not returned since.

A female of fifty years, stout-built, lively, very active, had been suffering for six years past with aching pains in the stomach, accompanied with sensation of soreness, or as if there were subcutaneous ulceration; the paroxysms came on every four or six weeks, now in the daytime now at night. The pains were slight at the commencement, increased gradually, lasted several hours, and ceased with colicky pains, loose stools, and acrid sour vomiting. The pains were alleviated by pressure. Between the paroxysms there was an excessive secretion of mucus in the mouth and fauces. (Used purgatives, emetics, cataplasms, amora.) Carb. veg. 6, one drop, every other day; twenty-four doses. Has been well for two years past. (*Hygea.*)

A boy of twelve years, desirous of study, had been suffering for the last six months with the following symptoms: they lasted from five to fifteen minutes, and occurred especially after a copious meal or after exertion: nausea and contraction in the pit of the stomach, with suffocative sensation ascending from that region through the chest into the throat, after which he is attacked with vertigo and loss of consciousness. Nux vom. I, four drops, morning and evening. Next day he had several paroxysms without the fainting, but with more nausea and vomiting. Took Nux vom. 2, one drop, twice a day. No return of the paroxysms.

A female of forty-five years, having ceased to menstruate, had been suffering with the following symptoms for the last fifteen years, having been confined to her bed for the last four: periodical and gradually decreasing paroxysms of burning and tearing in the region of the first lumbar vertebra, whence the pain moved to the pit of the stomach, causing oppression of the chest, and anxiety; slight appetite, and clear tongue; nothing agrees with her except curdled milk and stewed plums, any thing else, even soup, causes vomiting and pains in the stomach; stool regular. No perceptible defect either in the vertebral column, or on the abdomen. Nux vom. I, from four to

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five drops. The pain was less in five days, and she was able to eat soup; gradually she was able to bear any kind of food, and was entirely well after three months. Remained well.

A female of thirty-two years, being in the fourth month of pregnancy, had nausea every morning before breakfast; also when not pregnant. Cured by six doses of Nux. vom., one-fiftieth of a grain at a dose. (*Hygea*)

A boy of fourteen years, had been throwing up the ingesta, especially fluids, for several months past, soon after taking them into the stomach, without any pain or sensitiveness in the region of the stomach; but the boy became thinner all over. Took Ipec. I, from three to four doses a day, and Nux vom., one dose; completely cured in three days. The same affection existed in the case of a delicate, nervous, pregnant female, with great sensitiveness of the region of the stomach and the hypochondria, on which account she took some doses of Veratrum, and, on account of her weakness, some doses of China. (*Hygea.*)

A boy of twelve years, whose father was affected with inveterate herpes, had been suffering for some time past with the following symptoms: cardialgia with oppression in the pit of the stomach, sour eructations, vomiting of the ingesta. After taking a quantity of allœopathic drugs he was cured in a few weeks by Sulphur I, one drop every evening, which caused the breaking out of ring-worm, which was cured by Sepia 4, two drops, one dose every other evening. (*Elwert.*)

A man of a weakly constitution had been affected for the last six months with the following symptoms (his father having been similarly affected at that age and having died with that illness): constant burning and troublesome oppression of the stomach, increased by eating; three or four hours after a meal, and sometimes later, the patient threw up his food, accompanied with a sour, pungent-fetid fluid. Mild, non-irritating food and drinks agreed with him best. Stools rare, and bell-shaped. No morbid changes could be detected by contact; the region of the stomach was rather sensitive to the touch. He was pale, thin, and sweated a good deal. Took Arsenic 2, one drop, every evening. Pain and vomiting disappeared after the first doses. Cured entirely after taking thirty-two doses (in three months). (*Hygea.*)

[To be continued]

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EDITORIAL NOTICES.

A subscriber complains of our devoting the first page of the Journal to editorial notices. These notices are not sent in by the publisher of the Journal, nor are they exclusively devoted to books published by him; we notice every work or pamphlet concerning homœopathy which is sent to us, and we believe it is the privilege of all editors of Journals to publish such notices in the body of their work.

FOREIGN HOMŒOPATHIC LITERATURE.

New Homœopathic publications abound in Germany. Domestic physicians and pamphlets are very numerous. Among the latter is one entitled "*Hanhecheln*," which was sent to us by our friend Dr. Hering of Philadelphia. This pamphlet is the first number of a series, the object of which is to vindicate the scientific character of homœopathy, the claims of Hahnemann and Hahnemannism, and to show the fallacies of the exclusive advocates of large doses, low potencies, and the sophisms of the gentlemen of the pathological side of our school, in a style of pleasant, but at the same time caustic satire. It is our opinion that Dr. Hering succeeds admirably in his enterprise, and that those homœopaths who are not sufficiently acquainted with the German language to read the *Hanhecheln* and to enjoy all the hits and thrusts in those pages, are deprived of a great treat.

The following periodical has made its appearance in Madrid, Spain:

La Homeopatia, periódico que tiene por objeto propagarla y defenderla.—Esperimentacion pura y racional en el hombre sano.—Entronizacion del dinamismo.—Conocimiento del hombre y de los agentes que le modifican.—Los semejantes se curan los semejantes.—Doses infinitesimales.—Restablecimiento de la salud.

It is a remarkable fact that wherever homœopathy is at first introduced, it is taught and practised according to the precepts and principles of Hahnemann. The true, genuine Hahnemannism excites enthusiasm and love. We may apply to Homœopathy what Rousseau said of the works of God: "They came pure out of the hands of their Maker, but men have spoiled them."

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THUJA OCCIDENTALIS.

AN ESSAY.

BY CARL MAYRHOFER, M. D.

(Continued from last No. of Examiner.)

C.

Doctor W. Huber, of Linz, instituted three provings upon himself with the Thuja.

First proving, with the lower potencies (decimal scale).

One drachm of the third attenuation which H. took on the 14th of September, 1844, at 8 o'clock in the morning, remained without any effect. He took a similar dose on the 13th at 5 o'clock in the morning; after having remained in bed an hour and a half, he experienced a momentary starting in the upper region of the abdomen, in the direction of the left groin, as of something alive. Next day he took a third dose of the same potency, after which no symptoms appeared.

On the 15th, at 6 o'clock in the morning, H. took one drachm of the fifth potency. One hour after dinner he experienced a fine, short, lasting stitch in the posterior surface of the left ulna near the elbow; soon after a sudden starting-bounding sensation in the right iliac region, as if something alive had bounded up; a quarter of an hour afterwards, he experienced a painful drawing in the outer surface of the left upper arm near the olecranon, recurring several times at short intervals. At 8 o'clock in the evening H. experienced a sensation about the glans near the frænulum præputii, as if that spot had been excoriated, although no change was visible.

Took a similar dose on the 16th of the same month, after which the following symptoms were experienced: the same feeling of soreness about the glans, only when touching it; at 4 o'clock, after dinner, he experienced a few fine stitches in the fossa navicularis of the urethra; an hour afterwards, during the siesta, he experienced a second time a sudden bounding up in the abdomen, accompanied with starting of the whole trunk, as in affright.

Took a similar dose on the 17th, after which he felt a *drawing pain in the left region of the forehead at intervals,*

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and at the same time indications of colic accompanied with emission of flatulence.

On the 18th of the same month, he took a drachm of the fourth potency morning and evening; this caused a profuse secretion of insipid saliva in the night, and a painful *tension* in the *right side of the nape of the neck* and *in the small of the back.*

On the 19th the dose was repeated, causing a slight tension in the nape of the neck, and a pretty severe sticking making its appearance crosswise in the region where the ulna and the carpus unite, from without inwards (in rest).

H. repeated the dose on the 20th, in the morning. After the lapse of an hour he felt as if the stomach were spoiled, with pressure over the pit of the stomach which impeded respiration. At 9 o'clock he experienced a pain in the left side of the forehead when writing, which continued the whole forenoon; upon being waked from the siesta H. became quite giddy, and had great trouble in collecting his thoughts. (Was this drowsiness, or the effect of Thuja? M.)

On the 21st, 22d, and 23d of the same month, H. took one drachm of the third trituration at 7 o'clock in the morning. On the first day, towards 9 o'clock in the morning, he experienced a feeling of pain in the upper part of the abdomen, towards the right lumbar region, for half an hour (more in rest than when walking). On the morning of the second day his head felt obtuse, and at 10 o'clock he experienced a painful drawing in the left thumb, lasting only a short while, but returning frequently. On the third day a sudden sensation of giddiness was experienced at 11 o'clock in the forenoon, while writing. He felt as if a current of air was ascending from the occiput and penetrating towards the forepart of the head, causing vertigo and a loss of thought.

On the 24th, 25th, and 26th of the same month, H. took one drachm of the first potency in the morning. Result: after the first dose he experienced a momentary tearing in the dorsum of the left hand, at noon, while writing; after the second dose several stitches were experienced periodically in the left side of the chest, deep in the pectoralis major muscle, to judge from the feeling. The third dose was without any result. One drachm of the first potency, taken on the 27th, 28th, and 29th of the same month, was likewise without any result.

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Second experiment, with the tincture.

Took 5 drops on the morning of the 30th September, without any effect.

Took 8 drops on the 1st of October. In the evening, while chewing a piece of bread, H. experienced an *intense sticking pain* between the left *ear and malar bone*, as if the jawbone had suddenly become *dislocated*, almost extorting a scream. This pain was experienced every time he attempted to chew, continued the whole evening, and was still felt the next morning.

Took 10 drops on the 2d of September, in the morning. On waking again he felt an extremely disagreeable painful sensation in the *nape of the neck* close to the occiput, as when one has been *lying on a hard couch*. In the course of the day this pain was felt over the whole of the right side of the back as if the muscles in that part of the body were *sprained*, and was felt especially when bending the head forward and raising the right arm. (Dr. Huber observes that he had never been affected with rheumatism of the nape of the neck. M.)

In the evening the pain moved more especially into the region of the right shoulder and neck; upon chewing bread the pain in the muscles of mastication, which has been described above, was again experienced.

On the 3d of September, in the morning, H. took 16 drops. After dinner he felt a *voluptuous itching* in the forepart of the *urethra*, while the penis was relaxed. The pain in right posterior cervical and dorsal muscles continued the whole day, accompanied with *whizzing* and *buzzing* in the right ear. On bending the head forward he experienced a sensation as if the muscles were *too short*, and as if the pain was caused by the rigidity of the muscles. Had a quiet night after taking 40 drops in the evening.

Took 26 drops on the 4th of the same month. Shortly after taking the drug the pain in the nape of the neck, shoulder and back, was increased to such an extent that the raising of the right arm and carrying the hand behind the head caused the most exquisite pain. H. was unable to bend the head forward or to turn it; in order to accomplish this he had to move the whole trunk. The pain was a sort of *tumultuous digging*, as if the muscles had been *crushed*, and as if ulcers were forming in the subcutaneous and the intermuscular cellular tissue. On the same day he had two papescent fetid stools, and, in the evening, after eating a warm soup, a vaporous perspiration broke out all over the body,

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continuing for half an hour, and being followed by a diminution of the pain in the nape of the neck; on the following day, however, H. was not yet able to tie his cravat behind, or to hang the chain of the watch around his neck. On looking at the right shoulder in the glass, it was found to be somewhat more elevated than the left, and somewhat swollen; the taste in the mouth was insipid, and as if the stomach had been spoiled.

Took 30 drops on the 5th of September. At 8 o'clock in the morning he had an evacuation, which was at first hard, afterwards papescent and clayish. The disagreeable sensation in the stomach continued all day. At half past 7 in the evening, he experienced a painful *tension* in the bottom of the left *orbit*, which lasted several minutes.

On the 8th H. took 60 drops of the tincture. After the lapse of half an hour he experienced several painful *stitches* in the forepart of the *urethra*, the penis being relaxed; afterwards he felt a crampy pain in the right ear, which lasted only a short while, and several times he felt *fine prickings* in various parts of the skin, which sometimes changed to a *burning*; also a painful burning sensation between the *prepuce* and *glans*, continuing from 6 to 7 seconds, and returning several times *at short intervals*, without any change being perceived in the parts with the eye. At 10 o'clock in the forenoon he experienced a painful *drawing* in the left *frontal eminence* (while walking in the open air) and an *itching of the anus*, which induced scratching. At 4¾ in the afternoon, while sitting, *a sensation was experienced in the urethra, as if a drop of a viscid liquid were pressing forward in the urethra.* At 5 o'clock drawing pains were experienced directly below the internal malleolus of the right foot (for a few seconds). On the morning of the following day the orifice of the urethra was closed with a *slimy fluid*, consisting of a serous liquid and a lump of mucus, which could be drawn into threads. After removing this liquid a slight *burning* was experienced at urinating.

On the morning of the 9th of May H. took 80 drops. After the lapse of fifteen minutes the left eye began to run, the right one remaining dry; confusion of the head the whole forenoon; *whizzing* in the left ear; painful pressure in the superior and posterior angle of the left parietal bone, as if a small *convex button were pressing against that part* (going off rapidly when touching it). At 10 o'clock in the forenoon he experienced a painful drawing, extending from the bend of the right knee to the internal surface of the thigh, for a few seconds (in rest).

After dinner he experiences a pain in the right *parietal bone*,

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as of *a pointed nail having been driven in*; violent vertigo when sitting and closing his eyes, as if the sofa upon which he was sitting were balancing to and fro (going off immediately when opening the eyes).

At 4½ o'clock, during the siesta, he experienced a momentary, darting pain in the gums of the right upper jaw. (The pain in the back and nape of the neck had again subsided gradually.)

On the 10th of the same month, he took 100 drops, which produced the following symptoms: after the lapse of two hours he experienced a *jerking tingling in the fossa navicularis of the urethra*, accompanied with a voluptuous feeling without erection; obtuseness of the head the whole forenoon, with *paroxysms* of a drawing pain in the middle of the forehead, which was especially violent *in the left frontal eminence*, and thence extended to the posterior portion of the left eyeball, and at times as far as the occiput, and at 3 o'clock in the afternoon passed into a constant digging pain. This headache was as violent in the open air as in the room, and lasted until 10 o'clock at night. Occasional sensation in the right and upper part of the abdomen as of something alive being moving there; sometimes he experienced a painful jerking in the penis, accompanied with a sensation as if a viscid liquid would come out from the urethra, which, however, was not the case. He fell asleep after midnight; on the following day, when waking at half past 6 o'clock, a dull drawing pain was experienced in the right *frontal eminence*, extending as far as the right orbit and the right nasal bone, setting in in paroxysms and ending at 8 o'clock.

The right eye was dry; in one point of the margin of the lower lid a *burning* was experienced as if a stye would form there. Besides, he felt a whizzing in the left ear, and at one time a fleeting stitch in the left testicle.

On the 11th of the same month, at 8 o'clock in the morning, H. took 120 drops. After the lapse of an hour, a *jerking, voluptuous tingling* was experienced in the forepart of the *urethra* (while walking in the street). At 10 o'clock in the forenoon he felt a painful drawing in the *region of the right forehead*, ceasing and returning several times. At half past 12 he felt a painful *drawing* in the left *posterior cervical region*, close to the occiput, alternating with a similar pain in the right *frontal eminence*. Afterwards he experienced a cracking in both ears *when swallowing*, resembling the creaking of a wooden vise when turned round, accompanied with stinging and a feeling of

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dryness in the right outer *canthus*, as if a *grain of sand* had got into it. At 2 o'clock in the afternoon he experienced frequent attacks of a painless *jerking* in the back towards the left lumbar region, resembling a jactitation of the muscles.

On waking the next morning, the scrotum, perinæum, and the inner surfaces of the thighs were dripping with sweat,[1] and, a few minutes after, paroxysms of a drawing pain were experienced in the bottom of the right orbit, continuing a quarter of an hour.

The same phenomena returning all the time, H. concluded the provings with the tincture by taking 140 drops of it at 8 o'clock in the morning on the 12th of the same month. Results: after the lapse of a quarter of an hour, a feeling of dryness was experienced in both eyes, with a painful pricking and creaking in both ears, as when a wooden vise is turned round, especially during empty deglutition. After the lapse of half an hour he experienced a short-lasting painful *drawing* in the left side of the occiput. After two hours a clawing aching pain was experienced in the left *frontal eminence*, becoming fixed in a small place (for a few minutes) accompanied with a rumbling in the bowels. After nine and a half hours he experienced a colicky pain in the right iliac region, for a few minutes, while walking in the room; shortly after a few shooting *stitches* in the *urethra*, and a drawing pain in the right forehead. These phenomena lasted with more or less violence during the subsequent days, and a few more symptoms were felt on the 21st, such as *feeling of soreness* about the hard *palate*, as if burnt and covered with vesicles; periodical pinching in the middle of the left calf as if *a convex button were pressed upon that part*, the same sensation being experienced in the mastoid process of the right side; shooting stitches from the *neck of the bladder* towards the *urethra*.

These phenomena diminished gradually, some of which were yet experienced on the 30th of Nov. 1844, more than six weeks after having swallowed the last dose of Thuja.

Third proving, with the sixtieth potency.

After all the symptoms which the increased doses of the tincture of Thuja had called out had entirely disappeared, H. experimented with the 60th potency (1 : 99), imagining, however,

[1] Dr. H. observes that this sweat of the genital organs reminded him involuntarily of the opinion of his teacher Von Hildenbrandt: "Amant condylomata loca uda, ut fungi."

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that he would not experience any effects; but he was very much astonished on observing again most of the old symptoms, and other symptoms which he had never felt before.

On the 19th of January, 1845, H. took 10 drops of the 60th potency at 11 o'clock in the forenoon. After a quarter of an hour he experienced a slight pressure in the pit of the stomach and in the chest, impeding respiration. Lancinating pain in the muscles of the right side of the nape of the neck, in the evening, extending as far as the scapula (continuing only a short while, but returning several times with tolerable violence). Soon after a similar pain was experienced in the left forearm, where the ulna joins the carpus. On the morning of the day following, H. experienced a sensation in the abdomen as of a knee pushing against the abdominal walls from within.

Another 10 drops which H. took on the 17th and 18th of the same month, did not produce any symptoms.

On the 19th, the same dose occasioned the following symptoms: voluptuous itching in the forepart of the urethra, the penis being relaxed, accompanied with a sensation as if a few drops would flow out; jerking in the soft parts below the left ribs, towards the upper part of the abdomen; short-lasting pain in the left *frontal eminence* as if a *nail* were driven in. This pain disappeared at once on touching the part, returning, however, immediately in the region of the superior and posterior angle of the left *parietal bone* in the shape of a *pressure*, as if a *convex button* were pressed against the part.

Twelve drops, which he took on the 20th of the same month, at 10 o'clock in the morning, occasioned the following symptoms: frequent lachrymation of the left eye (when walking in the open air); digging-up pain in the left *frontal eminence* at 5 o'clock in the afternoon, returning several times at *short intervals*, and alternating with the sensation as if a *convex button* were pressed upon the part near the vertex. This same sensation, which ceased immediately upon the parts being touched, and returned again as soon as the contact ceased, was experienced several times in the right *mastoid process*, in the left *parietal bone*, and in the *right upper side of the neck*. In the evening he perceived a painful *little blotch* in the middle of the left *eyebrow*, and, after he had gone to bed, a digging-tearing pain was experienced in the *muscles of the right side* of the *nape of the neck*, extending momentarily as far as the right scapula, and being relieved by contact, accompanied with whizzing in the left *ear* and *creaking* in the same *when swallowing saliva*. On the morning following, after wak-

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ing, he felt a *pressure* and *tension* in the left and afterwards also in the right *orbit*.

Took 15 drops on the 21st of the same month. In the afternoon he experienced the well-known *pressure* as with a *convex button* in a region of the left *parietal bone*. At 7 o'clock in the evening H. suddenly experienced a momentary pressure as of *a nail which had been driven in*, in the left *frontal eminence* (while walking in the street), and after returning home and entering the room, a *luminous disk* of the size of a pea *hovered before his eyes;* it shone like a fire-fly (lampyris noctiluca).

No medicine was taken on the 22d of the same month. In the evening he experienced a short-lasting pain in the left *frontal eminence as of a nail which had been driven in.*

On the 23d of the same month, H. concluded his provings with 17 drops of the 60th potency. At 10 o'clock in the forenoon he experienced a *drawing-sticking* pain in the left *temporal muscle, increasing during mastication* and *diminished by contact.* This pain continued for two hours, and lasted in the open air as well as in the room. At the same time H. experienced a beating tearing with sensation of heat in the right frontal eminence and a pinching pressure in the dorsum of the right foot, occurring frequently in the daytime.

On the 24th of this month, on waking, H. had a *drawing pain* in the left *frontal eminence* (this pain had made its appearance already in the evening after lying down), and *profuse sweat about the genital organs.* In the forenoon, while walking in the open air, he experienced a pain in the forehead over the left eyebrow, extending after dinner as far as the left side of the forehead. In the evening H. experienced a continuous *drawing* and *tension* below the *mastoid process* of the right side, accompanied with *drawing* in the left *frontal eminence* towards the temple, and with *whizzing* in the left ear.

On the 25th and 26th no symptoms were observed; but on the 27th, a few moments after waking, H. had a complete *hemicrania* in the left side of the forehead.* It was a violent, drawing pain, commencing directly over the left upper eyelid, extending perpendicularly upward across the left eyebrow, and dividing in the left frontal eminence into a number of threads and rays which penetrated deep into the brain. This symptom lasted a few minutes and disappeared as rapidly as it came.

On the 13th of February (up to that date distinct Thuja

* H. had never had any hemicrania before. M.

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symptoms made their appearance continually) H. discovered a painless *nodule* near the borders of the hairs on the left side of the nape of the neck, disappearing again on the following day except a small rough place. On the 16th of this month a blotch was observed on the inner side of the right thigh an inch and a half from the perinæum, which *felt like a wart* and looked dark-red, of the size of a millet-seed, the tip of the blotch having a *dingy white appearance*, and the base being surrounded with a *bright-red areola* of some three or four lines wide; it was somewhat painful when touching or moving it, and was filled with pus on the day following. A few days afterwards the blotch changed to a brown crust, which came off spontaneously.

What is remarkable in the provings of Huber, is the length of time during which he observed the effects of Thuja in his person. Even as late as the 10th of March, forty-six days after taking the drug, he distinctly although feebly felt several of the effects of Thuja. The symptoms of the head lasted longest and were most frequent, especially the sensation as if *a nail had been driven in* in the angles of the parietal bones; as this sensation ceased an *itching gnawing* was experienced in the same region, which induced him to scratch. The sensation as of an elbow pressing against the inner wall of the abdomen, and the *seeing of a luminous disk* shining like a fire-fly, lasted as long. This sensation was sometimes felt in daytime, but most frequently at twilight in the room. Afterwards this luminous disk, which followed the movement of the eyeball, and was hovering at various distances now before one, now before both eyes, assumed a more elliptic form, the middle of the ellipse being dark-violet or blackish. Sometimes the disk was of the size of a millet or hemp-seed only, but the edges of the disk continued luminous all the time.*

D.

W. Huber, brother of the former prover, surgeon at Kleinzell, has proved the Thuja on six persons; on himself, on two females, one of whom was his own wife, and on three of his children.

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* It is very probable that the 60th potency would not have excited so many symptoms, if the provings with the tincture had not preceded the former. If the organism has been once thoroughly impregnated with a noxious substance, the least quantity of it excites a new reaction as long as the first disturbance is not entirely counterbalanced. M.

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I.

W. HUBER'S PROVINGS OF THUJA ON HIMSELF.

W. H. has instituted three provings on his own person.

First proving, with potencies.

W. H. commenced on the 19th of April, 1845, with the 30th potency, taking every morning before breakfast 100 drops and descending in the scale of the potencies, until he had reached the first potency on the 18th of May, when the first proving was concluded. He experienced no symptoms previous to the 21st potency. After taking this potency, he experienced a slight aching pain over the right *eyebrow;* after the 20th potency he felt a violent *aching pain* commencing in the region of the posterior and inferior angle of the left *parietal bone* and extending as far as the right *frontal eminence.* The pain only lasted while the prover remained in a state of rest. Every movement diminished the pain. The pain returned immediately after the movement ceased. This pain became especially violent after the 19th potency. It commenced half an hour after taking the medcine, and lasted all day. Even on the day following W. H. was awakened by that pain at 5 o'clock in the morning and was compelled to rise, after which the pain ceased; the head remained however stupid and full. This was accompanied on the same day by frequent attacks of a boring pain in the *region of the bladder,* with painful *drawing up of the testes.*

From the 1st until the 12th of May W. H. took from the 18th to the 7th potency. The headache continued with more or less violence; on the last day it was accompanied with roughness of voice and a scraping sensation in the throat, which continued only a few hours.

From the 13th to the 18th of May he took from the 6th to the 1st potency. The headache gradually disappeared. In the place of this, H. had daily attacks and sometimes several attacks a day of the boring pain in the region of the bladder, with *drawing up of the testes,* which was accompanied with occasional urging for stool. All these phenomena were but slightly marked during the last period of the proving, and disappeared in a few days after the medicine had been discontinued.

Second proving, with small doses of the tincture.

On the 18th of June W. H. took 10 drops of the tincture before breakfast, increasing the dose every day by 10 drops.

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During the first days the above described headache made again its appearance, but it was less violent and discontinued entirely after the fourth day. On the fifth day, an hour after taking the drug, he experienced a sensation in the right side of the throat as if it would become inflamed; during the whole of that day he experienced stinging pains when swallowing, which disappeared again entirely in the subsequent night. No symptoms made their appearance from the sixth to the tenth day, except nausea while taking the drug; this nausea was excited even by the mere sight of the medicine.

Third proving, with large doses of the tincture.

On the 7th of July W. H. took 200 drops of the tincture, and repeated that dose on the 7th, 9th, and 12th of the same month.

Every time he took the dose, he felt nauseated and disposed to vomit. The above described headache appeared again immediately after taking the first dose, but it never reached the violence which it had while proving the attenuations, although the headache continued until the 15th of July. The giddiness and the obtuseness of the head on the contrary were more violent. These symptoms were accompanied with *want of disposition to do any thing*, *ill humor*, and *inclination to be vehement*, pain in the throat during deglutition, and sour-smelling sweat almost every night. These phenomena continued during the proving, and even a few days beyond, with more or less violence.

H. thinks that the scarcity of his symptoms is owing to the constant exercise which he was obliged to take during the period of the proving.

II.

W. HUBER'S PROVING OF THUJA ON HIS WIFE.

H.'s wife has made two experiments with Thuja.

First proving, with potencies.

Mrs. H. swallowed 100 drops of the various potencies from the 30th down to the 1st, at the same time and in the same order as her husband, from the 19th of April to the 18th of May, without experiencing any other symptoms, except slight vertigo, and some headache in the forehead.

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Second proving, with the tincture.

The second experiment was likewise instituted simultaneously with that of her husband, from the 18th to the 28th of June, with this difference, that, whereas he took progressively increasing doses, she took 10 drops a day for ten days in succession.

The prover was but little affected by those doses. On the fifth day after commencing the proving, several *wart-shaped excrescences* of the size of a millet-seed made their appearance on both hands, gradually increasing to sixteen during the proving. At the time when the proving was concluded, they varied in size according to the different periods when the different doses of the drug were taken. The shape of those warts was like that of a truncated cone; their surface was smooth, and they appeared to be seated in the epidermis.*

A fortnight after concluding the proving of Thuja, the warts ceased to grow. The largest warts were of the size of a small pea, and the formerly smooth surface of those warts had become rough and cracked. The rest of the warts were smooth, of various sizes, according as they had made their appearance sooner or later. The warts remained in that condition until about the middle of August; at this period the larger warts became depressed in the centre, which depression caused them to be surrounded with a pad-shaped border. This border disappeared gradually, and the wart likewise. The smaller warts disappeared without going through such a depression.

On the 10th of September eight warts were still remaining, and on the 11th of December (more than five months after the proving had been concluded) all the warts had disappeared except a small one on the third joint of the left little finger.

III.

HUBER'S PROVING OF THUJA ON THREE OF HIS CHILDREN.

Three of the children of Dr. H. likewise proved the potencies of Thuja from the 30th down to the 1st; one of the children was a boy of 10 years, one a boy of 5 years, and one a girl of 7. No symptoms were discovered in any of the children, except warts of the above described shape, of which the elder boy had six, the younger five, and the girl three.

* At former periods Huber's wife had had many warts, and, when she commenced the proving, she had a wart on the dorsum of the left hand, which had existed already for years past. M.

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On the 14th of September, when the results of the proving were sent in to Dr. Mayrhofer, new warts continued making their appearance in the elder boy; on the 11th of December he still had twenty-two warts of different sizes; on that day the warts of the younger boy had disappeared again, except one. No further communications have been sent in in relation to the warts of the girl.

IV.

HUBER'S PROVING OF THUJA ON A FEMALE AFFECTED WITH WARTS.

The prover is 40 years old, of a stout make, middle size, and sanguine temperament. Her menses appeared early, married at the age of 20, and has five healthy children. Except during the periods of pregnancy and lactation, her menses were very profuse for three or four days; her health was constantly good. Three years ago she was attacked with horny warts, one on the tip of the left ring-finger, two in the palm of the left hand, and one in the palm of the right hand; they troubled her a good deal while she attended to her domestic affairs; while washing either in cold or warm water, they became cracked and exhibited deep painful rhagades on the surface.

Being assured that she might get rid of her warts by proving the Thuja, the woman consented to undergo the trouble. From the 3d of May until the 30th of June, she took 6 drops of the mother-tincture every day, and from the first of July to the 26th of the same month, she took 10 drops a day.

The prover living at a distance, H. could only see her occasionally, and he then recorded the following observations.

On the 11th of May the prover complained of frequent attacks of vertigo and diminished sleep. She felt an *anxiety*, and the menses, which appeared on the 6th of this month, were scanty and lasted only one day.

On the 19th of May her complaints were the same. The vertigo frequently made its appearance when sitting or lying down; during the day she frequently experienced a tremulousness over the whole body.

On the 26th of May the above mentioned phenomena continued, especially the *anxiety*. The woman thought she could not continue the drug, because she had almost entirely lost her appetite, and suffered constantly with a sweetish taste; even streaks of blood were occasionally seen in the saliva, and the warts

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became still more painful. However, she consented to continue the drug.

On the 3d of June. The former symptoms continue. Moreover, *wart-shaped excrescences* of the size of a millet-seed were discovered on the dorsum of either hand, six on the left, four on the right. In daytime she is frequently attacked with *chilliness*, feels very faint, and she has a slight *leucorrhœal discharge*, which she never had before. The old, horny warts are very painful when touched, or while the woman is at her work, the new warts are without any pain.

On the 10th of June. The *chilliness* had been almost constant since the 3d, the prover has no appetite, is quite unwell, faint, debilitated as by fatigue, without being able to state what ails her. The warts looked as if split up, and exhibit deep, painful rhagades, especially while washing. *The new, painless warts*, became larger every day, to the great fright of the prover. The leucorrhœa lasted until the 8th, when the menses made their appearance, which, however, lasted only a *single day*, and consisted in the discharge of a small clot of black blood of the size of a hazlenut.

On the 9th of June the *leucorrhœa* reappeared. It is but scanty, but obliges her to wash herself frequently in the daytime. It is mild, yellow-green, and leaves yellow-green spots in the linen.

On the 16th. The *leucorrhœa* increases. Every day she feels *a pain as if bruised*, at times in the *shoulders*, at times in the *thighs*. When treading she feels an ulcerative pain in the soles of the feet; they sweat constantly. The horny warts become more painful every day, and the skin around assumes a slightly *reddish tinge*. The new warts are painless, almost as large as the old warts, of the shape of truncated cones, have a smooth surface, and appear to be seated in the epidermis only. Besides these warts, traces of new warts are perceived on the dorsum of either hand, and on the fingers.

On the 26th of June. The pain in the shoulders and thighs had ceased six days ago, the ulcerative pain in the soles of the feet continues, the leucorrhœa and the chilliness continue likewise. The painful old warts are still surrounded with a red areola, and the rudimentary warts, spoken of above, have increased to ten new warts of the size of millet-seed.

On the 30th. The ulcerative pains in the soles of the feet have ceased. The other symptoms continue.

On the 8th of July. The prover had taken 10 drops of the

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tincture every day. Even after the first dose the woman felt worse than she ever had before during the period of the proving. She felt *faint*, *chilly*, *anxious*, and had lost her appetite. This condition continued until the 7th, when the menses appeared, after which the pains diminished. The menses lasted only *one day*, and consisted in the discharge of three clots of black blood, of the size of a hazlenut. *The leucorrhœa continued after the menses.*

On the 13th. The last 10 drops had affected the prover very much. The frequent chilliness with debility were now accompanied with *difficult breathing*, short and hacking cough, and momentary *palpitation of the heart*. These symptoms were especially troublesome in the daytime. The nights were calm. The old warts were the same as before. The new warts (those which had appeared first after the old ones) assume an irregular shape, and exhibit a *rough surface*. The most recent warts (those which had appeared after the former) had become somewhat larger, and traces of a third set are even perceived. The leucorrhœa continues, and the prover thinks she has become thinner during the period of proving.

On the 26th. All the symptoms continue in an increased degree. The difficulty of breathing and the feeling of anxiety attending it are especially troublesome. The appetite is almost entirely wanting; every little meal causes a pressure at the stomach. The debility is worse. The prover looks pale and sickly. Her dresses have become loose. There are four sets of warts: the eldest, which are now surrounded with red areolæ; the warts of the next set, having a rough surface and an irregular shape; the smaller warts of the third set, with smooth surfaces, and having the shape of truncated cones, and lastly the warts of the fourth set, which are very small, from the size of a linseed-grain to that of a millet-seed.

The woman, apprehending to be made still sicker by the drug, and to have still more warts, the provings were concluded on the 26th of July.

All the symptoms continued with diminished violence until the 3d of August. The warts had remained unchanged, except that the last set seemed to have ceased to grow.

On the 7th of August, the menses made their appearance; they were somewhat more profuse than the last time, and lasted one day and night. As they appeared, all the other symptoms diminished, even the old warts ulcerated less, and the red areolæ became paler. All the recent excrescences remained unchanged.

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On the 18th most of the symptoms had disappeared; she had a good appetite, the breathing had again become easy and the leucorrhœa had discontinued. The old warts had become smaller and less painful, and they ceased to crack during washing. The three recent sets continued unchanged. Towards the 30th of August the health and the good appearance of the prover had entirely returned. The old warts had ceased to be painful, had much diminished in size, they were scarcely raised above the skin, several of the new warts had disappeared without leaving a trace, and the remaining ones were much diminished.

On the 8th of Sept. the old warts had almost entirely disappeared, and the recent warts likewise.

The menses which appeared on the 5th of Sept. lasted three days, and flowed as before the proving.

On the 11th of Dec., one hundred and thirty-eight days after the conclusion of the provings, the old horny warts had disappeared without leaving the least trace in the epidermis. Of the recent warts nothing was left at that time except a very small trace of one only.

E.

Frederick Lackner, student of medicine, twenty-two years old, of a melancholy-choleric temperament and a robust constitution, had dysentery when a boy, also scarlet-fever and measles, was frequently affected with worms and toothache, and had a violent ophthalmia when he was sixteen years old, which left a great disposition to congestion to the head and eyes, continuing still at this moment. For the last four years L. had enjoyed excellent health.

He commenced the proving of Thuja with 6 drops of the tincture, which he took on the 10th of Oct. 1844, in the morning. They caused eructations, colic towards noon, and diarrhœa.

On the 11th he took 8 drops, which had the same effect. On the 12th he took 10 drops, after which the colic became exceedingly painful; it diminished after a copious evacuation. In the hypogastrium the prover experienced a sensation as of *pressure*, especially directly above the *symphysis pubis*.

On the 13th and 14th L. took 12 and 14 drops, and no medicine on the 15th. On all those days the colic was less, but the *sensation of pressure in the hypogastrium* from within outwards remained the same.

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Took 16 and 18 drops on the 16th and 17th; colic and diarrhœa increased.

Took 20 drops on the 18th; had slight colic and felt drowsy the whole day. Took 25 drops on the 19th, after which he experienced a constant gurgling in the bowels. On the 20th, 21st, and 22d, he took 30, 35 and 38 drops, which increased the colic and diarrhœa.

On the 23d L. took 40 drops. After the lapse of two hours the colic became so violent, that he was scarcely able to stand straight, and had to sit with his trunk bent forward.

These pains lasted upwards of an hour, and diminished after a copious evacuation accompanied with emission of a quantity of flatulence. In the evening the pains became again more violent, without however reaching the former degree of violence. His sleep was restless and full of dreams.

On the 24th no medicine was taken. The colic abated and the sleep became more quiet. On the 25th and 26th he took 45 and 50 drops, which again brought on slight colic, which was considerably increased on the 27th after taking 55 drops.

L. now discontinued the proving for three days. On the 28th the colic kept increasing and disturbed even his sleep; it was accompanied with distention of the abdomen and constipation. On the 29th in the morning he had eructations; towards 10 o'clock great nausea with accelerated pulse, debility of the limbs as from weariness, and cold sweat all over. This condition improved during a walk by the raising of a quantity of wind. On the contrary the colic increased until noon. It abated towards evening. In the morning and after dinner he had a copious loose evacuation. The appetite was less, the sleep was restless and disturbed with dreams. On the 30th in the morning he had a scanty liquid evacuation; the colic was very slight and the appetite diminished.

On the 31st of Oct. and on the first of Nov. he took 60 and 65 drops, which did not produce any new symptoms, but on the 2d of Nov. after taking 70 drops, he had again colic and diarrhœa, which became so violent on the following day, after another dose of 75 drops, that L. was scarcely able to stand straight at noon. While driving home, the colic, which was now accompanied with headache and chilliness, became almost intolerable. After the colic had lasted almost an hour, it abated somewhat after a very copious, liquid evacuation, which was accompanied with copious emission of flatulence; towards evening the colic increased again.

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Nevertheless L. continued taking the Thuja, increasing the doses by 5 drops every day, so that he took 100 drops on the eighth of Nov.

The most permanent symptom was the colic, which increased from morning until noon, intermitted after dinner, but reappeared in the evening and continued until midnight; this was accompanied with the *sensation of pressure in the hypogastrium.*

On the 9th L. took 110 drops. During the day he had colic; in the evening he felt a *burning* in the *eyelids* and *the sight was less distinct;* in the night he had pain in the head and eyes, pressure in the pit of the stomach, and hurried breathing. He did not sleep till towards morning, after which the symptoms disappeared.

Took 120 and 130 drops on the 10th and 11th, after which he experienced a *burning* in *the eyelids* with *obscuration of sight;* the sleep was interrupted and restless. The same symptoms appeared on the 12th, after taking 140 drops. In the evening the pupils were dilated. On the 13th no medicine was taken; 150 drops which were taken on the 14th, were not followed by any new symptoms.

On the 15th L. took 160 drops. After dinner he suddenly felt a *shrill tingling* in the right ear which, after a few hours, suddenly changed to a dull *buzzing* and *groaning*, the latter sensations gradually changing to a *noise as of a bubbling liquid*, which continued all night. In the evening and night he emitted a large quantity of *flatulence* and *straw-colored urine;* the sleep was disturbed with *voluptuous dreams;* in the morning he felt excessively drowsy, and was loth to leave the bed. No alvine evacuation.

On the 16th he took 170 drops. The whole day he emitted a quantity of flatulence without any motion on the bowels; his mood was especially cheerful; he slept quietly at night.

On the 17th he took 180 drops. These caused the *emission of an excessive quantity of flatulence* day and night. In the morning he had a scanty evacuation with some colic. On the 18th he took 190 drops, after which he had a scanty papescent stool (after dinner) and then *a violent burning at the anus.* In the evening he had colic and emitted a quantity of flatulence.* On the 19th and 20th he took 200 and 210 drops, which occasioned nothing but colic and a liquid evacuation.

* The colic which is occasioned by Thuja, seems to originate primarily from the distention of the bowels produced by flatulence. M.

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On the 21st L. took 220 drops. These occasioned a papescent stool in the forenoon. In the evening he had a moderate colic, and, during the night, he had a *constant desire to urinate* and emitted a *large quantity of light-yellow urine*. Every urination was followed by a violent *burning pain* in the *urethra*, and in the *fundus of the bladder*. In the morning he had a hard stool and soon after violent colic.

On the 22d he took 230 drops, after which the colic lasted all day, the desire to urinate likewise; the pain after micturition was however less.

On the 23d L. took 240 drops, after which he discontinued the drug until the 30th. During this period of time he observed the following symptoms: every day, after dinner, he had a papescent stool with emission of a quantity of flatulence; hoarseness and secretion of mucus in the fauces obliging him to spit up; *obscuration of sight with dilatation of the pupils and burning of the eyelids.*

On the 30th of Nov. L. took 150 drops of the tincture, after which he discontinued the drug until the 7th of Dec. The same symptoms appeared as those on the previous days, but in a lesser degree, and finally they disappeared altogether.

On the 8th, 9th, 10th and 11th of Dec. he took 260, 270, 280 and 290 drops of the tincture; the only symptom which was occasioned by those doses, was a slight colic.

On the 12th L. took 300 drops. At noon he felt a slight colic; in the evening he suddenly felt a violent pain in the whole abdomen, as if the bowels were pulled towards a point behind the umbilicus. This was accompanied with distention of the abdomen, headache and accelerated pulse. This colic lasted six hours, and abated gradually after a liquid evacuation accompanied with the emission of a quantity of flatulence.

On the 13th he took 310 drops. The colic continued until evening; on the 14th, after taking 320 drops, he experienced all day occasional shooting stitches in the abdomen. Took no medicine on the 15th and 16th, and had no symptoms.

From the 17th to the 24th of Dec. inclusive L. took a dose every day, increasing the doses every day by 10 drops, so that he took 400 drops on the last day.

As may be seen from the foregoing report, the symptoms elicited by the prover were very few. He was attacked with colic every day, noon and evening, which increased from day to day, and became extremely violent on the 23d of Dec. and on the third of November. The colic abated considerably during a

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walk, after he had emitted during that walk a considerable quantity of flatulence upwards and downwards, and had had a copious liquid evacuation at noon. In the afternoon and evening he was occasionally visited with lancing, gurgling, rumbling and shifting of flatulence, and he had a sleepless, restless night.

On the 24th of Dec. those symptoms abated; on the two subsequent days when L. did not take any medicine, he complained of nothing but debility. On the 27th and 28th he took 410 and 420 drops, which did not occasion any new symptoms; on the following day, when L. took 430, 440 and 450 drops, the constant rumbling and shifting of flatulence in the abdomen, accompanied with shooting stitches in all the parts of the body, were the only symptoms.

Persuaded that the Thuja had been prevented from showing its true effects upon the organism by the rapid succession of large doses, L. discontinued the proving for a few days, and even on the first day of January, 1845, he perceived traces of the last named symptoms.*

On the 8th and 9th of January when no symptoms were any longer observed, L. took 460 and 470 drops, without any results. On the 10th he took 480 drops; two hours after taking the drug, he had eructations, desire to vomit, and a peculiar feeling of qualmishness in the pit of the stomach; these symptoms continued until noon, and were accompanied with constipation, restless sleep, and vivid dreams.

On the 11th and 12th he took 490 and 500 drops, which occasioned the following symptoms: drawing and tearing in the pericranium, at times in the region of the vertex, at times in that of the occiput; one scanty stool every day; confused dreams about the most absurd things. On the evening of the last day he experienced a *burning* and *stinging* in both eyes and eyelids, with injection of the cornea; these symptoms continued on the 13th after taking 510 drops.

On the 14th and 15th no medicine was taken. On waking on the 14th, he was for a long time unable to open his eyelids. They were painful and closed again spontaneously. After rising he felt debilitated all over, especially in the upper arms and

* The development of the effects of a drug is most certainly prevented by taking large doses which excite vomiting, diarrhœa, profuse sweat or enuresis; by means of these processes the drug is carried out of the body, and is thus prevented from penetrating the organism and showing its physiological action upon those parts of the organism to which it is specifically related.

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thighs; *clouds* and *streaks* (*muscæ volitantes*) were hovering before his eyes the whole day, accompanied with *indistinctness of sight*, which continued the next day.

On the 16th and 17th he took 520 and 530 drops, which occasioned a warm feeling in the region of the stomach; 540 drops, which he took on the 18th, occasioned a feeling of qualmishness, eructations, and the emission of a quantity of flatulence.

No medicine was taken from the 19th until the 6th of Feb. inclusive. On the first day the region of the stomach was very sensitive even to the least pressure, especially in the evening; there was a frequent and continuous rising of wind from the stomach, and continual emissions of copious flatulence from the rectum. These symptoms gradually abated on the following days, and finally ceased entirely.

On the 7th and 8th of Feb. L. took 550 and 560 drops; the only result obtained was eructations tasting of resin, accompanied with aversion to the drug, which became so invincible that he had to conclude his provings after having taken 15,920 drops of the tincture in the space of 122 days.

The Thuja, in this prover, principally affected the primæ viæ, producing violent flatulent colic, diarrhœa and enuresis, by which revulsions the development of the specific effects of Thuja was prevented.

[To be continued.]

PATHOLOGICAL ANATOMY, CONSIDERED FROM ITS USELESS SIDE.

BY CONSTANTINE HERING, M. D., OF PHILADELPHIA.

Without attempting to refute the shallow accusations which certain pseudo-critics have brought against me, and which were not only without foundation but positively contradicted by what I have written, I will simply content myself with mentioning that I have been one of the first who defended pathological anatomy against Hahnemann, that I fearlessly declared in my preface to the English translation of Hahnemann's Organon, never to have adopted any of the speculative explanations which Hahnemann has fur-

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nished of his own theory, that I have openly asserted that the fact of similarity does not constitute the true scientific character of our doctrine, not to mention many other things which have been published these ten years, and all of which, including my treatises of 1826, have been sent to Hahnemann and read by him without his friendship and esteem for me diminishing in the least. In spite of all this oppositon to Hahnemann it is said that I have remained a stubborn and shallow-headed Hahnemannian. In spite of my prediction that one of the two opposing parties would get lost in the sand like the Rhine, and the other would rush into the Black Sea like the Danube, the pseudo-critics of our literature consider me as belonging to a party who was near enough to get lost, in its writings at least, in the sand, and I am so considered for no other reason than because I would not get drowned in the Black Sea.

I admit that the gentlemen who oppose me, have done me a great honor by setting me down as a shallow-headed stock-Hahnemannian, especially since they have admitted to the rank of a respectable scientific work such a shallow production as the manual of Drs. Noack and Trinks must be considered by all true men of science in the homœopathic ranks.

I shall take the liberty to address those gentlemen here in my capacity of a shallow-headed stock-Hahnemannian on the subject of pathological anatomy.

It is well known that those gentlemen commonly called specificals have been bragging about pathological anatomy, and have extolled its importance to such an extent that it threatens to do serious injury to our Materia Medica. They do not content themselves with receiving the material, organic transformations which a medicine is said to have produced, into the Materia Medica—this has already been done by Hahnemann, who, however, did not lay much stress upon them. By the gentlemen of the specific school those organic transformations are considered of the greatest value and importance, and it is deemed essential that they should be reproduced in our provings, as if these transformations were the great object to be attained, and as if their realization by the drugs would do away with all the uncertainty which as yet prevails in many respects in the strictly scientific determination of our remedial agents.

As regards ourselves,—I mean the whole fraternity of the shallow-headed stock-Hahnemannians—we have left such notions as are entertained by the gentlemen of the other side in reference to artificial organic transformations behind us for years past, as I

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shall show by and by. To us, therefore, it seems foolish to insist upon them. With beginners, who are easily carried away by the APPEARANCE of learning, we are frequently placed in a disadvantageous position towards the gentlemen of the other side, inasmuch as they indulge in technical terms and the dazzling forms of deep science. The appearance of a want of science on our side is still increased by the fact that the gentlemen of the specific school make frequent use of the stethescope and talk about it in a boastful manner, as if it were an essential means of cure, whereas it is well known that it has never afforded the least advantage as a curative agent. In vain do we declare that pathology, including stethescope, microscope, pathological anatomy and chemistry, is essential to the establishing a proper diagnosis and prognosis; we are required by our friends of the pathological school to *cure* with those things, or else to be looked upon as shallow-headed Hahnemannians.

We, who consider the *curing* of diseases our principal business, have constantly laid down the maxim that we ought to prove as many drugs as possible, and collect of each as many symptoms as we can. We endeavor to be guided in our practice by all those symptoms which we have obtained by pure experience, and we find it so much more easy to cure diseases as we are in possession of more remedies, and as the remedies we possess have yielded more symptoms.

Some of our pathological opponents have seen fit to imitate our opponents of the allœopathic school, and to allege the multitude of our symptoms as a proof of their incorrectness. Could such arguments ever have been brought forward by scientific men? Is there any other way to test the correctness of our symptoms except by re-proving our drugs, or by examining every symptom with critical acumen?

The re-provings which have been instituted so far, have confirmed the original provings entirely. In spite of the clamor of the other side the remedies have remained what they were, their character has not been changed, no new diagnosis has been obtained. Colocynth cures dysenteries as before.

We have been accused of things which no sane men could be guilty of: that we scrape our symptoms greedily together, and afterwards revere them as a sort of revelation. It is a matter of course that symptoms, no matter by whom observed or with what precaution they had been collected, can only be accepted with more or less restriction. We have endeavored to be guided by those symptoms which Hahnemann has designated as *character-*

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istic. These are either deduced from the general character of the drug, or else they are such symptoms as have been most frequently found to correspond to and remove certain symptoms of disease.

Every physician has enjoyed an unlimited freedom to combine these *certain* curative symptoms with any other into a group; there are no rules for any such combination; this combination of symptoms into a group has therefore so far been a fact of art rather than of science. The art of combining symptoms is derided by those of the pathological school, and pathological speculations are substituted in the place, which, however, are not science, and turn away our attention from more essential requisites of cure.

It is left out of consideration how long agriculture had been cultivated to the satisfaction of the hungry, first empirically, and afterwards as an art, before the general progress of science led to a scientific basis for agricultural pursuits; or how long a lever had been used in the common pursuits of life, before its power was scientifically investigated and determined.

The pathologists among us have objected to our Materia Medica, that many of our symptoms are purely individual, and ought to be critically (!) expunged. Is not every symptom individual, strictly speaking? Does not every symptom result from the action of a drug upon an individual, and is not its character determined by the innate disposition of the individual? This appears from a merely superficial comparison of the symptoms of various drugs on the same prover. As early as 1830, when I observed, to my great astonishment, the similarity of the symptoms of various drugs which I proved upon myself, I tranquillized my mind by comparing the symptoms of one and the same drug observed by different provers, of whom I knew positively that they had proved the drug upon themselves. It is just as interesting to compare the symptoms of various drugs observed upon the same prover, as it is to compare the symptoms of one and the same drug observed on different provers. Such a comparison reveals the individual character of the drug much better than the fashionable and pretended scientific lists or registers of temperaments. Individual symptoms do not restrain the sphere of activity of the drug. All the symptoms are individual in so far as they reflect more or less completely the dynamic relation of the drug to the organism of the prover. In order to enable every prover to obtain an ideal perception of the character of the drug, and to combine any number of symptoms into a group, corresponding as

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nearly as possible to the totality of the phenomena of the natural disease, Hahnemann arranged his symptoms in a manner which made it possible to cure diseases according to the light of pure a priori experience. It is utterly inconceivable to my mind, what physiology or pathology has to do or can do in the present sphere of our Materia Medica, considering that we are as yet unable to account for the simplest phenomena of disease, vertigo, fever, etc. I have constantly said that for the present we shall have to construct a theory for the selection and administration of our remedial agents independent of physiology and pathology. I have endeavored to construct such a theory.

Practitioners who stand with me upon common ground, and who have made it their study to point out both the common and the individual character of our symptoms, have necessarily receded more and more from those few symptoms which consist of organic transformations as the results of poisoning. Such symptoms were gradually found to be useless, and have fallen into disrepute.

As early as fifteen years ago experiments were made on sheep, not with poisonous doses, but doses that were large enough to produce organic transformations. It is well known that those sheep would not exhibit any symptoms. The diseases which were produced on those sheep indeed formed pathological groups, but these pathological phenomena became visible only shortly before the death of the animal, and could not be cured if occurring as natural diseases. The conclusion was this: the remedy M having produced certain organic transformations in the sheep, and one sheep of a flock having died of a disease which was characterized by similar organic transformations, as was discovered by a post-mortem examination, the above remedy would cure the other sheep affected with the same disease. What was done to sheep then, is now to be done to men; but the attempt will fail in the latter, as it did in the former instance. In this way men will never succeed in curing sheep, nor sheep in curing men.

A drug-disease is something essentially different from a natural disease; the former can scarcely be confounded with the latter. Belladonna can never have produced a real scarlatina, nor Arsenic the glanders; nor any other drug any real disease. Our friends of the pathological order can never have dreamed of such a thing. They can only have wished to obtain symptoms, and moreover, very similar symptoms. Suppose a man had, from an excessive devotion to our art, taken a drug in such quantities as would finally produce an organic alteration similar to cancer; sup-

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pose even he consented to have it cut out, and the thing were found by the microscope to be identical with one of the varieties of cancer described in the pathological works, and represented on the plates: would it be certain for all that, that the drug would cure such a disease? Some cases might perhaps be cured, others would scarcely be improved, some would remain unchanged, and other cases would positively become worse. These would be the cases where *the remedy would be homogeneous to a vital condition of the disease*; a cure would be effected in all those cases *where the remedy would be opposed to that vital condition.* Similar results would obtain in the treatment of epidemic diseases. Every epidemic disease has at least, and perhaps only, three vital conditions; if one of these be neutralized by the drug, the others cease of themselves.

The great question is, How can we know what remedy will cut off those vital diseases? I answer, by the *characteristic* symptoms of the drug. If this road be sufficient to arrive at the goal, why should we engage the dangerous, circuitous, tedious, and uncertain road pointed out by pathological anatomy?—Are not all organic transformations extremely individual? Would we ever succeed in constructing a list of changes of structure which would somewhat correspond to those contained in the books on pathology? Are not our provings, as instituted by Hahnemann and his disciples, a safer, surer, shorter way to discover all the true characteristic symptoms of drugs?

I had given Spongia a long while before G. Neumann told us that the use of Spongia induced the formation of tubercles. Of course, Spongia does not cure all cases which are curable, nor does it alone cure such cases. Surrounded by consumptive and scrofulous patients, I determined to experiment with fluorine, chlorine, bromine, and cyanogen, both uncombined and combined with hydrogen, carbon and sulphur, expecting that these various combinations would lead me to the discovery of comprehensive remedies for those diseases; that I should be able to furnish diagrams and formulas on that subject; and that we should be able to meet the whole tribe of tuberculous and scrofulous diseases with the confidence of success. I hope still to be able to accomplish that result. Twenty industrious provers, indeed, could accomplish more in one year, than one prover in twenty years; but he may enjoy the pleasure of hoping. But shall we delay using those agents until one or the other prover shall have imitated scrofula or tubercles in his person, or until we shall have ob-

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tained some certainty by cases of poisoning? In that case we should have very little hope.

There is no doubt that if Spongia has ever occasioned tubercles, this could only have taken place in very few instances, only in persons who were predisposed to the development of tubercles, and who, probably, were already affected with them, so that the drug merely fed and multiplied them. *A drug has no symptoms inherent in its substance; it merely determines the character of the symptoms evoked in the person of the prover.*

If we knew by the stethescope, with more or less certainty, that tubercles had formed in the upper portion of one or the other lung, and would now give Spongia to cure them, we should soon resort to larger doses, and gradually employ other more probable remedies, and the end of all this would be the old song, "that the remedy had not answered the expectations." If the physician was one of the "thinking kind," then of course the remedy will be charged with the failure, at least in manuals like that of Noack and Trinks. This would be just, for what could the physician, who swears by such manuals, think? He reasons thus: A remedy which makes tubercles, will also cure them. But I say this is not so, and has never been so; that is, a drug does not cure tubercles because it has occasioned any elsewhere. The conclusion that a remedy must have formed tubercles because it cured them, likewise appears to me a very innocent one, and has always appeared so.

There is a remedy which aids in the cure of tubercles without having ever made any, I mean Hepar s. c. It is likewise very uncertain whether Bromine will ever cure tubercles, but it may. Such cures, however, can only be effected by the higher potencies. It amuses me to picture to myself the horror which thrills through certain dictators of doses on reading reports of cures with the higher potencies; but what of that, provided the patients improve and get well? I use those same remedies in croup, but then only the lower potencies; of Arsenic, which is sometimes alone sufficient in croup, if indicated, I always use the higher potencies in that disease; if I had to use Arsenic in tubercles, I should use the lower triturations of that drug.

I recollect the case of a young, delicate girl, who had not yet menstruated, and who suffered with fully developed hectic fever, cough, purulent expectoration, emaciation, and the tips of whose fingers looked bulbous, red, and were provided with nails in the shape of arches. At first I declined taking charge of her case,

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because, at first sight, it seemed to me hopeless; but upon investigating the case, it was found that there existed neither any malformation, nor degeneration. I consulted an allœopathic German physician who had frequented the schools of Paris and Vienna. At first, he likewise considered the case hopeless, but upon investigating it, which he did with great care and circumspection, he declared that there were neither tubercles nor vomicæ, neither adhesions nor hepatization, in short that it was simply an excessive irritation of bronchial mucous membrane. In this case, Spongia 30 corresponded to the symptoms, and cured the case. It helped as certainly as it did in other cases where there was no doubt about the existence of tubercles. I cannot tell whether the lower potencies would have done more in that case, but I doubt it. After six weeks' treatment, the girl went into the country, and was able to do without medicine. I put her on a milk-diet, forbade the use of meat, and gave her instructions in regard to exercising the muscles of the chest by systematic inspirations, which is also of great use in cases of tubercles and adhesions. In the fall she returned to the city, stout and fat, *and her fingers had acquired the natural size.* In the case of tubercles, a cure cannot be effected as rapidly as in the above case; this is a matter of course.

Inasmuch as in the latter case the property which Spongia is said to possess, of producing tubercles, was not taken into consideration, why should this be done in a similar case where tubercles are present besides? That property may be considered, but why should it decide the selection of the remedy? In either case the selection of the remedy depends upon the similarity of the symptoms, but in no wise upon the results exhibited by pathological anatomy.

It were a sad thing if we should be hurled back into deceitful spheres where remedies become standard drugs, as would be the case if the manual of Noack and Trinks were to be our guide, whereas the clear, certain, and characteristic symptoms are entirely sufficient.

It were a sad thing if we had again to draw conclusions from the symptoms *a b c d* of the patient relative to internal processes and formations which have been observed as occasioned by the remedy *x y z*, and if we were again to make the selection of a remedy depend upon a conjectural conclusion. In that case the laymen with their domestic physicians would be more successful than we; their success would indeed be empirical, but what is that to the people? all they care for is to get well.

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Is it forgotten that the tracing of pathological alterations of structure to a remedy is very uncertain? There might be some certainty in this if men and animals could be dissected before they are poisoned; whereas they are dissected after they had been poisoned, in which case many things are found which are either useless or doubtful, inasmuch as we cannot know with certainty whether some of them had not existed previously. Compared to such uncertain phenomena, the subjective symptoms of an intelligent man are golden truths. The correctness of these symptoms may be verified by calculation in a threefold manner, as I have shown elsewhere, and with sufficient accuracy to make the symptoms appear extremely probable.

It would be a progress in our science if the determination of the drug by the similarity of its symptoms to those of the disease were more certain than it had been previously. Such a progress cannot be effected if deceptive theories based upon deceptive symptoms are mingled with our truths.

What I have said above is likewise applicable to the stethescope, the use of which is so essential to the proper diagnosis of affections of the heart. In many cases I have arranged the symptoms which I had obtained by auscultation correspondingly to the remedies. Not relying upon my own knowledge I have consulted masters in the art of diagnosis—for my reputation was not impaired by my declaration that in this or that Dr. N. was more proficient than I—but in all those cases where Sulp. or Iodine, Zincum or Aurum, Puls. or Spig., Sepia or Lachesis were of avail, the symptoms of each case were so different from those of the other cases, that I had to investigate every case independently of any other. The selection of a remedy always depended upon corresponding symptoms of the drug and the disease, the symptoms of the organic affection being of a minor importance. In vain will be all attempts to determine the remedy by those organic alterations; such restrictions in the selection of a remedial agent will be highly detrimental in practice.

We have not yet got far enough to blot out a portion of our Materia Medica. We have yet to try and collect many remedies, to consider and to weigh a good many things before we can feel authorized to reject any of our symptoms with well-founded reasons. The study of one single polychrest like Hartmann's is worth more than the wild, unprincipled eliminating of ten thousand symptoms from the Materia Medica; one single page filled with the practical observations of Gross is more important than sheets full of ravings about mucous membrane and ganglia, cerebral and spinal nerves.

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To return to the stethescope, this tube with which we look into the camp of the enemy—there is no doubt that it has diminished the sufferings of our patients, but has it really augmented the cures?

Suppose the remedies for diseases of the heart—I know not what remedies may properly be classed under that head, for in treating those diseases I use every possible remedy without confining myself to any one in particular—were all proved over again, auscultation being instituted before and after the proving; could the law of similitude, which, if applied by shallow heads is a shallow law, and might be used as a bag of sheep-skin, be applied to the uncertain symptoms furnished by auscultation? In that case the whole of homœopathy might go to ruin and be buried with a loud shout of derision.

We will suppose a case. A patient exhibits the symptoms *a b c*, these being the well known characteristic symptoms of the remedy P. From the symptoms *l m n*, revealed by the stethescope, we infer the existence of the disease N. The remedy P helps or at least affords great relief. In a second case the same symptoms may turn up, and the result may be the same. But now we meet a case characterized by the symptoms *d e f g*, which do not belong to the remedy P, but where the stethescope again reveals the symptoms *l m n*, from which we infer that the disease N again exists. In this case P will be of no avail. A third case turns up, where the symptoms *a b c* again make their appearance, but where the stethescope points to the symptoms *o p q*, and we feel constrained to infer the existence of an entirely different organic affection, R. In this case P will undoubtedly help again. Hence every thing depends on *a b c*, and scarcely any thing, if any thing, on N or R. I know this from experience; we shall now see what time will teach us. It seems to me a matter of course that the stethescopic symptoms should be of very little consequence, considering the innumerable quantity of the remedies which exist in nature, and the limited number of the discernible organic affections. A species of plants and a species of disease bear no proportion to one another. The same endless groups of elementary constituents as we find them in mountains, springs and seas, have to be resorted to in disease. How can lines of demarcation be drawn, and lines to boot, which sometimes depend upon mere accidental alterations of structure?

The cutaneous eruptions alone are sufficient to show the uselessness of those lines of demarcation. For years past I have

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ceased to consider the similarity of the cutaneous symptoms as of any consequence. How could a drug produce a herpetic eruption in a prover, if the herpes did not already exist in him? A remedy cures herpes, if it suits the whole organism, not otherwise.

The value of our remedies cannot be measured by pathological anatomy. Natural and drug-diseases are two entirely different conditions; the laws of one have no power in the other, nor can they have any, because those conditions are not only different from, but totally opposed to one another.

It is for this reason that even as early as 1834 I told my pupils in Allentown: In studying a disease, think that all remedies may help in the case; in studying a remedy, think that it may help in every disease. This proposition, which I think comes from Fechner or Helbig, has been made a corner-stone by me. Disease does not mean a single case. I know very well that there is such a thing as a classification of diseases; but pathological anatomy does not reveal the boundaries of diseases; it exhibits extreme *points*, but points are no *lines*.

DOUBTS CONCERNING THE PROPRIETY OF SUPPRESSING CHRONIC CUTANEOUS ERUPTIONS, ESPECIALLY THE ITCH, BY OINTMENTS AND CAUTERIZATION; SUGGESTED BY THEORY AND EXPERIENCE

TO

DOCTOR FRANZ PUFFER, OF VIENNA.

INTRODUCTION.

Among the numerous ailments with which mankind are afflicted from the cradle to the grave, the chronic cutaneous eruptions are undoubtedly the most universal and troublesome, but by no means the most dangerous, provided they do not become so by an essential change either in their nature or place (except those rare eruptions which incline to an ulcerative degeneration of the parts). Daily observation obliges us to admit, that a morbid action which takes place from the centre towards the periphery, is less dangerous than a morbid action spreading from the periphery towards the central organs of the organism, that the former may prove beneficial, and the latter destructive. In the tender babe, we see the curative efforts of nature manifested by

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the denser scales, formed in the most important regions of the scalp (the fontanelles), or by the mealy deposit or the humid crust with which the face becomes covered,* by the crust which sometimes extends over the whole scalp,† and becomes so frequently troublesome, on account of the vermin it harbors, by exsudations behind the ears, around the wings of the nose, in the bend of the neck, in the folds of the hip-joints, on the genital organs. Such morbid processes do not take place simultaneously with effusions into the ventricles of the brain, and the alterations of that organ accompanying such effusions; the healthy growth of such children, leads us to infer that their blood has the normal ingredients, and that their proper combination is maintained by the cutaneous eruption. On the other hand, it has been universally observed, that the frequency of hydrocephalus is proportionate to, and so far depending upon, the less frequent occurrence of tinea.

Naumann observes, in his Manual of Clinical Medicine, Vol. III. p. 371, "that an eruption, even after having lasted several months, fades away under the influence of a gastro-intestinal irritation, that it sometimes disperses or disappears entirely, and that it reappears and assumes again its former shape, as soon as the patient recovers from the gastric disturbance."

* *Aaskon* has seen violent convulsions following the indiscreet sudden suppression of the milk-crust. *Sachse* has seen fatal croup brought on by a similar cause (see his work on Angina Membranacea, Vol. I. p. 215). In *Hufeland's* Journal, Vol. XI. n. 4, several cases of a sudden suppression of milk-crust are mentioned, occasioning sudden death. According to *Meissner*, the consequences of a sudden suppression of that eruption by lead-ointment, are, malignant ulcers, inflammation of the eyes, violent spasms, and hydrocephalus. The author of this essay has treated a scrofulous boy of eight years, for a most obstinate inflammation of the eye, which had come on in consequence of the sudden suppression by lead-ointment, of an erysipelas on the wings of the nose.

† *Naumann* says, that tinea capitis frequently protects the patient against dangerous internal diseases.—*Alibert* has seen the most violent cardialgia, accompanied with leucorrhœa, arising from the artificial suppression of tinea.—*Autenrieth* tells us that a girl lost her healthy appearance and cheerfulness, in consequence of an eruption on her head having been removed by ointments. One year after the suppression, she died with dropsy of the brain.—*Edw. Morton* has observed several cases of inflammation of the brain in children, which came on after the suppression, either spontaneous or artificial, of tinea capitis; on the contrary, he mentions several cases where the inflammation disappeared, after the reappearance of the eruption.—Fourteen years ago I cured a most violent headache, which had come on in consequence of suppressed tinea, by frictions with tartar-emetic ointment; issues and internal remedies had been used in vain to remove the pain.

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We see every day, more or less considerable affections of children, arrested or terminated altogether, by the eruption of impetiginous cutaneous diseases; on the other hand, no child affected with the psoric miasm, is attacked with any considerable internal disease, unless cutaneous efflorescences had in the first place dried off and disappeared. Dr. Gœlis's experience (see Periodical of the Imperial Society of Physicians, July, 1845), that hydrocephalus arises from the spontaneous or artificial disappearance of chronic cutaneous eruptions, accords with my own experience, and that of other physicians.

It is by the formation of cutaneous eruptions, which have been accurately and rigorously delineated by the modern pathologists, that the integrity of the organic life is preserved. The appearance of vesicles, pimples, spots or blotches, frequently improves or even removes for a time or permanently, asthma, palpitation of the heart, chronic vomiting, cardialgia, hard hearing, and discharges from the ears, catarrhal and rheumatic affections of the eyes, megrim, dry coryza, and the numerous morbid phenomena depending upon hypochondria or hysteria. The most violent paroxysms of fever, sometimes end favorably and rapidly when nature succeeds in forming a few vesicles or crusts upon the lips. Hydroa and typhus are exceptions to that rule. According to *Schœnlein* typhus makes any impetiginous eruption whatsoever impossible. Typhus fevers frequently terminate critically, in the copious formation of furuncles. Every physician knows the semiotic significance of furuncles. Scabies ceases entirely on the supervention of typhus petechialis (see Rust's Manual of the Theory and Practice of Surgery, p. 459). According to my own observations, herpes of years' standing, disappears with the appearance of a deeper-seated constitutional affection, and reappears again when the latter ceases.

The correspondence existing between the various tortures, itching, etc. of the gout, and the appearance and disappearance of cutaneous efflorescences, is well known.

It is well known and proven that the sudden suppression of herpes or ulcers on the feet, in old people, has been frequently followed by apoplectic fits.

The cold-water cures which are effected by the formation of a critical eruption upon the skin, point to a correspondence between the cutaneous eruption and the internal disease.

It is undoubtedly this well known correspondence, between the cutaneous eruption and the internal disease, which has induced the great author of homœopathy to assign such a vast

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field to psora in the classification of the chronic non-venereal diseases.* It is in the psoric miasm, says Hahnemann, the origin of which is older than the most ancient history of the most ancient nations, that all the known and nameless chronic non-venereal maladies originate. In the remotest antiquity, and in the middle ages, those maladies manifested themselves, principally, by a degeneration of the skin (lepra, St. Anthony's fire, etc.); in modern times they have become reduced to the simple itch, but, by the suppression of the cutaneous symptoms, they have become the most universal, most destructive, and yet least known plague of human society, and have given origin to at least seven-eighths of all chronic non-venereal maladies.†

To his own observations on that subject, Hahnemann has added those of the first physicians of their age,‡ such as *Juncker, Hoffmann, Morgagni, Pelargus, Diemenbrock, Richard, Reil, Weber, Sennert, Ramazzini.*

The whole homœopathic literature may be considered a magazine, where observations relative to the correspondence of cutaneous eruptions and internal diseases are deposited. Following the example of their master, the disciples have kept that correspondence constantly in view. It cannot indeed be denied that only the smallest number of cases, which had been classed under a general head, were genuine itch or even mere cases of psydracia, a sort of pruritus with papulous efflorescence; but all those cases substantiate the fact, that cutaneous eruptions and internal diseases have been looked upon, by all intelligent and philosophical physicians, as related to one another. All those who have perceived, and who appreciate the co-relation existing between the cutaneous eruption and the internal disease, the danger accompanying a retrocession of the eruption and the increase of health accompanying the appearance of the vicarious eruption upon the skin, will admit that the psora-theory of Hahnemann is founded upon a great truth.

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* *Peter Frank* has classed all cutaneous eruptions, under the name of impetigines. *Hebra* applies the term impetigo only to the pustulous cutaneous diseases (see Hebra's attempt to classify the chronic cutaneous eruptions, according to pathologico-anatomical principles. Periodical of the Imperial Society of Physicians, May, 1845).

† The term *scabies* has been used by Hahnemann, in a much more comprehensive sense, than by Roman and Greek physicians. "*Scabiem,*" says Frank, "*latini nominarunt morbos fere omnes cutaneos, qui ob majorem pruritum ad scabendum invitarent aut cogerent infectos Græcorum psora non minus vagam ipsi lepræ subinde concessam significationem agnovit.*

‡ Comp. Hahnemann's Chronic Diseases, by Dr. Hempel.

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Even in syphilis, the physician prefers the development of the disease from within outward. The secondary forms of syphilis, such as affections of the throat, ulcers, cutaneous tubercles, blotches and spots, are much more readily and speedily removed than tophi; the sudden and artificial removal of the external symptoms of a disgusting syphilitic disease, has frequently been fatal.

The passage of a disease from one organ to another, is designated in pathology by the term "*metastasis.*" The German term "*versetzung*" (transfer), may induce the material notion that the metastasic process is accomplished by the migration of a pathological secretion from one organ to another, upon which it is deposited, by means of the circulating fluid (which is nowhere the case less than in this *process* of metastasis), as for instance, the excretion of pus and tuberculous matter in the urine, in cases of pulmonary phthisis. The laws of irritability conceived as dynamic principles will explain the process of metastasis, as this has been done with the most admirable lucidity by my teacher, *Ph. K. Hartmann* (see his Theory of Diseases, § 188, 189). *Hartmann* illustrates his definition of metastasis by the appearance of pulmonary phthisis after the sudden suppression of itch. By Hartmann's explanation, we are not obliged to admit that the wandering acarus corrodes the valves of the heart, or passes into the tubuli of the kidneys. We are indeed authorized to infer that the morbid process which had been established in the skin, and which had resulted in the formation of, and was afterwards maintained and favored by, the acarus, had, on account of its *sudden* suppression in the skin, deteriorated the circulating fluid, and that the organic transformations, so accurately described by pathologists, are frequently owing to that deterioration of the blood, and are so much more easily induced, as the original psoric process had occasioned a vitiation of the excretory and secretory functions, and had realized that disturbance of the vital forces, which was vicariously represented by the cutaneous efflorescence.

Even if we would mistrust our own experience of sixteen years, we could not decline receiving the testimony, which so many important authorities* have recorded in the works on diseases of the skin, substantiating the fact that a sudden, either spontaneous or artificial, suppression of cutaneous eruptions dis-

* *Prof. Bene, Bischoff, von Altenstern, Alibert, Bateman, Raimann, Richter, Sam. Vogel, Burserius, P. Frank.*

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turbs the organism and frequently affects it with an incurable disease.*

This correspondence becomes evident, even in cutaneous eruptions which continue any length of time. I am now treating an officer of fifty years, who has had a herpetic eruption on his right hand for some years past. For some time past he had likewise been affected with dryness of the throat, strangulation, occasional inability to swallow, sensation as if the throat became too narrow. This, however, was not the case; for the fauces and the opening of the pharynx were rather large, with shrivelled uvula and tonsils, and a narrow velum (which was not contracted by cicatrices); but on the posterior wall of the fauces I discovered several groups of aphthous excoriations, which sometimes made their appearance on the tonsils. (Andral calls that condition diphtheritis, Richter designates it as herpetic quinsy.) The affection of the throat was considerably relieved whenever new vesicles made their appearance on the hand, with violent itching. After an alternate use, for three months, of Spirit. Sulp. and Graph., afterwards of Petroleum and Merc. viv., the affection of the throat has disappeared entirely, and the eruption on the fingers and the dorsum of the hand has been reduced to one tenth of its circumference. There remains still a frequent hawking of mucus, and an itching of the fingers.†—Baron von C., a man of forty years, of a nervous and irritable temperament, who is frequently attacked with a boring-contractive pain in the left temporal region, is speedily relieved by the appearance of violently itching blotches on the feet.—A man of sixty-four years, affected

* Pulmonary tubercles may exist, without the phthisicky formation of the chest, and may be traced as results of noxious principles which occasion either a pure or a disguised tuberculous constitution of the humors. This is the secondary pure or more or less disguised tuberculosis, as occasioned by *exanthema* and *impetigo*, syphilis, anomalous gout, the suppression of natural secretions, or such as have become habitual, *the removal of inveterate ulcers*, etc. Rokitansky, Pathol. Anatomy, Vol. III. pp. 145, 146.

† I take this opportunity of stating, that I reject entirely the stereotyped phrase, The remedy is very good, excellent in this or that disease. Inasmuch as only such remedies are curative which actually do cure, it is a matter of course. that the symptoms which have been removed by the remedy, should be indicated, in order that the curative sphere of a remedy may be exactly known. Unless those symptoms are correctly described, it is of no use to report cases. We know that Hahnemann and his disciples were in the habit of expunging those symptoms which disappeared under the use of a remedy. This leads much more certainly to a proper knowledge of the curative powers of a drug than hackneyed praises.

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with arthritis, had suffered for forty years past with the most violent itching of the scrotum, frequently of the whole skin, of the intestines (as he expressed it), of the internal meatus auditorius, of the interior of the frontal cavity, etc. He had consulted many celebrated physicians abroad, and in his own country; but neither of them had done him any good. Homœopathic treatment had afforded him the most relief. Three years previous to his death, a considerable number of furuncles made their appearance on the feet and arms, on the hairy scalp, and on the face. While those furuncles existed the patient had no itching. He frequently asserted that he would die suddenly, and he predicted his death with tolerable certainty a few days previous to its taking place. *The itching disappeared suddenly*, after which the patient was attacked with a violent febrile erethism, restlessness, delirium, coma, collapse, and cold sweats. He died forty-eight hours after the itching had ceased.

If we consider the cutaneous surface as the most extensive and the most important secretory organ, the secretory process being carried on at every moment of our lives, imperceptibly in health and perceptibly in disease, and removing out of the organism all those substances which have become useless to its normal life, or which have been vitiated or occasioned by disease, we cannot help regarding any morbid transformation of the skin as a critical process. Even of the itch, which cannot be cured without a remedy, Rust maintains, in his Manual of the Theory and Practice of Surgery, p. 456, that it has its critical symptoms like other diseases. He discovers them in the sweat and urine, the latter depositing a sediment. The sweat, and in general the exhalations from itch-patients, have a disgusting, musty smell (see Schleicher, Dissert. de odorum in diagnosi morborum dignitate, Halæ, 1817.) He considers the desquamation of the skin as a critical symptom, an effort of the organism to recover its health. Similar critical phenomena, according to Peter Frank,* exist in the animal and vegetable kingdom; the mysterious processes of depositing and renewing the scales, skin, feathers, etc., are turning points in the life of animals and plants, and affect the whole organism.

* Ex animalibus minora non pauca vel ipsam quotannis pellem aut testam sub manifesto aegritudinis apparatu abjiciunt. Quas plumis hæc ornavit, aviculæ, quo tempore illas amittunt, obmutescere illico, solitudinem quærere, appetitu privari, languere et manifeste aegrotare observantur. Pars major morborum arboribus infensorum primam in cortice foliorumque externa superficie *ceu vegetabilium cute* originem agnoscit (the psora of plants).

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The physicians of the old school have frequently endeavored to bring about such results by artificial means. It cannot be denied that they have sometimes accomplished those results palliatively.* Most of the older physicians devote an especial chapter to the consequences of the retroceding or suppressed itch. Can it be supposed that they should all have been mistaken?

Modern physicians, says Schœnlein, do not consider the suppression of impetigo dangerous to health; they even imagine that it is the highest object of art to remove the eruption as speedily as possible. *Experience, on the contrary, points to numerous cutaneous eruptions among the lower classes, all of which have to be considered as post-scabial diseases.* Neumann says that in many cases we dare not think of removing chronic cutaneous eruptions, inasmuch as they are substitutes, imperfect it is true, for more important diseases. If they disappear at last of themselves, then, as Klein observes, dropsy or hectic fever is to be apprehended. The evil consequences of the artificial suppression of chronic cutaneous eruptions are proportionate to the extent, intensity, and duration of those eruptions, to the rapidity with which they had been suppressed, and to the greater or lesser want of stability of the internal health which was essentially depending upon the maintenance of the external eruption as a vicarious symptom of the internal disease. If herpes, says Schœnlein in his General and Special Pathology and Therapeutics, is removed from the skin, symptoms of nervous irritation make their appearance in the region of the stomach, an inclination to vomit after eating, pain along the course of the pneumo-gastric nerve. Those symptoms disappear when the herpes reappears on the skin. The partial or complete success in reproducing a chronic eruption upon the skin, depends upon the interval which had elapsed between the present disease, which had perhaps resulted already in the formation of fungus medullaris or tubercles, and the original eruption. The longer that interval, the less can be expected of a reproduction of the eruption upon the skin. According to Schœnlein, the itch has been reproduced after a lapse of two or three years (I do not recollect having ever witnessed that fact in my own practice); as

* The artificial cutaneous diseases have not been observed with sufficient care heretofore. How differently is the skin affected by armoracia, mezereum, caoutchouc, cantharides, euphorbia, sinapis, rhus, vegetable and mineral acids, metallic oxydes? Ammonium causticum, when rubbed into the sound skin in conjunction with the powdered bark of mezereum, is said to cause an eruption similar to itch. (See Wenzel's Post-scabial Diseases. Sec. ed.)

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respects herpes, that reproduction is impossible even after a suppression of but a few months.* A retarded restitution of an impetiginous eruption upon the skin does not entirely remove the disturbance which the suppression of that eruption had caused in the organism. But the mere temporary alleviation of suffering which is realized by the partial reproduction of the original cutaneous eruption, is sufficient to show the co-relation existing between the internal malady and the vicarious symptom upon the skin. I crave permission to mention more in detail a case which illustrates that fact.

Miss H., of twenty-five years, of a lymphatic constitution, was infected with itch five years ago. According to her description, it must have been the *scabies sarcoptica*. The itch, which had resisted for a long while the efforts of her physician, either because his applications were not powerful enough, or because the girl was remiss in using them, was finally suppressed by a lead-ointment without the knowledge of the doctor. In her early childhood the patient had frequently been affected with catarrhal symptoms. These showed themselves very frequently ever since the itch had been suppressed. Soon after she was attacked with a kind of pleurisy which extended as far as the endocardium, and, by that fact, not only confirmed her statements about the original malady, but accounted likewise for the palpitation of the heart which had set in afterwards, for the shortness of breath, and for the illness which had developed itself during the last year. When I took charge of the patient, I found a well marked insufficiency of the bicuspid valves, contraction of the right auricle, hypertrophy with enlargement of the right ventricle, accompanied with incipient secondary anasarca and ascites. During a treatment of several months she twice experienced considerable relief for several weeks, with entire relaxation of the abdominal walls and disappearance of the abdominal as well as thoracic effusion, the latter having supervened lately, and oppressing the organs of respiration and circulation to such an extent that her face became quite livid, and her life seemed in imminent danger. Whenever the improvement, which could scarcely be expected,† set in, *it came after a papu-*

* See the epistles of Dr. Y. relating his conversion (Dresden and Leipsic, 1837,) where, page 17, a case is detailed of reproduced itch after it had been suppressed *four* years. Ed.

† The first improvement was subsequent to the alternate use of tinc. sulp., several drops a day, and the third tritur. of kali. carb., dec. scale. The second time it was brought on by the daily use of half an ounce of the juice of scilla maritima in conjunction with the inspissated juice of dog-grass.

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lar eruption had made its appearance on the hands, arms, especially between the fingers, but also on the neck, chest and feet, and itching so violently, especially at night, that the paient was deprived of her rest, and now suffered as much from the sleeplessness as she formerly did from her difficulty of breathing. Nevertheless (with an abundant flow of urine) she had a good appetite, her strength increased, she gained flesh, and the only symptom which precluded all hope of a total recovery, which the patient and her friends were fond of entertaining, was the murmur about the heart and the erethism which constantly existed about that organ. In proportion as that eruption and the itching disappeared, which took place without any specific cause, the patient was attacked with a stinging pain in the side of the chest, which became very violent at times. Gastric derangement, fever, infiltration of the integuments, dropsical accumulations in the abdomen and chest, supervened. Instead of the former sound a bellows' sound was now heard over the right ventricle. The secretion from the bladder was again interrupted, and wide-spreading ulcers, secreting a profuse quantity of fetid serum, broke out on the inner surface of the calf. The fluid which was drawn from those ulcers, contained a good deal of albumen; the urine likewise, upon being tested with concentrated nitric acid, exhibited a copious, white and light precipitate. The patient having been treated by another physician during the last months of her existence, her relatives informed me that a gradual exhaustion and suffocative catarrh had terminated her sufferings. No post-mortem examination had been instituted. My diagnosis and the specific cause to which I traced her disease, suppression of itch by lead-ointment, had been confirmed by the most distinguished physicians of Vienna, who had frequently been consulted by her last medical attendant.

This case shows very clearly the co-relation existing between the itch-eruption upon the skin and the internal organic disease, and therefore deserves particular consideration. This case likewise shows the correctness of Hahnemann's observations. A cure, says he, cannot be effected by reproducing the original eruption upon the skin. *That eruption is a mere pseudo-eruption, extremely evanescent,* and is moreover so rare an occurrence that it is impossible to rely upon it as a curative means.

I may here mention the case of a journeyman blacksmith of twenty years, and of an athletic form, who had the itch, with which he had been affected for some months, suppressed by ointment, and who, a fortnight after the suppression had taken place, and during which time he had constantly complained of an intolerable itch-

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ing of the hands (which moreover exhibited white shining spots as so many witnesses of a previous pustulous eruption), was attacked with a general illness, trembling of the hands, colic, difficulty of breathing, loss of appetite, great debility, and a dyscrasia which was recognized by a discoloration of the cheeks and lips. His desponding and whining mood contrasted strangely with his athletic form, and exhibited the image of an artificial grief. I am not disposed to overlook the pernicious effects of the lead, although modern researches have shown that the human body can take in a considerable quantity of that substance without any injury. A year ago I treated a case of tuberculous phthisis which had been brought on by suppression of the itch by means of an ointment, and which went through the course described by *Weitenweber* and *Autenrieth*.

The observations of the most celebrated physicians accord with my own. According to Schœnlein, consecutive diseases of the itch, the sudden suppression of which, he says, is especially dangerous in young people entering upon the age of puberty or *when the itch had appeared spontaneously*, are: itch-vertigo, itch-rheumatism, itch-amaurosis, itch-paralysis, neuralgia of the extremities and the abdominal nerves, epilepsy, *chlorosis psorica*, mania, inflammation of the joints, especially the knee and hip joints, tubercles of the lungs or stomach. *Peter Frank* (de Curand. Hom. Morbis, Lib. IV. pp. 40–50) likewise points to the evil consequences resulting from a merely local treatment of impetiginous diseases, and *Aug. G. Richter* says that there is no disease which might not be brought on by that treatment. The consecutive diseases are generally much more considerable than the original cutaneous malady; frequently life is endangered by those diseases, which have to be considered as constantly opposing the reactive vital force, inasmuch as they either exist in the place of the cutaneous eruption, or affect specifically a single organ on account of the primitive vicarious eruption having been suppressed. Some of the consequences of suppressed eruptions upon the skin are: habitual diarrhœa, lienteria, *fluxus cœliacus*, leucorrhœa, diabetes, tabes mucosa, chronic catarrhs, asthmatic conditions. Other consecutive diseases are: glandular swellings, indurations of the liver, spleen, and of other internal organs, tubercles in the lungs, organic degenerations of the heart and the larger vessels, arthritis, hæmorrhoids, rheumatism, typhoid diseases, violent cardialgia, colic, epilepsy, paralysis of every sort, and even sudden death by apoplexy or suffocation. Rust says in his Manual of Surgery that the metastasis of the itch was known to the older physicians, and

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that the modern physicians have neglected its importance; that Autenrieth had restored it to the important position it once occupied. Among the post-scabial diseases mentioned by Rust, the following are the most important: inflammations of serous and fibrous, less frequently of mucous membranes. It is remarkable, says Rust, that in modern times so many organic diseases of the heart have been pointed out as consequences of suppressed itch. In Horn's Archive, 1832, No. 4, Albers mentions tubercles and nervous diseases as consequences of suppressed itch. He moreover mentions as post-scabial diseases the same diseases which *Schœnlein*, *Richter*, *Neumann*, *Frank*, etc. have observed as such, and which we do not quote here in order to avoid repetitions. Of the scabial metastasis *Most* says, that no truly practical physician can deny it.

[To be continued.]

TO OUR READERS.

The conclusion of the article "On the Value of Auscultation and Percussion in Diseases of the Heart," will be given in our next number.

In the present number we lay before our readers two articles which seem to be opposed to one another, the one by Dr. Hering, the other by Dr. Peters. The former attaches the greatest importance to the "subjective" symptoms, the latter to the pathological phenomena. So it would seem at least to judge from their articles. It seems to us that the two sides might be, and ought to be, one. Suppose we have a case of membranous croup. In such a case we should select the remedy which would not only correspond to the subjective symptoms but also to the pathological phenomenon, the false membrane. We would do the same in treating hydrocephalus, anasarca, hydrothorax, scirrhus of the liver or spleen, albuminuria, and any other disease which is characterized by specific pathological degenerations. If, in a case of tuberculous meningitis, two different remedies corresponded to the subjective symptoms, and only one of them to the pathological degeneration, we should select the latter in preference to the former; if the latter remedy were not known, we should then employ the former, and do as well with it as we can. It does not seem logical to us to deny the claims of the pathological school upon

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the ground that we do not know as yet the specifics which are capable of simulating the various pathological degenerations occurring in disease. We might as well deny the claims of homœopathy upon the ground that we do not yet know all remedial agents. By admitting the necessity of studying the pathological phenomena we do not admit the reasonings of pathologists in favor of large doses, or the derision with which some of them seem to treat the symptoms. The magnitude of the dose or the potency does not depend upon the intensity of the symptoms, or the extent of the pathological degeneration, but upon other causes which we shall point out some time or other. To sum up our ideas, we believe that that remedy is most homœopathic to the disease which not only simulates the subjective symptoms, but also the pathological phenomena. The subjective symptoms, however, are of primary importance. We know that corrosive sublimate produces albuminous urine; but unless the subjective symptoms correspond, it will not cure a case of Bright's disease; we can say this from experience.

ON ORGANIC AFFECTIONS OF THE SPLEEN.

BY JOHN C. PETERS, M. D.

The principal object of the present article is to draw attention to those drugs of which we have positive evidence that they produce alterations of the size, structure, appearance, &c. of the spleen.

1. *Smallness of the Spleen.*

According to Noack and Trinks, *Quinine* renders the spleen very dry, remarkably contracted and extremely pale; hence it produces a state exactly opposite to that of enlargement and congestion although both it and Peruvian Bark have been accused of producing enlargement of the liver, spleen and mesenteric glands, also obstructions and infarctions of these organs. This accusation has only been brought against Bark and Quinine when used in intermittent and remittent fevers, which it is well known are abundantly competent to produce these engorgements without the aid of other causes. Again, the curative effects of very large doses of Quinine

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in enlargement of the spleen, tend to prove that this drug causes diminution in size of that organ. Piorry says, under the use of Quinine the volume of the spleen may diminish in half an hour; he is frequently in the habit of measuring the size of the spleen by percussion, in intermittent fever, then giving a large dose, say 30 or 40 grains of Quinine, and showing the consequent diminution of the spleen to his class before quitting the ward. Thirdly, Peruvian Bark contains a quantity of tannic acid which renders it astringent, hence we would presume that its primitive effect upon the spleen would be similar to those stated by Noack, rather than the contrary. Fourthly, the general effects of Peruvian Bark are usually considered more similar to those of Iron than of any other drug, and according to Noack, Ferrum renders the spleen unusually small and compact; Pereira says that in animals to whom Iron has been given for a considerable time, the spleen has been found smaller, harder and denser, an effect which is supposed to be owing to the increased contractile power experienced by the veins of the abdomen; the liver is also said to have been affected in a similar manner, though in a somewhat slighter degree.

Cuprum aceticum renders the spleen pale and empty of blood; Cuprum oxydatum renders the spleen very small. In animals poisoned with Cantharides the liver and spleen are found pale and empty of blood. Bismuth renders the spleen pale in general, but frequently small apoplectic effusions of blood may be seen shining through its capsule. These are the principal remedies which are known positively to produce anæmia and atrophy of the spleen; the diagnosis of diminution in size of the spleen may be made out by means of percussion, but the symptoms which attend it are unknown.

2. *Enlargement of the Spleen.*

Cicuta virosa congests and softens the spleen; in cases of poisoning with Colchicum the spleen and liver are found congested with much black blood: Bromine causes congestion of the liver and spleen; Hydrocyanic acid causes an afflux of much fluid, dark, violet blood to the liver and spleen; Ignatia causes considerable enlargement and softening of the spleen; Belladonna causes congestion, blueness, brittleness and softening of the liver; also great softening, congestion and mellowness of the spleen; according to Kuttner, a rapidly arising, non-inflammatory, soft

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and not painful swelling of the spleen belongs among the signs of poisoning by Prussic acid.

Diagnosis of Enlargement of the Spleen.

According to Bright, certain splenic diseases are attended with a peculiarly unhealthy, sallow, anæmical color of the skin; the slight tinge of yellow which is often present in the face may be mistaken for a bilious tinge, but according to Sprengle and Eberlee chronic disease of the spleen is almost always attended with a remarkable *bluish* tinge of the sclerotica, while in bilious affections the whites of the eyes are invariably more deeply tinged with yellow than any other portion of the surface.

Fever and ague is one of the most common causes of enlargement of the spleen; Piorry says that this organ is invariably enlarged in intermittent fever, and constitutes the anatomical character, or even cause of this disease; he also states that the enlargement persists as long as the fever continues, and when the ague is imperfectly cured the spleen remains enlarged, and a relapse may be most confidently predicted; on the other hand the paroxysms of fever and ague never continue, or return after the spleen has regained its natural volume.

The majority of physicians cannot diagnose an enlarged spleen, before it becomes so much enlarged as to project below the left false ribs, but by means of percussion the diagnosis is easy; a normal spleen is about four inches long, three inches broad and one inch thick, and rarely dampens the tympanitic sound given forth by the subjacent stomach and bowels; hence dullness on percussion in the left hypochondriac region is a valuable diagnostic sign, especially when blueness of the conjunctiva, a sallow and anæmical color of the skin, dull tensive pain in the left side with difficulty in lying upon it, and a sense of dragging weight from the left when lying on the right side, a burning and oppressive sensation in, and acidity of, the stomach, with other dyspeptic symptoms attended with a gloomy, morose, desponding, or variable and fretful temper, vertigo when the head is raised, or on sitting up, darkness before the eyes, flow of a few drops of black blood from the left nostril, etc. etc., are present. These signs are especially valuable if they occur in a patient who has suffered with fever and ague, although many years ago; or in females with suppression of, or scanty, menses. (*Schœnlein, Eberlee.*)

When the spleen is sufficiently large to project beneath the

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ribs, it forms a smooth, oblong, solid tumor, felt immediately beneath the skin, proceeding from under the left false ribs a little behind the origin of the cartilages, advancing towards the umbilicus in one direction, and descending towards the crest of the ilium in another, often filling the upper part of the lumbar space. The tumor is generally moveable, often rounded behind, with a more or less sharp edge in front, where it is often notched and divided by fissures. It may be mistaken for chronic abscess of the integuments; for scirrhus of the left half of the stomach; for enlargement of the left lobe of the liver; for a diseased omentum; for fæculent accumulation in the colon, diseased kidney, ovarian dropsy, hydatids, etc. (*Bright.*)

1. Scirrhous thickening of the left half of the stomach may occasion a tumor descending below the margin of the left ribs; it may be unattended by vomiting, and be accompanied by a marked sallowness of the countenance somewhat like that which bespeaks spleen-disease. But such a stomach will have a harder feel than the spleen; it will be sonorous on percussion, while an enlarged spleen almost always gives forth a dull sound, for the intestines do not at any time rise before the tumor; percussion will only deceive when the edge of the spleen is thin, and a portion of bowel filled with air is situated directly beneath it, but marked and extensive dullness will be found obliquely upwards to the left, and posteriorly. (*Bright.*)

2. An enlarged left lobe of the liver may be traced over to the right side; while the bilious tinge of the skin, conjunctiva, urine, &c., will assist the diagnosis. (*Bright.*)

3. A diseased, or corrugated omentum, descends less from beneath the left false ribs (and percussion will show that it does not ascend as high up beneath the left ribs as an enlarged spleen must do); it cannot be traced as far backwards towards the left lumbar region as an enlarged spleen will extend, while it will reach farther across the abdomen, and is rough, knotted, hard and uneven, while the latter is smooth. (*Bright.*)

4. An enlarged left kidney at times advances towards the left hypochondrium and presents a tumor nearly in the region of the spleen; but its chief bulk is situated much farther back, and percussion will show that it does not extend as high up under the ribs; the enlarged kidney is much less moveable than a big spleen, it does not fall forward like the spleen when the patient is placed on his hands and knees; percussion will show that the intestines lie before the tumor, while the lumbar region will be very dull on

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percussion when the patient lies on his face, and there will be some peculiarity about the urine. (*Bright.*)

The occurrence of hæmatemesis should draw our attention to the spleen, especially if it occur in a patient who has suffered with fever and ague; we have seen it occur in one case nearly twenty years after the patient had been a martyr to intermittent fever; and in a second case, twelve years after. Watson says numerous instances are on record of gastric hæmorrhage going along with evident enlargement of the spleen, and in some of them the spleen has been observed to diminish in bulk, in proportion as blood was poured out by the stomach. He has observed such cases himself, and cites Morgagni, Frank and Latour as having witnessed others. In fact, either enlargement of the spleen, or granular liver, or perforating ulcer of the stomach, occur in the majority of cases of hæmatemesis.

TUSSILAGO PETASITES.

A case of complete impotence of three years' standing, with impaired intellection, has been recently *cured* by Dr. Gray with the tincture of that plant. The impotence came on shortly after a cancer of the left wing of the nose had been removed by ointment.

CALMIA LATIFOLIA.

Three cases of prosopalgia Fothergilli have been lately cured by Dr. Gray with the tincture of that plant. In one of the cases 1 drop of the tincture was given in the afternoon, and 2 drops at midnight, producing a frightful exacerbation of the pain.

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CALCAREA CARBONICA.

BY CROSERIO.

Translated from the 'Journal de la Medicine Homœopathique.'

BY JAMES KITCHEN, M. D., PHILADELPHIA.

The mission of the physician is the cure of disease; and since the genius and the labors of Hahnemann have at last given us the means to fulfil it, we should endeavor no longer to merit the reproaches of a new Sydenham, to do nothing but *confabulare* about diseases, but occupy ourselves with incessant study respecting these precious means of cure: for, *non verbis, sed operibus, medentur morbi.* With such views I now submit some observations on *Calcarea carbonica.*

The different beings in the world may be studied under different aspects, according to the point of view at which the observer is placed. Their exterior form is the domain of the naturalist; their constituent principles, that of the chemist, &c. The physician should, above all, study that interior power with which they exert an action on the vital force of living beings, so well demonstrated by the experiments of Hahnemann, and which, on this account, an ingenuous physician would absolutely call Hahnemannism. This study should, above all, be the subject of the meditations of a homœopathic physician, by day and by night. It is in consequence of my thorough persuasion of this, that I propose to myself, for my first study, to submit the following observations.

The *Calcarea carbonica* of Hahnemann is a substance almost completely excluded, by modern physicians, from the materia medica, at least as to its internal use. The school styled physiological, not knowing whether it ought to place it in the class of stimulants or debilitants, has thought best to consider it exclusively in its physical and chemical properties in determining its use, restricting in this way its employment in external applications as astringent and anti-putrid. Nevertheless, the ancients had recognized its efficacy in a great number of diseases: in sour stomach and chronic diarrhœas, intermittent fevers, with puffy liver and spleen, leucophlegmasiæ, scurvy, stone in the bladder, gravel, tetters, itch, pulmonary consumption, and the internal ulcerations of the kidneys and bladder; in scrofula, lacteal engorgements, leucorrhœa, ulcers of the neck of the womb, and

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extremities. Among the proofs of the dynamic action of lime on the living body, we should include the serious alterations which newly-built houses so frequently produce, which cannot be attributed altogether to humidity; these effects, reported by Desbois de Rochefort, agree very well with those observed in the experiments of Hahnemann: sneezing, frequent cough, slight affection of the throat, with constriction of this part, desire to vomit, colic, diarrhœa, dysentery, a constriction of the chest, and above all, paralysis. We saw a patient, under this influence, with many cold abscesses in different parts of the body. The diseases to which the workers in calcareous earths are liable, observed by Ramazzini, also agree with the pure symptoms of calcarea. They are, tubercular concretions in the lungs, either expectorated or observed in the dead body, violent colics of the stomach and intestines, dryness of the mouth, tremblings, paralysis, obstinate constipations, constrictions of the throat, diarrhœa, difficult urination, itchings, dryness of the skin, &c. These different diseases, produced by the prolonged action of lime, can no more be attributed to its physical or chemical action on the fluids, than the yellowness of the skin or jaundice produced by a fit of anger.

What is remarkable in the observations of Morton, Willis, Bateus, Bulè, and others, on the empirical use, or after the supposed ideas of the chemical action of lime on the fluids of the animal body, is, that all the curative effects observed by them turn out to be the precise expression of the homœopathic law, demonstrated by direct experiment, as is easily proved by the numerous symptoms, which perfectly represent all the varieties of sufferings in which it has been useful in their hands: thus, Hippocrates had already recommended lime, on account of its astringent quality, in chronic diarrhœas, and Grangier reports, in the memoirs of the Academy of Medicine, several observations of its utility in this disease, among others of a soldier reduced by debauchery, afflicted with hemorrhoids and worms, voiding mucous, bloody, ichorous discharges, and in a state of complete marasmus, with earthy aspect, &c., obstinate under all treatment, and cured in three weeks by lime water.

Having observed that blood mixed with lime water did not putrify so readily, Robert, Morton, Pringle, and Macbride, recommended it in putrid fevers, hectic fevers, and marasmus. We know that among the symptoms of lime some of the phases of these diseases are perfectly represented.

This antiseptic action also caused it to be recommended in

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atonic ulcers. Macauley relates, in the memoirs of the Medical Society of London, the cure, by the administration of lime water internally, of an enormous ulcer of the leg, with swelling of the limb, which had resisted twenty years' treatment. Baumbach reports the cure of a cancer of the breast, by the same, internally administered on its supposed antiseptic property.

But the most frequent and most generally recommended employment of lime water is that which has been deduced from its chemical action on vesical calculi. Vilth, Butler, and other experimenters have observed that these calculi were soluble in lime water, and that even the urine of those who had drank of it, and in which a calculus was placed, rendered it soft in a few days. After these facts, all authors, even to these latter days, who have written on urinary calculi, have recommended lime water as the best lithontriptic. The celebrated Robert Walpole obtained from its use, prolonged for some time, the entire cessation of suffering from a stone in the bladder.

De Haur, Willis, Adam, and a host of others, though they could not obtain the disappearance of calculi by its use, assure us that the sufferings on account of them ceased. This agreement in the observations of physicians who have made use of this medicine, proves the reality of the dynamic action of lime on the urinary organs. Butler even assures, that, during the first days of its use, the sufferings increase. Thus there was a veritable homœopathic aggravation. He observed that the patients passed a thick, dark urine, like to coffee. The nephritic pains produced by gravel have also been cured by this remedy, continued a long time. Willis reports a remarkable example.

From these facts it has also been used in the calculous concretions in gout and rheumatism. Macbride and With have observed, that if it did not cure the gout entirely, it rendered the paroxysms less frequent and strong, and that it exempted the patients from stomach affections, especially of acidity which troubled them much.

The alkaline nature of Calcarea has caused it to be recommended in acidities of the primæ viæ. Pringle and Macbride also gave it in weakness of the stomach. The pathogenetic effects of this remedy correspond with all these symptoms.

Gaubius relates that a man having swallowed crab's eyes, was seized with swelling of the face, with red spots over all the body.

Hahnemann, in submitting lime to direct experimentation, has really enriched the materia medica with one of the most energetic powers, in giving us the means to distinguish the numer-

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ous morbid conditions in which it may be employed with success, notwithstanding the rejection of it by modern physicians.

We shall now run over these cases according to the pathogenetic symptoms, and the results of chemical experience.

The symptoms 882–93 and 1016 express a deep seated alteration in the arterial capillary system and in the vital force, by the want of internal heat and the excessive susceptibility to cold.

The symptom 900 confirms this peculiar action on the capillary system, by the *continual excessive sweats* and *on the least motion.*

The symptoms of 915–7 by the production of excrescences on the surface of the skin, showing a special action on the functions of fibrillary nutrition and the development of tissues; 930 indicates the same action on the osseous system; 935–42 excessive weakness; 944 disposition to and syncope.

All these symptoms demonstrate the efficacy of this remedy in diseases which effect the elementary tissues of the body and which preside over nutrition and growth. To this property it owes its utility in the ages of infancy and childhood, in the affections of glands and of the lymphatic system, the excrescences and tumors produced by the development or formation of abnormal tissues; in the disease of bones, rickets and vices of conformation. Thus, in children, whilst the development of the organism in dentition is irregular, too slow, or accompanied by sympathetic sufferings, the calcarea has been useful in an infinite number of cases.

When the development of the osseous structure is too slow, the fontanelles remain open, the long bones bend, or their extremities swell, the child is weak in its legs and loins, scarcely able to sustain its weight or to walk, in such cases the calcarea, preceded by a dose of sulphur, is of incalculable utility.

A boy, 15 years old, very psoric, very small and slender, his limbs attenuated and his head too large for the rest of his body, suffered with excessive headache on any application of mind; in infancy he was weak in his knees; was very timid, especially at night. Two doses of calcarea, at 45 days interval, preceded by one of sulphur, brought about such a favorable change, that, six months after, his growth, which only increased 6 or 8 lines a year, had gained 4 inches; his limbs, the hands, and above all the feet, had become large and strong, such as those of young men who attain an ordinary size.

My friend Luther has related to me an observation of a girl

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of 7 years of age, afflicted with *cyanosis*, which presented all the symptoms of the abnormal permeability of the arterial canal, by the difficulty of breathing, the irregularities in the circulation, the blue color of the skin, &c.; the remedies made use of, according to the apparent symptoms, produced little or no effect on the principal affection; one pellet of the 30th attenuation of calcarea, effected in six weeks a radical cure, probably by restoring the part illy formed to its normal condition.

The ganglions, which different homœopathic physicians have cured, and of which I have just had a remarkable case in a girl of 20 years of age, who suffered at the same time with constipation and weak stomach, with too abundant menses, are still a proof of the action of this substance on the reproductive system, to which alone seems to be due the production and increase of these superfœtations of abnormal tissues which correspond with symptoms 915, 917, 918, 919.

Kreutschmann has cured condylomata and warts.

Another symptom which also indicates its action on the capillary system is excessive thirst and hunger, represented by symptoms 386–96.

The symptoms of glandular swelling 2, 4, 5, 6, 7, 8, 9, 496, 500–2 indicate its action on the lymphatic system and scrofulous affections.

This predilection of its action on the system of nutrition indicates its utility, in general, in the age of increase, in the diseases accompanied by emaciation and excessive embonpoint.

The symptoms 593–610 and 698, so remarkable on the female genitals, prove its efficacy in the diseases of this sex. According to these symptoms, lymphatic and nervous constitutions would seem to be most benefited by it.

After the general conditions relating to the action of lime, we proceed to examine successively the particular organs and their ailments, which respond to the symptoms related in the materia medica and the examples of cure due to it.

Calcarea has a powerful action on the dermoid system. The symptoms 112–25, 183–90, 238, 245–7, 255–68, 503–7, 370–3, 593–8, 696, 725, 746, 771–5, 810–15, 850–5, 903–16, symptoms of different degrees of itching or of eruptions on different parts of the body, are proofs. Yet, this remedy has not been much used in these affections. I have had opportunities of witnessing remarkable effects in dry tetters with swelling of the cervical glands and of those of the mesentery, where alone it has sufficed, in repeating it monthly, to perfect cures in 4

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months. An excessive itching of the scrotum and of the perinæum, with a considerable hemorrhoidal affection, was cured by a single dose. Generally it is available in dry tetters with itching.

It has many symptoms belonging to the nervous system; 191–2, 270, 745, 748, 751, 776, 783, 841, 876, 920–5, are sufficiently characteristic, especially the last.

The cure of chorea, reported by Rummel, should, in a great measure, be attributed to its special action on the diseases of the age of growth. I have recently seen a case of a little girl of 7 years of age, light complexion, and of a very well developed mind, in which bell. cina. and calc. cured a chorea of 6 months' standing in 4 weeks.

Dr. Ruckert cured an epileptic by a single dose of this remedy, which Hahnemann particularly recommends in this disease, according to symptom 925.

Calcarea has a well marked action on chronic affections of the head, caused or increased by the application of the mind, as I have often observed. Hartlaub has noticed that it was useful when the headache was accompanied with pressure on top of the head, and was increased in the open air, or when it consisted in a drawing pain in the forehead, with coldness of this part, and by lancinations in the right side of the head, with pain when touched.

It is a precious remedy in the diseases of the eyes; it has, with belladonna and sulphur, a special action on the different forms of inflammation of these organs, and on the alterations of vision, especially in scrofulous subjects afflicted with glandular swellings. The numerous symptoms 129–178, and very remarkable ones, announce its effects, among which we should remark the cure of ophthalmias, produced by foreign bodies introduced into the eyes. I have had three examples of its efficacy when there existed a beating in the eye or eyebrow, either with or without headache of the same nature.

The symptoms 198–205 would lead us to presume its utility in neuralgia of the face. I have seen it of benefit in a very severe suborbital neuralgia, the return of which it entirely prevented; its efficacy in this case, has doubtless also been of service, because this neuralgic case offered the peculiarity of always showing itself after the prolonged use of milk, a character peculiar to lime. Two hours after taking the remedy, I felt during 10 minutes, the same kind of sensation which caused my disease, but in a much less degree, and without even being pain-

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ful. Since this time, I have not had even a trace of this horrible affection.

It is a powerful remedy against chronic affections of the ear, especially of hearing; the symptoms 210–42 are very prominent, so that it has been one of the most useful means, in the hands of homœopaths, against deafness; Kreutschman has cured a polypus of the auditory canal with it.

The disagreeable and obstinate affection of swelling of the upper lip, in scrofulous children, has yielded to calcarea. Hartlaub has seen it useful when in addition the end of the nose was swollen with crusts in the nostrils.

Its action on the glandular system explains its usefulness in goitre.

We have already spoken of its action on the digestive organs, in which it is a precious medicine. Hartlaub has found it useful in pyrosis, which took place before and after eating, especially sweet things, and in which the eructation of fluid took place only after meals, and was accompanied with the rejection of food; in abortive regurgitations; pain in the right side of the abdomen, and lancinations in the lower part of the same, in children, without appetite, with desire to keep quiet; in the continual regurgitations after meals; pressure at the stomach, something constantly rising up, chiefly when the stomach is empty—at same time intermittent anxiety, bad humor, vertigo, palpitation, many days' constipation, loss of appetite, and emaciation; in chronic cramps of stomach, with vomiting of food, bitter mucus, and yellowish diarrhœa. The action of carbonate of lime in a chronic gastralgia was followed by vomiting of a large quantity of matter, which cured the disease,—which leads us to suppose that it may be useful in internal abscess.

Calcarea is specific in the swelling of the mesenteric glands of children, and in the diarrhœa which accompanies dentition. Though our illustrious master said that the diarrhœa of lime appeared to be the effect of large doses, this medicine has not been the less efficacious in chronic diarrhœas with ulceration of the bowels and marasmus, and in that which is an accompaniment of consumption. Nevertheless calcarea is most useful in obstinate constipation. The symptoms 641–649 and 507–520 show too clearly its effects on the intestinal extremity, that it should not be of great utility in the diseases of this part, and in the tetters, hemorrhoids, and fistulæ, of which Hoffbauer cites several cases.

The numerous symptoms produced by it on the urinary organs lead us to suppose that it may be useful in vesical catarrhs.

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Kreutschman has cured a polypus of these membranes. Under its action the patient passed, by the urethra, a mass of polypus of the size of an egg, in several pieces: might it not have been only coagulated blood?—the presence of the polypus had not been otherwise determined. In this case, the lime acted on the sanguine capillary system. I do not know whether it has been yet tried by homœopathic physicians in vesical calculi; it is probable that at least it would assuage the sufferings of the patient, as the allopaths have observed it to do in the form of lime water internally. Only we should have no fear of poisoning our patients, as was observed in a case reported by Bettahen in his experiments on the lithontriptic virtues of lime water.

The female genital system is affected in a special manner, as we have already had occasion to remark; and when the menses are too abundant, are too advanced and preceded by severe colics, it is a characteristic indication pointed out by Hahnemann, and which experience daily confirms. A menorrhagia in a young girl in pulmonary consumption, which came on at the least motion or emotion, which sabina, secale, and chamomilla could not stop but temporarily, was permanently cured by one dose of calcarea, and also causing an amelioration of the consumption.

When the menses are too free and weaken the constitution, *calc.* in alternation with *nux* during the intervals, generally brings back this function to a normal condition.

It is often used advantageously in leucorrhœa in leucophlegmatic persons, and in whom the menses are too abundant.

In nurses, when the milk does not flow sufficiently, if there be no special morbid cause for it, the administration of calcarea is always followed by a more abundant and normal secretion.

The symptom 651, *the cough from dry becomes loose; lumps like pure matter are expectorated;* points out its utility in certain tubercular consumptions—utility which has been proved by experience.

The great susceptibility to cold and the symptoms of catarrh, indicate its utility in persons who are subject to catarrhal affections: this is one of its benefits to which I owe the establishment of my health.

The symptom 660, *dull beatings from the posterior part of the chest to between the scapulæ, ascending; isochronous with the beating of the heart with much anxiety;* expresses too exactly the symptoms of aneurism of the thoracic aorta or of the heart, that this medicine should not be of the greatest benefit in some cases of this affection,—above all if we compare this symptom

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with those reported in relation to the heart itself: *beatings, anxiety, spasmodic contraction, tearing pain in the heart, oppressed motion*, &c., and of the recognized property of lime to contribute to re-establish the normal organization of deviated tissues.

A patient who presented the symptoms of hypertrophy of the heart, and who had been treated unsuccessfully by the leading allopaths of Paris for two years, had above all an excessive obesity, and could not digest milk, was much benefited by calcarea; spigelia finished the cure. These considerations should engage our attention to this medicine in the case of aneurism; the œdema of the extremities will be a leading indication for its administration in these affections.

The action of lime on caries, already applied empirically by the allopaths, is confirmed in its rational homœopathic application, as well as in atonic ulcers and fistulæ. This special action on the bones is chiefly exhibited in the weakness of the extremities of children, and in the vicious direction of the long bones at this age, rickets and club feet and spontaneous luxation, of which the periodicals report numerous cases.

As we have said, allopathy has employed calcarea with success in obstinate intermittents with abdominal obstructions; homœopathy, enlightened by the febrile symptoms of this medicine, has better singled out the cases to which it is suitable. Hartlaub advises it in those cases in which the accession is in the afternoon, where the heat is not preceded by chill, or when it prevails without thirst, with weakness, cold hands during the fever.

The moral character indicated by calcarea, disposition to be frightened, to be restless, taciturn, bad-humored, apathetic, averse to work, points out its utility in affections of the mind, in which the patients conceive themselves to be continually persecuted, or in danger of some misfortune. After these symptoms calcarea would seem to be called for in nervous, delicate, weak constitutions, or in those only which are very susceptible.

After having run over the principal cases of affections in which calcarea is useful, for I am far from thinking that this sketch is complete, I will add as a complement to my knowledge of it, that its action is chiefly available after the administration of sulphur or nitric acid. Of course in some cases of chronic disease it is useful to precede it by one of these two remedies (even though they should not be as homœopathic as itself).

Hahnemann also said that this medicine is often hurtful when it is repeated after it has once exhibited its beneficial action;

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and, of course, we should permit its action to be exhausted before passing to another remedy. This assertion has too often been verified in our practice not to keep it in view, as all that has issued from the pen of that great man, where practical facts are in question.

I will finish with a last advice, that of prudence in its administration. This medicine is one of the most energetic, and notwithstanding its affinity for childhood, we should be very circumspect in the dose, above all at that age and in advanced life, for at the expiration of six weeks it frequently manifests very strong primitive symptoms, and which might prove very dangerous if the doses had been too powerful.

The solution of the globule of medicine in several glasses of water, recommended by Hahnemann for some medicines, is above all applicable to this.

As to the duration of the action of calcarea, it is one of the longest. When strictly homœopathic, we may look for salutary effects for six weeks and more.

Calcarea has a great affinity dynamically with *belladonna*. We cannot find two substances in the materia medica which have so great a resemblance; so that when *belladonna* seems very homœopathic to a case but does not succeed, we may be assured that *calcarea* will, and *vice versâ*.

To the Editors of the Homœopathic Examiner.

I would be pleased to see the subjoined case of poisoning by arsenic published in your Journal, where it might conduce towards the general knowledge. Although it has been published several years since, it was in one of the ephemeral medical journals of this city, where it will be lost to the great body of Homœopathic practitioners unless it be transcribed to yours, or some kindred publication. At the time when this case was drawn up, I had no thought it would ever have been of any service towards the cure of disease, unless in regard to the eruption mentioned, or I should have been more observant of all the phenomena in the case. It is copied verbatim from the journal in which it was published, seventeen years since, deeming it best not to alter it from my memory, as the picture of it is impressed upon my mind, since viewing it through my homœopathic impressions of medicine. I am truly yours,

HENRY G. DUNNEL.

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CASE OF RECOVERY FROM POISONING BY A LARGE DOSE OF ARSENIC.

BY HENRY G. DUNNEL, M. D., OF NEW-YORK.

February 1st, 1817, at 4 P. M., I was called to visit Isaac Matthews, æt. 30, a robust and athletic man, of intemperate habits. I found him in strong convulsions; face and eyes very red; pulse full, quick, and hard. He had been observed to take a tablespoonful of a white powder, at three several times; the first, about half past 2 o'clock, and the last, twenty minutes previous to my visit. The powder had the appearance of arsenic.

I had always supposed, from the toxicological synopsis of poisons, that nausea and vomiting were among the first symptoms of this poison, and was, therefore, somewhat surprised to learn no such effect had occurred.

The jaws were pried apart sufficiently to admit a solution of ʒss. sulph. zinci., which not having the desired effect in ten minutes, ℈i. more was given, which soon evacuated the stomach. The emesis was encouraged by large and often repeated draughts of sugared water and milk.

6 P. M. Sensible; complains of a constriction of the upper parts of the larynx, as if from a tightly drawn cord. The least movement of the head, to either side, produces an appalling sense of instant suffocation; darting and pungent pains of the eyeballs. Conjunctiva very florid; tormenting gripings about the umbilicus; abdomen distended enormously; occasional vomiting; pulse very weak and feeble, scarcely to be felt; and every few minutes convulsions supervene. The only effect the patient experienced from the arsenic previously, was a giddiness, as if intoxicated. A large enema to be administered, continue the drinks, and rice water to be taken freely.

11 P. M. The enema had procured large evacuations of very black and offensive fæces. Abdominal distension lessened; great tenderness of the bowels, even the weight of the bedclothes insupportable; a constant shivering, and cutis anserina; pulse continues the same; no convulsions have occured for some time past; vomits his drinks. Enemata to be continued. Ol. ricini. ʒiss. in mint water, to be given immediately.

2d. Has passed a very restless night; the oil had been retained; pulse full and soft; skin warm and moist; pains general throughout the body; but at the epigastrium the touch is

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agonizing. Hiccup is present occasionally. The pain of the head and eyes, constriction of the fauces, and sense of suffocation are unabated; shiverings more intense, although he complains of feeling an ardent heat over the whole body; has vomited all night; the convulsions have ceased. The whole of the abdomen to be covered with an epispastic. The enema to be repeated, and the drinks of sugared water, rice water, and flaxseed continued.

2 P. M. I visited him in company with Dr. B. Bailey; found his pulse soft, full, and slow; syncope occurs frequently; and there is no abatement of the pains. The enemata failed to evacuate the bowels, which continue distended; there is a slight trembling and delirium. It was determined to give the following: ol. ricin., tinct. senna comp., aa. ʒij. aqua menth piper. ʒiss.; of which a table spoonful to be taken every half hour, until free evacuations occur.

11 P. M. Somewhat relieved. The medicine was retained, and produced copious black stools; abdominal distension greatly lessened; a salivation has come on; and the constriction of the throat abates. A strangury and bloody urine having occurred, he is to have ʒi. spts. nit. dulcis every hour, and take the cathartic dose every two hours.

4th. All the symptoms abated; spitting continues; great distress was occasioned to-day from drinking half a pint of pure milk. Cathartic to be continued.

5th. Was relieved by the purge yesterday, but to-day the same symptoms arose from a small cup of chicken soup. A paralysis of the lower limbs has occurred; the patient moves them quite well in bed, but is unable to bear the least weight upon them, or to move forward, unless by the aid of his hands. The mixture to be continued, and no drinks allowed except rice or sugar and water.

6th. The patient is sitting up, but unable to walk; feels much relieved; a slight tenderness of the epigastrium remains. The spitting of a thick viscid mucus continued for a few days after this date, and the paralysis obliged him to use crutches nearly a month.

The remainder of the powder was submitted to a chemical analysis, and proved to be good white oxyd of arsenic.*

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* The following processes were used:

To a solution obtained by boiling a few grains in distilled water, a small quantity of a weak solution of carbonate of potass was added;

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The quantity taken was at least an ounce and a half; and the first tablespoonful had remained upwards of an hour upon the stomach. This account was corroborated by his wife and mother, who were present at the time, but supected nothing, as he assured them it was cream of tartar he had obtained for the purpose of curing an eruption.

This eruption of his skin had its rise in this manner: about nine months before he had a chancre on the glans penis, which, blackwash and caustic failing to cure, a buboe in the groin, proceeding fast to suppuration, induced him to undergo a mercurial course, until salivation occurred, when the chancre and buboe healed kindly. No other symptoms appeared until about two months previous to his attempt at suicide. *Venereal eruptions, with the peculiar copper colored conical scabs, attended with foul ulcers, pervaded his extremities.* He had taken no medicine for their cure, and they continued unabated, until he was able to move round on his crutches, when the scabs began to fall, the ulcers dried, and the skin became clear, before he had recovered a perfect use of his limbs. No more venereal symptoms made their appearance up to the time of his death, which happened (from smallpox) in March, 1828.

From this case, it would seem, that a large quantity of arsenic may remain upon the stomach some time without causing death; and in this subject it proved of essential service, freeing him from secondary syphilis, for which, I have no doubt, a mercurial course would have been the only cure, had not the arsenic been taken. How far it might be justifiable to carry the use of arsenic, circumstances attending each case would alone determine. But from the effect on this man, and what I have seen given in various cases of obstinate diseases of the skin, I am induced to believe large quantities may be taken without producing

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upon the addition of a few drops of a solution of sulphate of copper, a yellow green precipitate ensued.

To a quantity of boiled starch was added a few grains of iodine, which produced an azure blue; upon adding a small quantity of the solution of the powder, the color was destroyed; upon the addition, however, of a few drops of sulphuric acid, the color was restored.

One drachm was treated with black flux; a metal was reduced, having the appearance of polished steel, easily pulverized in a mortar, and burnt, upon being thrown on a red hot shovel, with a blue flame, attended with a strong odor of garlic.

A few minutes after the emetic first operated, a cat, belonging to the family, lapped of the evacuations from the stomach, which had been left in a basin. It was observed soon after to sicken, and to die of convulsions within an hour.

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bad effects. That it is one of the best remedies we possess in the cure of many of the cutanei is well known; and I shall feel inclined to put its ability of curing secondary syphilis to the test at the first convenient opportunity.

INAUGURAL ADDRESS

DELIVERED BY HENRY G. DUNNEL, M. D.,

President of the New-York Homœopathic Physician's Society, on the 6th of January, 1847.

Some philosophers have remarked, there are periods in the history of the human race, when it seemed as if there were changes in the action of mankind, resembling the awakening of the body from deep slumber. By others, it has been surmised there are times in which a greater diffusion of divine afflatus occurs; or distinct periods of revelation from Heaven. At any rate it is known that there have been epochs in which man has seemed to make very rapid strides towards that maturity of intellect to which some consider mankind collectedly progressing. There are ages in which the arts have received a new impetus; periods in which the drama, poesy, or general literature, have vigorously flourished. Of all the periods rendered remarkable by events of this nature, I think none have ever appeared, which will fill a more prominent page in the future history of the race, than the latter part of the 18th and the commencement of the 19th centuries.

The action of the British Colonies in North America introduced a new impulse into the examination of the relations existing between the two portions of mankind, the governing and the governed, and the civilized world experienced the greatest agitation upon the principles of the social compact, ever before known in history. Then followed the revolutions in America and France, two events having the most important bearing upon the future history of man: coeval with these occurred a new day in chemistry, eventuating in results far more valuable than ever the alchymists dreamed of, in their reveries over the philosophers' stone.

The adaptation of the powers of steam to the propulsion of vessels and carriages was introduced, and is destined in the

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course of time to work a change in the means of communication of man with his fellows in the habitable portion of this globe, greater than we can surmise in these days, when by its aid it is deemed a remarkably short interval if twelve or fourteen days only are occupied in crossing the Atlantic.

Astronomy, which gives man his only present knowledge of his relative position to other worlds, at this period enlarged its boundaries and discovered new worlds.

Indeed it seems as if about this period there was an introduction of new vigor into the action of mankind, and no authentic history gives us any account of a period when such a general awakening of man to a knowledge of himself occurred.

To a meditative mind, these great occurrences, I think, will appear to hold a very important bearing upon the future history of man.

However great and important the beneficial results of these discoveries may be, it would avail man but little to have his social position better defined, his intercourse with his race increased to an almost unlimited degree; his inventive or creative faculty, which so markedly distinguishes him from the instinctively acting or slightly reasoning brute, and which incontrovertibly proves him created in the image of his Maker, might have been multiplied without its availing him much individually, unless he was enabled to live out his allotted threescore and ten —*mens sana in corpore sano.*

Surrounded as man is with causes continually conflicting with his existence, he would naturally employ his perceptive and reasoning faculties in their discovery; and we find ages have been spent by him in the search after the hidden causes of malaria and contagion; proceeding from the known, to surmise by analogy the unknown, and seeking to discover the internal changes going on in his organs, when diseased, by his knowledge of the laws governing inanimate matter.

The year 1790 beheld the first ray of light that announced the appearance of the brighter day of knowledge, which was destined to succeed the heretofore *dark ages* of medicine.

In order that we may form a more definite opinion of the value of the discovery of the immortal Hahnemann, let us take a rapid glance at the art of medicine as it existed previous to his advent; for in compiling the future histories of medicine, the era preceding him will be as distinctly marked from that which followed his discovery as the period of time from Aristotle down

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to Bacon is marked out in the history of natural philosophy from that event.

The history of medicine may be traced back to Egypt, the general birth-place of civilization; and in the writings of Moses we find some glimpses of its cultivation, and at a much later time we find it introduced into Greece, and the name of Æsculapius is given to us as an early god of the art, but with so much admixture of fable that we can gain but little information as to its true existence. There is more known of his sons Machaon and Podalirius, who have been immortalized by Homer.

Temples were reared to the honor of Æsculapius, and these were in fact hospitals under the guardianship of the Asclepiadiæ, who for many centuries were the only cultivators of medicine. They possessed opportunities of acquiring experience, facilitated as it was by the custom which long prevailed of depositing in the temple a votive tablet on which was inscribed a narrative of the case, and the means taken for its removal. These records being religiously preserved, became valuable information, and led to a great improvement of the art. The priests of the temple of Cos devoted their attention to the cultivation of a philosophical investigation, attempting to unite reasoning with experience; while those of Gnidos confined themselves solely to the observation and collection of mere matters of fact. At this early day was laid the foundation of the sects of Dogmatists and Empirics, which have continued to divide the medical world until the present day.

It was about the sixth century anterior to the Christian era, when any thing like a philosophical investigation of the powers and functions of the human system commenced.

It is to Hippocrates, undoubtedly, who flourished about four centuries before Christ, that we are indebted for the fundamental structure of the present system of medicine.

He, it has been observed by a learned physician, had the sagacity to discover the great and fundamental truth, that in medicine, probably more than any other science, the basis of all our knowledge is the accurate observation of actual phenomena; and that the correct generalization of these phenomena should be the sole foundation of our reasoning.

He professed to examine the phenomena of disease in the first instance, to ascertain what were the natural powers and properties of the animal frame, how far these were affected by external circumstances and by morbid causes, and hence to derive his curative indications.

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The latter were however rendered of little avail, because his observations and experience were tinctured with his leading principle of pathology, that the fluids are the primary seat of the disease. His descriptions of the phenomena of disease are still cited for their pure accuracy.

His doctrine of crises led to the watching of the course of nature, and attempting to assist her efforts in the evacuation of the morbific matters from the various emunctories; and this system is called the expectant, or inefficient treatment.

Another general principle, however, would seem to have had an opposite tendency, viz.: that a disease is to be cured by inducing a contrary state of the system, or a contrary action in the morbid part. Thus repletion is to be relieved by evacuation, and the excessive evacuation is to be removed by repletion; the excess or defect of any of the humors or qualities is to be relieved by the employment of such means as may augment or diminish such humor or quality, by producing a contrary state of its plastic energy.

Among the successors of Hippocrates, we may mention Chrysippus, who denied the use of bleeding in any case, and discountenanced the employment of all active purgatives. But little is known of his remedial means. Although the foundation of the system would seem to have been laid in an anterior age, the two sons of Hippocrates, Draco and Thessalus, with his son-in-law Polybus, are considered the founders of the sect called the Rational, or more generally the Dogmatic, because it professed to set out with certain theoretical principles which were derived from the generalization of facts and observations, and made such principles the basis of practice.

The two pupils of Chrysippus, Erasistratus and Herophilus, we learn through Galen, enhanced materially our knowledge of the human system by their dissections.

Erisistratus imbibed from his preceptor a prejudice against bleeding, and the use of active evacuants, while it was to a pupil of Herophilus, viz. Serapion of Alexandria, that Celsus ascribes the foundation of the school of Empirics, although Pliny ascribes it to Acron of Sicily, a contemporary or predecessor of Hippocrates.

In speaking of these two rival sects, who for so many centuries disputed sway with each other, it may be as well to explain that the Rationalists, or Dogmatists, asserted that before attempting the treatment of a disease, we should make ourselves fully acquainted with the nature and functions of the part affected,

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and with the operation of medical agents upon it, and with the changes which it undergoes under the operation of morbid causes.

The Empirics contended that this knowledge is impossible to obtain, and that even if it were possible, it is unnecessary—that the minute and internal changes of the system are beyond the most acute observation—that it is only essential to watch the phenomena of disease, and to discover what remedies are best fitted to relieve the morbid symptoms—that experience should be our only guide, and that when we step out of this path we are liable to dangerous and fatal errors.

The Methodic sect next held a disputed sway for several years after its foundation by Themison of Laodicea, who rejects the abstruse speculations of the Dogmatists, and teaches it as an essential part of the business of the practitioner to study the human frame and its laws in the state of health, and their changes during disease; and referring all these to the different states of constriction and relaxation, or to the undue preponderance of one over the other, divided remedies into two kinds, astringents and relaxants, the use of either of which was indicated by the supposed condition of the organs affected.

C. Aurelianus, either in the first or second century of the Christian era, was the first writer of this sect whose works have reached us. He divides diseases into the two great classes of acute and chronic, nearly corresponding to diseases of constriction and relaxation, and founds his indications thereon; but with respect to the intricate nature of these states of the system, or their hidden causes generally, he thinks it unnecessary to inquire, provided we recognize their existence, and can discover the means of removing them. He condemns, however, the use of specifics.

It would not comport with this occasion to dwell with any minuteness upon the views of the physicians of eminence after this period, for several centuries.

We will merely allude to Celsus, who arranged and systematized what was known of medicine previous to his time. He has not been distinguished for any peculiar principle. He believed that the fluids are the primary seat of disease; he professed to expound the doctrines of Hippocrates, and support them by new facts.

It was supposed he had embraced in his very voluminous works all that was known, or ever could be known in medicine; so that for several centuries, medical writings consisted of but little else than commentaries upon, and elucidations of Celsus.

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A writer on the practice of Physic of the fifteenth century, thus criticises: "But return we to Physic, which hath many sects, for there is one, which they call Rational, or Sophistical, or Dogmatical, and this have Hippocrates, Diocles, Chrysippus, Caristinus, Paraxagoras, and Horosistratus followed, which Galen a long time after these, did approve, who following Hippocrates more than others, reduced the whole art of physic to the knowledge of causes, and signes, to the qualities of things, and to divers plights and likings of bodies. But because this sect hath to do about words, rather than about the things themselves; I confess it is not the meanest part of natural philosophy, yet not very necessary to cure the disease, I will not say hurtful, as that which referreth men's safety and health to certain wrested sophisms rather than to pure medicines, with which diseases may be cured: and busied in choleric syllogisms, ignorant of deserts, woods, and gardens, doth not know herbs and medicines. Wherefore Serapion confessed that this Rational Physic belonged not to the art of healing maladies.

"There is then another sect of Physic, altogether gainful and servile, whereof Physicians until this day have their name. For this cause they call it operative, dividing the same into empirical and methodical, whereof we have to speak. Wherefore they call it empirical, that is to say, that consisted in practice of experiments, the heads whereof were Serapion, Heraclides, and both the Apollonii: whom afterwards of the Latins, Marcus Cato, C. Valgius, Pomponius Leneus, Cassius Felix, Aruntius, Cornelius Celsus, Pliny, and many others, followed. Of this Herophilus the Chalcedonian made afterwards the methodical, that is, compendious to learn by; and by long experience, the mistress of all things, reduced it to certain rules which afterwards Asclepiades, Themistion, and Archigenes did approve with most strong arguments. But Thessilus the Italian was he that brought it to perfection, who (as Varro sayth) disannulled all the opinions of them which were before him, and as it were with a certain doggish madness inveighed against all the physicians of the time past. After these, very many barbarous philosophers of foreign nations wrote thereof, among whom the glory of the Arabians increased so much, that to very many they seemed the first finders out of this art, and without doubt it seemeth that they may strive for it, if the words which they use, grounded upon the Greeks and Latins, did not declare another original of this art; for this cause the volumes of Avicenna, Rasis, and Averroes have been received in like authority with the books of Hippocrates

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and Galen, and have gotten so great credit that if one presume to heal another without their opinions, he seemeth manifestly to endanger the common safety of men. And although these sects of Physicians be few, yet there is no less contention and diversity of opinions among them than among the philosophers."

After describing the manner of dress and deportment of the physicians of his days, he proceeds to describe the way in which they deal with the sick, which will do in most particulars for a description of the ordinary practice of the nineteenth century.

"Afterwards with a great announcing he prescribeth him medicines: take pills, be letten blood, let clysters be made, let ointments be made, let broths be given him, let things be given him to chaw, let gargarisms be made, let little bags be made, let pleasant meat be given him, let syrups be given, let water be given him, let treacle be given him; and if the disease be not vehement, and the patient somewhat delicate, he will provide for pleasant things; and when he hath laid him upon a soft bed, he endeavoreth to bring him asleep with drops of well-water falling into a bason; sometimes he ministereth the sickness with rubbing, sweating, and cupping; sometimes he restoreth the enfeebled sick man with baths, delicate meats, and the change of air; and that he may be accounted of great authority, and also be wondered at, observing hours, he causeth natural allegations and bindings to be tied about his neck, and doth not minister medicines and drinks but by the mathematical Ephimerides."

After inveighing in no very measured terms against the uncertainty of medicine, he quotes Cornelius Celsus, "who doth affirm that there is nothing more available to the trade of physic than experience, wherein he says it is manifestly seen that the best learned men have been oftentimes overcome by an old wife of the country, and she, with one root or herb alone, hath achieved such things as the best physicians of all could not do with all their precious medicines, done exactly with study and diligence. For whilst they go about to cure diseases with intricate and monstrous mixtures, (whereas nature has brought forth so many plain remedies, which should suffice,) confounding them by a compound culling of divers things, they be led rather by conjecture than by cause or reason, and make the whole art of Physic nothing else but chance and conjecture. But this knowing the force and quality of one plain medicine, doth cure hard diseases with sound and approved virtues of nature. There have been in time past many and most excellent Philosophers and Physicians of that opinion, that is to say, that we should not

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practice physic but with very simple things. For this cause, searching out and proving the forces of simples, they have left to us which come after, notable books, as that which Chrysippus wrote of the Coleworts, Pythagoras of the herb Squilla, Marchion of the Radish, Diocles of the Rape, Phanias of the Nettle, Apuleius of Betaine, and many other ancients of other things. But these physicians of shops not only pass upon them, but also laugh them to scorn, calling them simple men which study to know simples. I therefore dissuade no man not only to ask counsel of these physicians, but also to follow their steps, them I mean which cure by simples. But I advise them to flee and banish away these keepers of shops no otherwise than enchanters and witches, for sithens it is necessary that compound medicines be made of many sundry and contrary kinds, it is impossible, or at leastwise very difficult, for the physician to appoint any certainty in them, but by opinion alone, supposal, and conjecture: and sithens there be oftentimes innumerable things every of which by himself seemeth to be of sufficient strength and virtue against any grief; the Physician maketh a hotchpot of such things as hap and chance shall then present to his memory, or else whereunto he shall be inclined by any other inward or hidden instinct. Wherefore it cometh to pass, that that compound medicine taketh virtue and effect, not so much from the power of the simples which go into it, as from the happy or unhappy intent of the physician, as far as he is induced with a certain hidden influence, either natural, or celestial, or devilish, or adventurous, rather to choose these than other."

Soon after the age of the above critic, chemistry was invoked in aid of medicine, and likewise to explain the laws of life, and Paracelsus with his Elixir Vitæ divided the Galenists and Chymists.

The medical world was divided during the fifteenth and sixteenth centuries, but the anatomists made their appearance, and continued to dispute sway with the others in the seventeenth century; the humoral pathology, however, still tinctured all their observations; and soon after the mathematicians introduced their speculations into physiology, and gained many converts.

The body was regarded as a machine composed of tubes; and calculations were formed of their diameter, of the friction of the fluids in passing along them, of the size of the particles and the pores, the amount of retardation arising from friction and other mechanical causes, while the doctrines of derivation, revulsion, lentor, obstruction, and resolution, with others of an analogous

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kind, all founded upon mechanical principles, were the almost universal language of both physicians and physiologists towards the close of the seventeenth century.

The result of these contradictory views of the chemists and mathematicians led to very opposite and no doubt disastrous practices upon the sick.

The next change we are called to witness is Van Helmont with his "*Archæus*," presiding over the changes in the system, and the action of remedies. He has the merit of being the first author who stated the existence of specific powers in the system different from those of inanimate matter. Half a century after him Stahl taught that neither chemical nor mechanical reasoning is applicable to the living phenomena, and devoted his attention to vital action, which he referred to the operation of a principle which he styles "*Anima*," in many respects resembling the Archæus of Van Helmont. His explanation of the action of this principle is very contradictory, but still his views served a useful purpose in directing attention to the laws of vitality, and in overthrowing the mechanical sect. F. Hoffmann explained many of the hypothetical reasonings of Stahl by the action of the nervous system, the action of which, and its important controlling capabilities had been previously almost overlooked. As a pathologist he took new ground, for he considered the fluids as only occasionally the seat of disease, which in most cases he conceives originates in the solids.

He advances the doctrine of the muscular irritability, and of spasm, borrowed from the constriction and relaxation of the ancients.

Boerhaave and Van Swieten were only distinguished for arranging the labors of their predecessors.

Haller introduced a new era into the investigation of pathology and physiology by cautiously abstaining from merely speculations not based upon actual observation.

Our time will not permit us to particularize the peculiar physiological views of the different physicians of the 18th century; it may be said to be based upon a junction in part of the humoral pathology, with the views of the vitalists, upon irritability, and contractility, in some measure controlling mechanical laws.

There had taken place a simplification of the complex formula of the Pharmacopias, in proportion as the knowledge of the virtues and qualities of remedies had increased, and physicians had become more aware of the futility of an acrimonious discussion of their *modus operandi* in recognizing their value as curative agents.

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It was necessary to take this glance over the history of medicine, in order to form an opinion of the importance of the discovery of Hahnemann.

It is seen that the whole history of medicine exemplifies the tendency of the human mind to speculation, instead of the severer and more philosophical mode of observation. A very learned medical writer of our day in reviewing the history of the art, and the obstacles which it has had to encounter, of the degree in which it has overcome these obstacles, and of its present state of improvement, says: "This I am not disposed to underrate; but, at the same time I must acknowledge, that when I reflect upon the immense mass which has been written on the subject, the result seems scarcely adequate to the labor that has been bestowed."

The causes of disease, both remote and proximate, have been the never failing subject of search; and whichever theory might have at the time the sanction of some great name, has been implicitly adopted, and has had its influence over the treatment.

It is supposed essential to cure that the cause should first be removed; and this would seem to be philosophically correct. There are various causes. There are causes known and unknown; remote and proximate; predisposing and exciting. There are successions of causes, *causa causarum*, an endless chain, with no mark to designate the commencing link.

For illustration let us take Dropsy. The known remote causes are various; and it will serve as a specimen of the mode of designating the causes of disease by physicians of modern days, to say nothing of the opinions of the ancients; and we shall only quote one author, and that of the highest acknowledged authority. This disease, Dropsy, has been supposed by some modern pathologists to be caused by a profuse halitus from the terminal arteries; by a torpid or inactive condition of the absorbents, or by both of these conditions; by debility; protracted fevers; an unkindly lying-in; long exposure to a cold and moist atmosphere; hard labor; hard eating and drinking; habitual dyspepsy, or some other malady of the stomach or chylopoetic organs; indigestible food; great loss of blood, especially if become habitual; the blood becoming less plentiful and less rich in fibrine; chlorosis; cessation of the menses; gravid uterus; cancerous uterus; enlarged liver or spleen; obstruction of a vein; from a dynamic and an adynamic condition; inflammation, or an action analogous to it; a state of the skin in which it absorbs moisture too freely from the atmosphere; from a cachectic state of system; from an extraor-

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dinary deficiency of blood in the system; the blood in a state of preternatural tenuity; a diminution of exhalation from the skin and mucous membrane of the lungs and of the secretion of urine; a state of kidneys that secretes albuminous urine; mercurial erethism; morbid enlargement of the abdominal or thoracic viscera; an obstinate fit of jaundice—and this list might be materially increased from other authors.

Of these causes some are remote, or predisposing or exciting, while others, again, are the intimate or supposed interior causes. Of the latter it is unnecessary to remark to the observer, that they are mere suppositions or surmises, not matters of demonstration, and never can be; that at the best they merely explain one fact by another. As to the other kind of causes, the remote, predisposing or exciting, there is no one of them which may not be present and no dropsy ensue, and again there are dropsies in which these causes have not existed. How vain would be the attempt to cure disease if it were necessary always to first find out the pathological condition of the organs any farther than can be developed to us by the evidence of our senses, and the accumulation of that kind of experience may be exemplified by the treatment of this disease.

The treatment consists in removing the cause, and as there are so many of them it becomes a perplexing inquiry as to which is the cause, unless it be evident to the senses; but it seems to be mostly mechanical, or means of relieving the distension, in many instances by exciting the excretories, and after that removing the other cause, the intimate cause of the morbid change. The first indication is attempted by evacuations of all kinds, and the last by whatever course may be deemed suitable to remove whichever of these views of the intimate cause the practitioner may adopt.

The result is that the practice is as different as the complexions of the practitioners; and there is a great diversity, and very disastrous results.

But there are medicines that have been known to cure this diseased condition very promptly, and in cases in which its curative powers could not be explained upon any of the supposed condition of the organism. As a specific in some forms of dropsy, for instance, Boerhaave, Sydenham, and Brocklesby bear testimony to the specific virtues of Sambucus.

The Melampodium has the testimony of high authority for its efficacious results: Dioscorides, Mondschein, Quarin, Bacher, Daignau, De Horne, Mead, and others. The Digitalis by Darwin and Withering.

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The specific power of certain agents in curing a diseased condition has been long known, but it seemed to be a variable power. In one physician's hands it has been found a medicine would act with the expected efficacy, and in another would prove inert at least, if not injurious.

The laws governing its action were unknown, and the consequence has been that its adaptation to certain diseased conditions not having produced the anticipated results, it has lost reputation, been discarded, and again in after years resumed its place: such has been the history of several articles of the materia medica.

There have been some known as having a specific effect over one or more functions of the organism, and some over another; hence the division of the materia medica into cathartics, diuretics, emmenagogues, errhines, sudorifics, &c.; and a combination in a given case to meet the supposed or known conditions of the system, has been the only known way of obtaining a specific effect.

There have been in different ages a desire and an attempt to obtain a specific for the cure of all diseases, a catholicon, a panacea; and some noted instances, from Paracelsus to our day, have occurred of physicians who have imagined they had made an approach to the result.

The great achievement of Hahnemann was the discovery of a law by which specifics for morbid conditions of the organism may at any time be found; a law as constant as gravity to the centre, or the needle to the pole.

This discovery differs from most of the supposed medical discoveries, in not being based upon ingenious theories and speculations, but upon the most severe and critical examination, and repeated observations of its author, and verified by numerous other observers.

The rule for ascertaining the specific curative virtue of any substance being based upon the laws of nature, in the course of time, with the accumulated experience of ages, many specifics will have been found for diseased changes of the organism, for which, as yet, man has discovered no specific. And when we contemplate what immense advantage has already resulted from the past fifty years of the philosophical practice of medicine, well may we anticipate more brilliant results than the previous twenty-five hundred years of ordinary practice have achieved; and that the day, expected by many a believer, is not very distant when

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man, by an investigation and observance of the laws of his own existence, and those of surrounding nature, may hold control over his own destiny, and unless prevented through accident or design, be able to live out his allotted threescore and ten. He now controls the elements by his knowledge of their laws; he wafts himself in safety over the ingulfing ocean; he balloons himself through the air; he draws away safely from his devoted head the scathing lightning; and he will in time as surely defend himself against the fatal pestilence.

When the immortal Hahnemann had discovered the law of Similars, its beautiful simplicity, and its unerring truth, he very soon became convinced of the inutility of the ordinary speculations of the nature of the intimate or proximate causes—the *prima causa morbi*—that first produce the deviations in the natural feeling or action of the organism; and wisely came to the same conclusion as the ancient Empirics, to limit our knowledge to strict observation.

It is necessary to bear this in mind when examining his views of the nature of disease, and the mode of cure, or we are very likely to misunderstand him, as it happened very frequently to his opponents.

In section 6 of the Organon, he remarks: "The unprejudiced observer (however great may be his powers of penetration), aware of the futility of all elaborate speculations that are not confirmed by experience, perceives in each individual affection nothing but changes of the state of the body and mind (traces of disease, casualties, symptoms), that are discoverable by the senses alone,—that is to say, deviations from the former sound state of health, which are felt by the patient himself, remarked by the individuals around him, and observed by the physician. The *ensemble* of these available signs represents, in its full extent, the disease itself—that is, they constitute the true and only form of it which the mind is capable of conceiving."

And in a note to this he says: "Do not the symptoms of disease, which are sensibly cognizable, represent to the physician the disease itself, when he can neither see the spiritual essence, the vital power which produces the disease, nor yet the disease itself, but simply perceive and learn its morbid effects?"

I have sometimes thought the choice of the word symptoms not so good as phenomena (appearances) would have been, because it is a term very frequently used, in a medical sense, as meaning the difference between the primary and secondary causes

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in disease as a sign, or a token (and *it is something that happens concurrently with something else, not as the original cause*) —as is strictly meant and used by Hahnemann.

It is the use of this word in its common acceptation that has made some imagine that the symptoms (the signs, or tokens) of the disease connected with abnormal pathological conditions might be removed, and the diseased condition remain unchanged, to reappear at some future time in new forms, that is to say, with new symptoms.

In section 70, he remarks: "There is nothing for the physician to cure in disease but the sufferings of the patient, and the changes in his state of health *which are perceptible to the senses*, that is to say, the totality or mass of symptoms by which the disease points out the remedy it stands in need of; every internal cause that could be attributed to it, every occult character that man might be tempted to bestow, are nothing more than so many idle dreams and vain imaginings."

The sufferings of the patient, and the changes in his state of health *which are perceptible to the senses;* the *ensemble* of the *symptoms*—or, as I read it, the *ensemble of the phenomena.*

Thus, in the disease we have before alluded to, viz. Dropsy, if coexistent with an enlarged liver, spleen, or heart, a carcinomatous or gravid uterus, or diseased kidney, these phenomena should be found by all the most approved means of exploration and auscultation, or autoptical experience, in fact the whole known pathological condition, and should as certainly be comprised in the pathogenesis of the curative agent; as much so as the presence of chlorosis in one instance, and great or habitual loss of blood from the system in the other, would form indications for some other agent.

It is perhaps for this reason experience has shown that some medicines which have proved specific for dropsies, where no such concurrent phenomena occurred, have not been followed with beneficial results in cases where they were conjoined (as in the old school, where the most powerful diuretics have had no effect to increase the secretion of urine).

SEC. 14. "There is no curable malady, *nor any invisible morbid change* in the interior of man, which admits of cure, that is not made known by *morbid indications* or *symptoms* to the physician of accurate observation—a provision entirely in conformity with the infinite goodness of the allwise Preserver of men."

I think this assertion has not been proved; or if it be true, it

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in some instances requires an observation so accurate as to render the scarcity of them so great as to be of no service in a practical point of view.

I think that even Hahnemann himself has shown that the three miasms, Syphilis, Psora and Sycosis, *curable maladies*, *invisible morbid changes*, may exist for years in the organism in a latent state without showing any *morbid indications* or *symptoms*, unless some adventitious exciting cause may compel the latent miasm to show its *morbid indications* or *symptoms*.

Time would not permit me to go into any extended examination of this point.

The next practical point I should like to glance at, is in regard to the dose of a specific.

Sec. 156. "There is no homœopathic remedy, however suitably chosen, that does not (especially in a dose not small enough) produce at least during its action some slight inconveniences, or fresh symptoms, in very sensitive and irritable patients. In fact, it is scarcely possible for the symptoms of the medicine to cover those of the malady with as much precision as a triangle would do in regard to another which is possessed of angles and sides that are equal to its own."

But these differences, which are of little importance in a case that terminates in a short time, are easily effaced by the energy of the vital principle, and the patient does not perceive it himself unless he is excessively delicate.

Sec. 158. "This trifling *homœopathic* aggravation, this happy omen, which announces that the acute disease will soon be cured, and that it will, for the most part, yield to a first dose—is perfectly as it ought to be."

Sec. 159. "The smaller the dose of the homœopathic remedy, the slighter the apparent aggravation of the disease, and it is proportionably of shorter duration."

In order to prevent the aggravation, and to cure promptly and permanently, he gives us the process of attenuations.

Between some of the first editions and the last, Hahnemann had been taught by experience to modify his views with regard to repetition of doses, which he had at first considered unnecessary; in this exhibiting a truly philosophical spirit, which does not hesitate to acknowledge to-day the errors of yesterday, and differing very widely from some of his followers, who seem to think that *in verba magistri est sapientia*, and that their whole duty consists in examining what were his views, and priding themselves upon their close adherence to him, in all things save

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one, and that is in close observation of nature, uninfluenced by the opinions of others.

The services rendered by Hahnemann to mankind are immense; ages hereafter will bless his name, and he will be known as long as medicine exists. We must remember that the discovery he has made of the law of "Similia" is one of the eternal, unchangeable laws of nature.

His rules for the attenuation of drugs, and for their repetition in diseases, should, in my opinion, be regarded as the results of his personal experience; and, as such, worthy of the highest respect; but they cannot, as yet, be regarded as established beyond change from future experience—nor held in the same light as that great fundamental law of cure which he has so conclusively elucidated.

He says: "I perceive that in order to discover the true medium path, it is necessary to be guided by the nature of the different medicines, as well as the bodily constitution of the patient, and the magnitude of his disease." (246.)

Such should be the course of all judicious practitioners, to search and examine for themselves. There ought to be among us no pride of being disciples of a great master. It is to be hoped that medicine hereafter may never present such a humiliating history of blind and abject obedience to the mere *dicta* of authority as existed after Hippocrates and Celsus for centuries, when none dared question their authority.

Much has been already achieved by Homœopathy, but more remains to be accomplished.

We believe a broad foundation has been laid, upon which will be hereafter built the beautiful and exact edifice of a science of Medicine.

It is not in the nature of things that Homœopathy should have sprung from the mind of Hahnemann perfect as the goddess of Wisdom from the brain of Jove.

He was blest with a long life to perfect his discoveries, and was indefatigable in investigation, but still the longest life is too short for the perfection of any science.

The experience of any one individual, or any one thousand, is too small to admit of certainty in many matters of science.

To his followers belongs the duty of bringing all their accumulated experience towards the erection of that edifice, the broad foundation of which was laid by Hahnemann upon the eternal laws of nature.

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The science of medicine must be like other sciences, progressive; and as we have conjoined for the purpose of improving ourselves in a knowledge of that science, it should be our constant aim to examine for ourselves, to prove all things, and to hold fast to that which is true. Let us be guided by a spirit of investigation, that we may be better and better prepared to impart relief to suffering humanity.

Let us endeavor to study the action of new and powerful agents, that the list of incurable maladies may be diminished. And in order that the different objects of our association may be achieved, let us cultivate a friendly feeling among ourselves, and endeavor to wipe off the stigma which has so long attached to the profession, of being "the most contentious and quarrelsome people in existence."

We are few in number compared to the great mass of the profession. Our new mode of practice subjects us to the sneers and scoffs of our brethren, by whom we are stigmatized as Quacks and Charlatans. But a sacred regard to charity should prompt us to look with a lenient eye upon their malevolence.

We should remember the time when we ourselves, as profoundly ignorant of the great discoveries of Hahnemann as most of the medical profession are at this day, wrapped ourselves up in the mantle of conservatism, (a cant term for idleness,) and defied and derided the storm of medical radicalism which beat so fiercely about our ears.

We may safely leave them to the slow but sure process of immutable truth. When they have evacuated the black bile of their vocabulary, perhaps they will test the new system by the touchstone of experience, as we have done; and we well know that the result can be in no wise different than we have experienced.

The calumnies we receive cannot injure us, because we stand *recti in curia* before the judge of our consciences.

We may well despise the number of our opponents, because we possess the invincible armor of Truth, whilst they are blinded by the veil of Error which has been woven around them by false teachers.

We know the day will arrive when the schools themselves will learn their errors and teach truth, and we can bide our time.

Having been selected by you to this honorable station of presiding officer, it is my earnest desire to do all in my power to carry out the objects of the society, and to facilitate its delibera-

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tions; and I trust for your cordial co-operation, and hope that we may all strive to see who can excel in efforts to keep harmony and improvement as leading objects in all our efforts.

ON PATHOLOGICAL ANATOMY FROM ITS USEFUL SIDE.

BY JOHN C. PETERS, M. D.

We are glad to have Dr. Hering for an antagonist; the frequency with which he has differed from Hahnemann, even on points which are considered vital to homœopathy, and the catholic and friendly manner with which Hahnemann admitted his right of private opinion, even when opposed to his own most cherished views, assure us that Dr. Hering will be equally tolerant to those who differ from him in opinion, and that he will never exhibit the slightest trace of that captious and bigoted spirit which has too often disgraced the discussions of almost every school. We feel confident that every thing which proceeds from his pen will be characterized by dignity and suavity, by a spirit elevated and wise, by an earnest desire to perceive and foster the slightest glimmering of truth; that unlike the older members of the old school, he will not obstinately reject new advances in medicine, merely because it would cost him much time and trouble to make himself fully master of them. When he conceives himself called upon to warn against error, he will certainly do it with arguments so convincing, so free from the slightest appearance of pique and vexation, and above all so free from offensive insinuations, that none but the incorrigible and perverse may be offended or estranged by them.

Guided by this elevated spirit, Dr. Hering has already frankly admitted his comparative ignorance of auscultation and percussion, justly confident that his many and great attainments in other departments of science would enable him to admit that "in this or in that" some other physician was more proficient than he. Hence we are confident that if the question were put: Has Dr. Hering made a sufficient number of post-mortem examinations to render him a competent judge of the full value of pathological anatomy to the physician? that his answer would be equally modest and truthful. We would merely remark here, that Dr.

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C. B. Williams, recently elected President of the London Pathological Society, in his opening address stated that he had taken part in more than three thousand post-mortem examinations, and that each succeeding one taught him something new and useful; and it is well known that even Dr. Williams's authority is far from absolute in pathological matters.

It is but fair that a word or two should be said in defence of Noack and Trinks, who are in some measure made the champions of the pathological school among the homœopathists. In their Materia Medica they have made a collection of all the pathologico-anatomical effects which have been attributed to the drugs of which they treat, as a storehouse of true or apparent facts which must be subjected to severe criticism at a future period. But the symptoms of drugs obtained by Hahnemann and others, which have long been published, they have examined with critical acumen, and selected those which they conceived to be the best established as the pure and undoubted effects of drugs. Others may differ from them, but assuredly the opinions of learned and eminently practical physicians are entitled to at least as much attention as those of Jahr, Boenninghausen, and Jenichen, all of whom are laymen.

With these prefatory remarks, we proceed to demonstrate, as best we may, the advantage which may be derived from the study of pathological anatomy in the selection of truly homœopathic remedies, contenting ourselves here with expressing our most unfeigned and profoundest astonishment that any one who regards the most insignificant symptoms as of some importance, should by any freak of caprice or carelessness undervalue the study of either slight or profound organic lesions, whether occurring as the effect of drugs or diseases.

Meningitis.

Formerly meningitis was regarded as a simple inflammatory affection; now it is known that there are at least two great varieties. In one, a yellowish, or greenish fibrinous, purulent, or serous exsudation is found in the meshes of the pia mater generally seated on the convex surfaces of the brain, and from thence extending in a diminished degree towards the base of the brain, where it rarely or never occurs alone. It is the true inflammatory meningitis, almost always attacks young, robust, healthy, or at least non-tuberculous subjects; it is rarely or never attended with effusion into the ventricles, nor by a still more fatal complication,

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that of acute softening of the stomach. This is a curable form of disease.

The second variety is the tubercular meningitis; it almost invariably commences at the base of the brain, is generally attended with profuse effusion of serum into the ventricles, often with acute gelatinous softening of the stomach, always with acute serous infiltration of the substance of the brain itself, often with a rapid and profuse deposition of miliary tubercles into many organs, as the lungs, spleen, kidneys, &c., &c. It is of course almost necessarily fatal, although a few recoveries have been recorded.

Tubercular meningitis occurs so much more frequently of the two, that many French writers regard the so called acute hydrocephalus as synonymous with it; in sixty cases of acute dropsy of the brain, Hennis Green found tubercles present in fifty-six; Rilliett and Barthez found them in twenty-nine cases out of thirty-three; Bonchut, in six cases out of nine; Becquerel, in twenty-eight cases out of thirty; Jackson, in four cases out of six, &c., &c.

The first lesson which pathological anatomy teaches us is, that there is a simple inflammatory affection of the brain, or its membranes, which, like any ordinary inflammation, ought to be completely under the control of remedies; and that a physician, instead of boasting of his success when he succeeds in curing such a case, should regard himself as disgraced if he suffered a patient to die of it. On the other hand, we learn that there is another and more numerous class of cases, viz.: the tubercular meningitis, which in all probability will terminate fatally under any mode of treatment. The ordinary symptoms of acute hydrocephalus are too well known to require mention, but rapid emaciation without assignable cause often precedes tubercular meningitis, and the patient falls into a similar state of ill health to that which growing persons are subject to.

Headache, vomiting, and constipation, are among the earlier characteristic signs; thus, in Becquerel's cases, headache was present in fourteen cases out of seventeen; it was constant, but remitted in severity. Vomiting occured in twenty cases out of twenty-seven; and often, but not always, is of a peculiar character, viz.: projectile, i. e. the vomiting occurs without much nausea, and the contents of the stomach are propelled suddenly and with great force, often to the distance of several feet from the person of the patient. Constipation was present in twenty-three cases out of twenty-seven; and often did not yield except

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to the most active remedies, it being of the most obstinate character.

We lay great stress upon the occurrence of stiff neck, occurring every afternoon or evening, and disappearing in the morning. It probably arises from irritation at the origin of the 12th pair of nerves, as these supply the muscles of the nape. If this symptom occur in a person born of tuberculous or consumptive parents, and headache, vomiting, constipation, and signs of irritation of the brain be present, it always excites our apprehension as to the result.

Another sign of great value is retraction of the abdomen, which usually occurs about the sixth day; the belly becomes depressed at its centre, so as to take on the form of a boat; this is almost a constant symptom, and occurs equally whether constipation or diarrhœa be present, and it occurs almost exclusively in this cerebral affection.

These are among the most important diagnostic symptoms, and yet few of them would lead us, if unaided by pathological investigations, to infer that a serious disease was going on about the brain. Dr. Hering asserts, that in the selection of a remedy, symptoms are always of more importance than pathological phenomena; would he direct his remedies against the vomiting, constipation, stiff neck, &c., &c., or against the meningitis? Must not the remedy, to be homœopathic at all to tubercular meningitis, be similar in its action to that going on in the pia mater at the base of the brain; we have seen that headache may be absent three times out of seventeen cases; the vomiting seven times out of twenty-seven; the constipation four times out of twenty-seven, and thus with every other symptom regarded as pathognomonic of the disease; the symptoms may vary, or be almost entirely wanting, and yet the disease will remain the same; sudden or gradual remissions, deceitful appearances of amendment, and even of convalesence may occur, the patient may regain the use of his senses, recognize those about him, and appear to his anxious relatives to be recovering, and yet the course of the disease not be stayed, for quickly a deeper coma than ever will ensue; these fallacious symptoms of improvement may recur more than once. A physician who does not fix his eye singly upon the disease, and apply unflinchingly the remedies which bear upon it, and not merely upon its symptoms, will be certain to lose his patient, for it is notorious of this disease, that it furnishes a great variety of symptoms, and very many variations in the

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mode of their coming on, and in their combinations and succession, yet after death, the pathological appearances about the brain will vary but little from the standard. We do not mean to say that the symptoms should be entirely neglected, but merely that we should not be led away by them from giving our full and almost undivided attention to the disease of the brain. For instance, in 138 cases of hydrocephalus, tubercles were present in as many as 123; hence in the majority of cases our remedy or remedies should have a special relation to the tubercular dyscrasia. 2. The disease, in an immense majority of cases, locates itself in the pia mater at the base of the brain, especially about the Fissure of Sylvius; hence, we should be sure that our remedy or remedies act specifically upon this locality. 3. Many of the symptoms will subside of themselves, or else obstinately withstand all our efforts to relieve them until the disease gives way; for instance, the vomiting is a most important diagnostic symptom, for it generally occurs on the first day of the disease, yet it generally lasts only two or three days, and is rarely reproduced after it has once ceased; yet it sometimes lasts for a much longer period, and then withstands all efforts to relieve it, nor should we attempt to remove it, except with remedies also specific against the meningitis; again, the hydrocephalic cough depends upon the irritation at the base of the brain, about the origin of the pneumo-gastric nerve; it is a slight false cough, which partly resembles a suppressed effort to vomit, and is not unlike the morning cough of drunkards; when it occurs in conjunction with a peculiar embarrassment of the breathing, it is a sign of ventricular effusion, yet the remedies which are most homœopathic to this variety of cough, may interfere with the remedies for the meningitis: even Conium, which has a special relation to the scrofulous or tuberculous dyscrasia, and which is said to have caused a considerable effusion of fluid into the ventricles of the brain, might not prove strictly homœopathic, for we have no proof that it has ever simulated true meningitis. 4. The constipation is very difficult of removal at first, but diarrhœa usually supervenes before the termination of the disease, the ordinary remedies against constipation ought not to be used, at least we would not hazard counteracting the effects of the remedies given against meningitis, for the sake of having the bowels moved; in rigid homœopathic treatment, even Opium and Conium should be excluded, for neither of them is homœopathic to meningitis *per se*, although they are to some of its symptoms and consequences. We are often accused of not practising homœopathically, and we have no hesitation in avowing

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that whenever we cannot practice it as rigidly and exactly as is above laid down, we hold ourselves not bound to use apparently homœopathic remedies, even when recommended by the so called highest authorities, and we increase the size of our dose, for we consider it folly to give infinitesimal doses of any other than remedies which are most strictly and beyond all cavil exactly homœopathic to the case in question. Occasionally an out of the way symptom may lead to the accidental use of a strictly homœopathic remedy; thus, Eberle has known hydrocephalus to commence and proceed to the last stage with scarcely any other symptom than slight fever, with little or no pain in the head, but a constant and nearly ineffectual desire to pass urine; in one case not above a gill of urine was passed in 24 hours, for five days, and no other symptom of consequence was present; Monro has also observed such cases; in five cases of dropsy of the brain observed by Guersent, in which the profuse secretion of urine was quite remarkable, tubercles were found in the kidneys in every case; in all these instances the use of Cantharides would be strictly homœopathic, for it not only has a peculiar relation to tubercular diseases of the kidneys, but also to meningitis.*

In Hull's Jahr's Manual we are taught that the best medicine, in general, against cerebral inflammations and hydrocephalus, is Belladonna. If we turn to the pathological appearances about

* This paragraph affords a convenient opportunity of coming to some sort of understanding in the matter of symptoms. Suppose the constant desire to pass urine had not existed in that case, how would a physician have been able to select Cantharides? Suppose he had diagnosed meningitis to his perfect satisfaction, what should have guided him in the selection of a remedy? Dr. Peters mentions Cantharides, Camphor, black Hellebore, Hydrocyanic acid, Cicuta, Colocynth, and Gratiola, as homœopathic to meningitis. Which of those remedies is the true one in any given case? That which is indicated by the symptoms of the case. If there be a frequent desire to urinate, Cantharides is the true remedy. But what are we to do if the symptoms indicate neither Cantharides, nor Hellebore, nor any other of the above named remedies, and we have merely those general phenomena which, according to Dr. Peters, point to hydrocephalus, without indicating any particular remedy? Are we to give a remedy at random, or are we to mix all the remedies up together? We can do but very little in such a case. Dr. Hering proposes that in such a case we should be guided by the symptoms. What else could a physician be guided by? If we should have diagnosed hydrocephalus, and the symptoms should indicate both Belladonna and Cantharides, we should either give Cantharides alone, or both remedies alternately. If we understand Dr. Hering rightly, he only objects to any speculative rules of treatment being deduced from pathological alterations of structure. Surely he is right in that.—H.

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the brain produced by Belladonna, we merely find slight injection of the pia mater; hence, although the remedy may act specifically upon the seat of tubercular meningitis, yet as nothing short of effusion of lymph denotes actual inflammation, we cannot admit it as strictly homœopathic to meningitis, although it also produces inflammation in the sheaths of the nerves, especially of the optic; all the other effects of Belladonna upon the brain and its membranes are those of simple congestion, and that generally of a venous character; thus, it causes redness of the tubercula quadragemini and of the lobes of the cerebrum, with paleness of the cerebellum; accumulation of much black, thinly fluid, i. e. venous blood, in the vessels of the brain and its membranes. From these pathological appearances we should judge that Belladonna is far more homœopathic to simple congestion than to actual inflammation of the brain, or its membranes. Ordinary physicians regard violent and continued delirium as marking inflammation of the membranes of the brain, but the majority of cases where there is much delirium are not cases of meningitis of any kind, but only of increased vascularity. Aconite, Hyosciamus, Opium, Stramonium, Conium, &c., are also more homœopathic to congestion than to actual inflammation. Thus, Hyosciamus simply causes congestion of the cerebral vessels, with emptiness of the ventricles; Conium causes effusion of considerable fluid into the ventricles of the brain, cerebral vessels crowded with thick, black, i. e. venous blood, and profuse flow of blood when the scull-cap is taken off, &c., &c.

Again, Jahr recommends Cina against meningitis, because some of the symptoms of verminal irritation resemble some of those of meningitis; thus, hydrocephalus may be preceded by scrofulous or tuberculous derangement of the alimentary canal, marked, like verminal disease, by deficient or capricious appetite, or the patient may seem to dislike his food at times, and at others to devour it voraciously; the tongue becomes foul, the breath offensive, the evacuations unnatural and offensive; and sometimes the child, with feeble and tremulous hands, may be incessantly picking his lips, or boring his fingers into his nose or ears, and grind his teeth with a degree of violence almost insupportable, while the high degree of delirium, the twitching, starting, &c., which attend worm-fever are well known. None but a poor diagnostician would imagine that he had cured a case of meningitis with Cina, and we think that none but a poor homœopathist would imagine that it was homœopathic to actual meningitis of any kind.

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Having thus alluded to some of the pseudo-homœopathic remedies against meningitis, we proceed to point out some of the true remedies.

Cantharides-Meningitis.

In the American Journal of Medical Sciences, Vol. I. p. 368, we read that a healthy athletic lad swallowed an ounce of Tinct. Cantharides; in an hour after he had hurried respiration, flushed face, eyes red and suffused with tears, small quick pulse, convulsive agitation and trembling, acute pain in stomach and bladder; the next day he was better, but the day after an exacerbation of symptoms ensued, the pain about the bladder and priapism returned with wild delirium; on the following day he was completely unconscious, and the convulsions returned with appalling violence, lasting for several hours, followed by severe pain in the head and coma; he again improved and remained with occasional pain in the head and delirium, but sometime after was suddenly seized with severe pain in the head, pain in right side, chilliness, trembling, and universal spasms, after which he again sank into a comatose state; then alternately lethargic, comatose, rational or convulsed, and finally died.

Post mortem. Vessels of brain turgid, especially those of the cerebellum, which was covered with a coat of coagulable lymph, and about an ounce of turbid serum was effused at the base of the brain.

Again, Camphor produces inflammation of the membranes of the brain, great injection of the cerebral membranes and of the brain, softening of the brain, great congestion of the spinal marrow.

Helleborus niger causes great injection of the pia mater, but the ventricles are found without fluid.

Hydrocyanic acid causes frequent effusion of bloody serum at the base of the brain, ventricles of the brain crowded with serum, &c.

Cicuta virosa causes effusion of serum into one ventricle.

Colocynth causes great injection of the pia mater.

Gratiola induces a fiery red injection of the pia mater, &c., &c.

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TABULAR VIEW

Of the Cases which have been treated in the Homœopathic Hospital of Gumpendorf from the 1st of January to the 31st of December, 1845, *under the direction of Dr. Fleischmann.*

Diseases.	Remaining from year 1844.	Received.	Cured.	Dismissed uncured.	Died.	Remaining
Angina faucium,	1	69	67			3
Arthritis, acute,		2	1			1
" chronic,	1		1			
Bronchitis,		2	2			
Burns,	1	8	9			
Catarrh,	1	13	14			
Cholera,		4	4			
Cancer of the womb,		1			1	
Chlorosis,	2	13	15			
Cough, chronic,	5	28	30		2	1
" spasmodic,		1	1			
Colica, plumbae,		5	5			
" gastrica,		4	4			
" menstrual,		3	3			
Curvature of the knee,		1	1			
Diarrhœa,	2	6	7		1	
Dysentery, acute,		6	6			
" chronic,		1			1	
Erysipelas of the feet,		2	2			
Erysipelas of the face,		15	15			
Exsudation into the pleural cavity,		6	5			1
Fungus medullaris,		1		1		
" " of the liver,	1			1		
Fever, gastric,	3	74	73		1	3
" catarrhal,		15	14			1
" typhoid,	2	74	74		1	1
" rheumatic,	3	53	55			1
" intermittent,	6	51	56			1
Gastricismus,		6	6			
Haemoptysis,	3	13	12		2	2
Hemicrania,	1	5	5		1	
Herpes,		2	2			
Hoarseness, chronic,		2	2			
Hernia, incarcerated,		1			1	
Heart, defect of, organic,		3		2	1	
Hypochondria,		1	1			
Hysteria,		1	1			
Headache, rheumatic,		6	6			
Hydrothorax,		10			10	
Inflammation, rheumatic, of the joints,	3	60	60			3

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Diseases.	Remaining from year 1844.	Received.	Cured.	Dismissed uncured.	Died.	Remaining
Inflammation of the cellular tissue,		1	1			
" of the valves of the heart,		3	3			
Jaundice,		9	8			1
Measles,		5	5			
Meningitis,	1	3	3		1	
Menstruation, irregular,		2	2			
Ophthalmia,		7	7			
Otitis,		1	1			
Ovaritis,	1		1			
Psoric eruption,		4	4			
Peritonitis,	1	16	15		2	
Pericarditis,		2	2			
Pneumonia,	3	47	45		2	3
Pleuritis,		3	1		1	1
Rheumatism,		23	20			3
Scarlatina,		2	2			
Spasms, general,		5	4			1
" of the stomach,		7	7			
Swelling of the cheeks,		6	6			
" of the foot,		3	3			
" of the knee,	1		1			
Scurvy,		1	1			
Scrofulosis,		3	2		1	
Tremor, from working in metal,		1	1			
Tetanus,		1			1	
Tinea capitis,	1		1			
Typhus,	11	122	105		20	8
Urticaria,	1		1			
Ulcers of the feet,		11	9			2
" of the lungs,		23		12	8	3
" scrofulous,		1	1			
Varicella,		1	1			
Varioloid.		4	4			
Vomiting, chronic,		1	1			
St. Vitus' dance,		1	1			
Wounds,		16	15			1
Grand total,	57	925	843	26	71	42

The number of out-door patients who have been treated during the year 1845, amounts to 6610.

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TABULAR VIEW

Of the Cases which have been treated in the Homœopathic Hospital of Linz, from January 1st to December, 1845, *under the direction of Dr. Reiss.*

Diseases.	Remained from year 1844.	Received.	Cured.	Improved.	Dismissed uncured.	Died.	Remaining.
Abscess,	1	4	5				
Apoplex. plet.,		1	1				
Ang. gangren.,		1				1	
Arthritis,	2	4	1	1	2		2
Ascites,	1		1				
Anasarca,		2	1			1	
Burn,		3	3				
Caries,		1		1			
Chlorosis,		8	7				1
Cholera,		2	2				
Contusion,		12	11				1
Convulsions,		2		2			
Concussion, of brain,		2	2				
" of spinal marrow,		1	1				
Catarrh, of intest.,		2	2				
" of lungs,		11	11				
" chronic,		4	4				
" emphys.,	1	3		4			
" of stomach,		3	3				
Colic,		1	1				
" plumb.,		1					1
" gastric,		5	4				1
" menst.,		3	3				
" nervous,		1	4				
" rheum.,		9	9				
Coxalgia,		1			1		
Cough, spas.,		1	1				
Cancer, of womb,		2			1	1	
" of stomach,		1		1			
Decomp. of fluids,		1				1	
Disloc. of shoulder,		1	1				
Diarrhœa,		14	13	1			1
" catarrh,		1	1				
" chronic,		2	2				
Diabetes,	1		1				
Dysentery,	2	3	5				
Dropsy, gen.,	1	2	1			2	
Eruption, vesicular,		1	1				
Erysip., of feet,		8	6				2

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Diseases.	Remained from year 1844.	Received.	Cured.	Improved.	Dismissed uncured.	Died.	Remain.
Eresyp. of face,		6	6				
Entropium,		1	1				
Effusion, into pleural sac,		2	1			1	
" purulent, into pleural sac, and peric.		1				1	
Erethism of brain,		1	1				
Furuncles,		1	1				
Fever, catarrh,		5	5				
" inflam.,		2	2				
" gastr.,	2	29	31				
" rheum.,	1	45	44				2
" interm.,		41	40				1
Fluor albus,		1					1
Fung. medul. of liver,		1				1	
Grippe,		1	1				
Hernia, incar.,		1				1	
Hyperaem. of lungs,		1	1				
Hysteria,	1	3	4				
Headache, nervous,		1	1				
" rheum.,		12	11				1
Hemiplegia,		1		1			
Hemorrh. from womb,		1	1				
Hemeralopia,		1	1				
Itch,		1			1		
Inflammation, of pleura,	1	7	7				1
" chronic,	1		1				
" and lungs,		1	1				
" innominata,		1	1				
" chronic,		1	1				
" brain,		1	1				
" joints, rheum.,	2	8	10				
" throat,		15	15				
" valves of heart,	2	15	16				1
" knee-joint,		1	1				
" liver,		1	1				
" liver, chronic,		1		1			
" lens,		1		1			
" trachea,	1		1				
" " chronic,	1		1				
" lungs,		14	14				
" lungs and bladder,		1	1				
" lungs, tuberc.,		1				1	
" mammæ,		1	1				
" spleen,		2	2				
" schneid. memb.,		2	1	1			
" inner ears,		2	1				1
" parotis,		3	3				
" spinal mar.,		1	1				
" veins,		1	1				
" verteb. column,		1	1				

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Diseases.	Remained from year 1844.	Received.	Cured.	Improved.	Dismissed uncured.	Dead.	Remain.
Inflammation, gums,		1	1				
Jaundice,		7	5		1		
Limbs, frozen,		6	5				1
Melancholy,		1		1			1
Menses, suppr.,	1	5	5				1
Œdema, general,		1				1	
Ophthalmia, rheum.,		4	4				
" scrof.,	1	2	3				
Peritonit.,		5	5				
" traum,		1	1				
Paralysis, of spinal marrow,		4		1	2	1	
" rheum.,		1	1				
Photoph., scrof.,		2	2				
Panarit.,		1	1				
Prolaps. iridis,		1			1		
" uteri,		1	1				
Rash,		2	2				
Rheum., acute,	1	42	42				1
" chronic,		5	4	1			
" of nerves,		1	1				
Skin, exfoliation,		1	1				
Scarlatina,		3	3				
Swelling of axillar. glands,		1					1
" " cheek,		6	6				
" knee, arth.,		3	2				1
" inguin. gl. syphil.,		1			1		
" lower jaw,		2	2				
" gums,		2	1	1			
Spasms, hys.,		1	1				
Scurvy,	1	1	1			1	
Scrofula,	1			1			
Strangury,		2	2				
Tinea cap.,		4	2		1		1
Tuberculosis, intest.,		1			1		
" pulm.,	3	20		11	1	7	4
Typhus,	4	57	48		1	7	5
Ulcers, aton.,	2	15	14		1		2
" of stomach,		1				1	
" scrof.,		1					1
" syph.,		1			1		
Valves of Heart,		16		11	2	1	2
Vomiting, chronic,		1	1				
Zona,		1	1				
Grand Total,	37	618	523	40	18	35	38

The number of out-door patients who have visited the Hospital during the year 1845, amounts to 3868.

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TABULAR VIEW

Of the cases which have been treated in the Homœopathic Hospital of Kremsier (Austria), from Oct. 12th, 1845, to April, 1846, under the direction of Dr. Schweitzer.

Diseases.	Received.	Cured.	Improved.	Dismissed uncured.	Died.	Remain.
Abscess, lymphatic, of chest,	1			1		
Aneurism of aorta,	1			1		
Arthritis, chronic,	1		1			
Ascites,	1				1	
Anasarca,	1					1
Concussion of chest,	1	1				
Concussion of brain,	1	1				
Cornea, specks,	1	1				
Cough, acute,	3	3				
Cough, chronic,	10	7	3			
Colic, gastric,	1	1				
Cataract,	2		2			
Diarrhœa,	5	5				
Dropsy,	3	1			2	
Dropsy, ovarian,	1					1
Erysipelas of feet,	5	3				2
Erysipelas of face,	3	3				
Epilepsy,	1			1		
Fever, gastric,	17	15				2
" catarrhal,	4	4				
" typhoid,	13	12				1
" rheumatic,	3	2				1
" intermittent,	21	18				3
Gastricism,	10	10				
Heart, organic defects of,	1		1			
Herpes,	2	1		1		
Hemorrhage,	1	1				
Hematuria,	2	1				1
Hemoptysis,	4	2	1		1	
Hepatitis,	1	1				
Hemiplegia,	1		1			
Inflammation, scrofulous,	5	4				1
" articular,	2	2				
Laryngitis,	1	1				
Leucorrhœa,	1	1				
Menses, irreg.	1	1				
Ophthalmia,	8	6	1			1
Ovaritis,	1	1				
Pneumonia,	7	6			1	

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Diseases.	Received.	Cured.	Improved.	Dismissed uncured.	Died.	Remain.
Parotitis,	2	2				
Pleuritis,	2	2				
Phthisis, pulm.,	1			1		
Ptyalism,	2	1				1
Rheumatism,	3	3				
Swelling of knee,	5	1	1	1		2
Spasm, of stomach,	6	6				
Scrofula,	1		1			
Tracheitis,	1	1				
Typhus,	10	9			1	
Tetanus, traumatic,	1				1	
Typhus, cer.,	1				1	
Ulcers, of feet,	13	11	1			1
" of hand,	2	2				
" of lip,	1		1			
" of back,	1	1				
" scrofulous,	2	2				
Urine, incont.,	1	1				
Vomiting, gastric,	3	3				
Whooping-cough,	1	1				
Wounds,	2	2				
Grand total,	221	175	14	6	8	18

The number of out-door patients who have visited the hospital during the same period, amounts to 1335.

A CASE OF CHRONIC OVARITIS AND LEUCORRHŒA, SUCCESSFULLY TREATED BY ONE DOSE OF PLATINA 200.

BY DR. HEMPEL.

A most beautiful instance of the action of the highest potencies has lately occurred in our practice. We deem it absolutely necessary to record all those cases which furnish a striking illustration of the truth of our law, and of the efficacy of our remedies. Successful cures are the only arguments which we now possess in favor of our potentized remedies. There is nothing in known science by means of which we can account for their efficacy, especially for the efficacy of the highest potencies. We will now record a case of cure by the 200th potency of Platina, which will be found to be beyond all cavil. As regards the correctness of our statement we are willing to give every guarantee,

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and we pledge our word that not a single line has been added to the original record.

Platina is the remedy by means of which this almost miraculous cure has been effected. Of the great use of Platina in affections of the uterine system we have long become convinced by most striking cures. Not long ago, we were called to a lady who had been under allœopathic treatment for six successive months for the following symptoms: Last year she was suddenly attacked with metrorrhagia and rigor of the right arm, globus hystericus, violent pressure upon the chest and a compressive pain in both temples which was so violent that her family assured us she would attempt her life if she were not prevented by force. The metrorrhagia occurred at every monthly period, all the other symptoms, especially the headache and the globus hystericus remained permanent complaints, and, if possible, were worse at the time of the menses. A few doses of Platina removed the symptoms entirely. In the case of another lady who was affected with spinal irritation, Platina relieved, as by a charm, a dreadful itching in the uterus. This itching had lasted for several days and nights without interruption, and became so excessive at one time that the lady sent for us in the middle of the night, requesting to be relieved. One pellet of Platina 1000 quieted her, as by a charm, and the itching never returned.*

The subject of the present case is a young lady of twenty years. At the age of twelve she was attacked with leucorrhœa, which continued ever since up to the time we were requested to attend her. This discharge was uninterrupted day and night; in taking down a record of her symptoms we took especial pains to inquire into that point with great minuteness; this leucorrhœa was like the white of an egg, and otherwise inoffensive, but debilitating. At the age of fourteen the patient began to menstruate, the first catamenial discharges being without any pain. At the age of fifteen the patient was seized with violent dragging, tearing pain and soreness in the region of the left ovary, the dragging extending through to the small of the back. This pain was especially violent at the time of her menses and otherwise as permanent as the leucorrhœal discharge.

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*In another case of furious itching in the region of the mons veneris, of six years' standing, and which sometimes was so excessive that the lady when walking in the street, had to enter an alley or some place where no one noticed her, and where she might relieve herself by violent scratching, one dose of Kal. carb. 30 effected a perfect and permanent cure. The itching was very deep-seated.

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Simultaneously with the occurrence of that pain the catamenia assumed a morbid character: the blood had a blackish appearance, it came in clots, and the flow lasted from eight to ten days. At the same time the patient was seized with a violent compressive pain in the temples, and a sense of weight upon the chest, as if it would be crushed by a mass of lead; these symptoms remained likewise permanent complaints. The soreness in the region of the ovary gradually extended over the whole left side, and was especially violent in the small of the back, where it extended across either side of the spine. Two or three times every day the patient experienced violent shootings from the side along the lower portion of the left mamma. These shootings were excessively painful, and accompanied with nausea and giddiness; the patient thought that the nausea and giddiness were caused by the pain. For the last three years the patient had not been able to rest on the left side partly on account of the soreness, and partly on account of those shootings, which came on as soon as she attempted to lie on that side. For the last three years the pain in the region of the left ovary had changed to a dull, heavy, gnawing pain, and the soreness in the side had greatly augmented. The patient's strength had been failing for some years past; she felt languid in the morning, when rising from her bed she felt weary and broken down, her eyes had retreated into their sockets and were surrounded with blue circles; her spirits were drooping; she avoided society, or rather had an aversion to it; she was extremely melancholy, and, as she had never improved a hair's breadth under the treatment of the best allœopathic physicians, her parents began to feel concerned about her.

The symptoms pointed so evidently to *Platina*, that we prescribed it off-hand, dissolving two pellets of the two hundreth potency in half a tumblerful of water, and requesting the patient to take a teaspoonful night and morning. Eight days after the first visit we saw the patient again, and received from her the following statement. For the first three days that she took the medicine every symptom was worse, and she expressed her firm belief that this aggravation of her sufferings must have been owing to the medicine, for she had never felt such a remarkable exacerbation of pain at any time previous; and during the period of this exacerbation she had been surrounded with remarkably pleasant and cheering influences, which she thought would have relieved her sufferings, if the medicine had not prevented it. She took in all six doses of the medicine. On the morning of the fourth day

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she felt better than she had ever done before; and on the eighth day, when we saw her again, every one of her symptoms had entirely disappeared, with the exception of an occasional discharge from the vagina, which however was very slight, and nothing but a little watery mucus. She took Platina 30 in water, and after the first dose the leucorrhœa stopped entirely, and, up to this moment, during a space of three weeks the patient's health has remained perfect. She says that she feels as if a new life had come into her. We ought to state, upon positive information, that the young lady has not in the least been exposed to influences which might have been instrumental in removing her trouble. Besides she has declared emphatically that she knows she has been cured by the medicine. By turning to the Materia Medica, we shall find the whole group of symptoms of our case confirmed as a Platina disease. Let us examine.

Moral symptoms: Scarcely any remedy could be more suitable to the moral symptoms of our patient than Platina, as may be seen from the first 27 symptoms.

Head: The patient complained of compressive cramp-pain in the temples; see symptoms 53 to 62.

Chest: Weight on the chest; see symptoms 308.

Mamma: Shooting along the mamma; see symptoms 319 and 321.

Ovary: Dragging pain: see symptom 286, the correspondence is very remarkable.

Left side of the back: Soreness; see symptom 331.

Leucorrhœa: Albuminous; see symptom 299.

Menstrual discharge: Profuse; see symptoms 292 to 297.

As we said above the cure in this case is complete, so far at least, and by the two hundreth potency of Platina. Even if any of the symptoms should reappear hereafter, we feel confident that Platina will control them at once. The cure, so far, cannot be denied, no matter how you twist it and turn it. That the administration of two pellets of the two hundreth potency of Platina should be followed by such results as we have witnessed in the present case, is a mystery to us, and truly marvellous; but it is a fact, a stubborn incontrovertible fact, and facts like these should induce the systematic disbelievers in the power of the high potencies to forsake all unfounded opposition, and to examine into the facts and principles of our art, with minds that are open to truth and testimony, no matter in what shape and from what side it comes.

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NOTICE TO OUR SUBSCRIBERS.

Our subscribers are respectfully requested to send in the amount of their subscription for the present volume of the Examiner; those who do not comply with this request, cannot reasonably expect that our periodical should be sent to them hereafter.

HOMŒOPATHIC COFFEE.

This is a substitute for coffee, made of non-medicinal vegetables. It is a pleasant beverage, and must be very acceptable to those who do not wish to be deprived of something like coffee while under homœopathic treatment. To prepare it you mix one teaspoonful of the preparation with a cupful of *boiling* water and let the two boil together for fifteen minutes; then sweeten the preparation to your taste and drink it, with milk.—For sale by W. Radde, 322 Broadway.

NOTICES OF RECENT HOMŒOPATHIC PUBLICATIONS.

Bœnninghausen's Therapeutic Pocket-Book, edited by Charles J. Hempel, M. D.

This work has been published as the book-part of the Examiner.

The repertory is divided into the following parts:

1st part, designating the various parts of the body, and the remedies by which they are principally acted upon.

2d part, designating the morbid conditions of any kind which take place in any of the various parts of the body pointed out in the first part.

3d part, pointing out the circumstances under which the morbid appearances and sensations designated in the second part, are either aggravated or improved.

4th part, describing the various forms of fever which our remedies occasion in the healthy organism.

5th part, containing the "*concordances of our remedies.*" As this subject is not at all properly understood by homœopathic physicians, we will take the liberty to allude to it more in detail. It is generally supposed that by "concordances of remedies," is meant *the order in which they should succeed each other in diseases.* This lamentable misapprehension of a most important doctrine upon which such men as Hering and Bœnninghausen

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have expended years of study, shows how little the inmost spirit and true scientific character of homœopathy are as yet understood by practitioners, even by those who profess to be shining lights in the profession. By "*concordances of remedies*" is meant not the order in which remedies should succeed each other in diseases, but the fact that certain remedies correspond to the same group of symptoms at different degrees of similarity, or differently with reference to the idiosyncrasy of the patient towards one or the other member of the same group, or with reference to temperament, sex, etc. *Aconite* and *Coffea*, for instance, may be indicated by the same group of symptoms; Aconite may be ineffectual, or even positively injurious, whereas the idiosyncrasy, temperament, nervous system of the patient, may make Coffea the true curative agent in the case. Bœnninghausen says in his preface to the Pocket-Book that "the concordances have not only led him to understand the *genius* of the medicines, but, also to select with more certainty the proper remedies, and to determine the order of their successive exhibition, particularly in chronic diseases." By this is not meant that the remedies should be administered in the order in which he has written them down in the concordances, but that a practitioner, knowing what remedies correspond to the same group of symptoms or have the same or a similar relation to the same part of the organism, possesses greater facilities in comparing their pathogenetic effects with one another in reference to the same group of symptoms, and is of course, more certain than he otherwise would be to select the proper remedy. *Sapienti sat.*

An English translation of the Pocket-Book has been published in Germany. This translation being very faulty we have corrected it from beginning to end, or rather substituted a new translation in the place. Such terms as "*lacing together of the openings*," instead of "*stricture* or *constriction* of *orifices*;" "*mollification*," instead of "*ramollissement* or *softening*;" "*thronging*," instead of "*pressing* or *bearing-down*;" "*raffing*," instead of "*clawing*," etc., will not be found in our publication.

Hartmann's Acute Diseases, Vol. I, translated, with notes, by Charles J. Hempel, M. D.—Published and for sale by W. Radde, 322 Broadway.

This is the work of a man who has accumulated a vast experience in homœopathic practice, and who has been a devoted friend of our cause for upwards of thirty years. Hartmann's work is written both for homœopathic practictioners, and also

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for those allopathic physicians who wish to obtain an accurate and systematic knowledge of our treatment. The work is very complete, as complete as works of that kind can possibly be. Of the translation we think we may justly say, that it has been made with the greatest care. The second volume will appear very shortly.

Jahr's New Manual, translated, with important additions from various sources, by *Charles J. Hempel, M. D.*, assisted by *James M. Quin, M. D.*, with revisions and clinical notes, by *John F. Gray, M. D.*, contributions by several distinguished members of our profession, and a preface by *Constantine Hering, M. D.*

This Manual will be published in weekly numbers of 96 pages each; three numbers have already been published. It will be seen at the first glance that the work is got up in a style of great elegance and beauty. The Manual will contain every known remedy of the homœopathic Materia Medica, with extensive clinical observations and the pathological anatomy. It will be the most complete exposition of the pathogenetic effects of our drugs in existence, and will contain a number of new remedies, and additional provings of old ones which could not be obtained by any other channel. A full statement of the important additions and improvements of the New Manual will be found in the translator's preface.—Published and for sale by W. Radde, 322 Broadway.

THE BRITISH JOURNAL OF HOMŒOPATHY.—NO. XIX.

This number contains a few valuable articles, such as

Allopathic and homœopathic treatment of the malignant pustule in domestic animals, by Wilhelm Jænike, bailiff of the manor of Fagorowo.

On the treatment of apoplexy, by J. Ozanne, M. D. Guernsey.

On the mechanical and homœopathic treatment of spinal curvature and distortion, by Thos. Engall, M. R. C. S.—For sale by W. Radde, 322 Broadway, New-York.

A FEW WORDS IN REPLY TO DR. HUMPHREYS' LATE COMMUNICATION.

Dr. Humphreys forgot to state that as soon as I heard of his son's intention to translate Jahr's Manual, I informed him that I

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had been engaged in that undertaking for several months past, and that I should be glad to publish the work with him conjointly. Dr. Humphreys' son, instead of accepting an offer, which I think any other physician would have deemed generous, *declined*, owing, as I was assured by Dr. Humphreys' father, in Mr. Radde's presence, to the intermeddling of third parties.

As regards his statements in that communication, the truth of the matter is simply this: The number of Dr. Humphreys' translation which I have criticised, was considered by me *in good faith* the first number of the work; it was sent to me as such. Mr. Dean, the printer, afterwards stated to Mr. Radde in writing, that he had paid $12 for corrections in those 36 pages. Nobody will believe that after such an astonishing expenditure, that number was *not* to be considered a specimen-number. Mr. Radde would have published *Jahr's Manual* at the time originally appointed, if I had not read an announcement in the British Journal of a translation of Jahr's Manual, which I supposed was the New Manual I had begun to translate. By Mr. Radde's request I stopped the translation, and he offered Mr. Balliere to publish the work with him. I waited four months for Mr. Balliere's answer, and never got any until I received by the last steamer a copy of his publication, which is simply a republication of the old Jahr, without even the improvements of the American Edition.

Dr. Humphreys insists upon understanding some German phrases better than I do. I think I may say, without boasting, that a man who has made philology his study in a German College, is entitled to consider himself a better German scholar than the Doctor is willing to admit. With the Doctor's leave, I will show him some errors in his notes; for instance:

He thinks that "Lichtsucht" is correctly rendered by "*desire for light.*" "Lichtsucht" is a diseased condition of the optic nerve characterized by a desire or tendency to look into *bright* light, the ordinary light of day being too weak. Aconite produces a condition of that kind in the healthy subject most probably by means of a congested condition of the internal carotid artery pressing upon the optic nerve; I am just now treating a case of that kind at the New York Institution for the Blind.

"*Empfindung von übelriechendem Athem*" the Doctor insists upon rendering by "*perception of badly smelling breath,*" by which I understand that the patient's breath has a bad smell to the patient. This is not the meaning of the symptom. The meaning is, the patient feels as if, or he imagines he has a badly smell-

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ing breath, which is not the fact; it is an *illusion of the sense of smell* (an important symptom, of course). If the expression "perception of a badly smelling breath" means that the patient merely imagines that he has a "badly smelling breath" and consequently conveys the idea that the symptom expresses an illusion of the sense of smell, then I have not understood the phrase properly, and of course my criticism is wrong. The competent reader will of course judge for himself. I may state here that in quoting my criticism Dr. Humphreys has left out a comma between the words: "he feels as if, he imagines," &c., thus giving himself an opportunity of perpetrating a sort of witticism at my expense.

"*Unaufgelegtheit*" is translated by the Doctor by "*ill humor*;" it means want of disposition to do any thing, to talk, &c. The Doctor relies upon dictionaries, which every body knows are not half as reliable as the authority of a man who has acquired from his infancy, by study and practice, a living and scientific knowledge of all the parts and bearings of a language.

"*Kreuz*" is translated by "sacrum"; this is wrong, it means: small of the back or "sacral region"; "sacrum" means in German "Heiligenbein" (sacral bone).

"*Musik die wehmüthig stimmt.*" The Doctor insists upon translating this by "music which agrees with the sorrow." The Doctor may pile up all the dictionaries in Germany and attempt literal translations by their means, and yet I tell him that he is wrong in his interpretation. The phrase means: "music makes him sad;" the Doctor does not know, that is all.

"*Matter Schweisz.*" The Doctor confounds "*matter Schweisz*" with *gelinder* Schweisz, which latter I do not criticise; see Jahr's Codex, page 5, line 14 from above, where the term "*matter Schweisz*" is translated by "clammy sweat." It means: slight, incipient perspiration.

"*Drückender Schmerz,*" does not mean pressing pain, but "aching." Pressing pain is rendered by Jahr as "*pressender* or *drängender Schmerz.*"

And so forth. I told the Doctor that I thought some of my criticisms were less important than others, and that some two or three might perhaps be expunged; he, on the other hand, admitted, that most of my criticisms were just, as, in fact, any body who understands German knows, without my alluding to it.

As regards the remarks with which my criticism was accompanied, I will here express what every member of the profession with whom I am personally acquainted in this city, knows, that

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I regret exceedingly having been so severe, and for whatever personalities may have been mingled with my critical review, I sincerely beg the Doctor's pardon. These are my last words in the matter; I shall hereafter let every body do and write what he pleases: in time every thing and every body will assuredly find their level.

CHARLES J. HEMPEL.

PRIZE FOUNDED BY M. G. DANSI, OF MILAN.

The Homœopathic Congress of Paris, will award a prize, at its second session in 1848, to the best memoir on the following subject:

In what degree of dynamization do homœopathic medicines possess the greatest power in the treatment of acute as well as chronic diseases? Point out the characters of morbid conditions indicating the employment of one dynamization in preference to others.

What of the repetition of homœopathic doses?

A medal of gold of the value of 500 francs will be decreed to the successful memoir.

PRIZE FOUNDED BY COUNT DES GUIDI OF LYONS.

Demonstrate by reasonings and by facts that the science and the art of curing, have never been definitively fixed, in their principles and methods of action, except by homœopathy. A medal of gold of the value of 300 francs will be awarded to the successful memoir.

The memoirs must be transmitted, *post paid*, to Dr. Leon Simon, general secretary of the Hahnnemanian Society of Paris, Rue Neuve des Mathurins No. 9, before the 1st July, 1848; none will be received after.

The memoirs, written in French, Latin, German, English, Italian or Spanish, should be endorsed with a motto, which should also be written in a sealed note, containing the name of the author, his qualifications and residence.

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OPINIONS OF THE LEADING FRENCH HOMŒOPATHISTS ON OUR ART AND SCIENCE.

TRANSLATED BY JAMES KITCHEN, M. D., OF PHILADELPHIA.

SECTION I.

Doctrine.

The three first questions of the first Section being considered indivisible in their nature, Dr. Giraud considers them in the same report.

1. In what sense did Hahnemann wish the theory of vital dynamism to be understood? In what rank did he place it in the totality of his doctrine?

2. Is the idea of vital force the expression of a positive fact, or a means of explaining the other principles of the homœopathic doctrine?

3. The precept *similia similibus curantur*, in other words, the law of similarity, does it constitute the cardinal principle, otherwise called the principal truth of homœopathy?

The following resolutions were passed regarding the above questions:

1. The theory of vital dynamism is the expression of two incontestable facts; (*a*) The existence in man of an immaterial force which animates the organs in the states of health and disease; force without which there could be no organism, but organs composed of inert matter, and which would speedily fall into dissolution; (*b*) The existence in each medicine of a force peculiar to itself; like the first immaterial, acting according to its manner in each substance, to which it gives properties which are not met with in any other.

Hahnemann considered the theory of vital dynamism as the fundamental base, the principal truth of his doctrine.

2. The idea of vital force serves admirably to explain the other principles of the homœopathic doctrine; but it is, at the same time, the expression of a positive fact.

3. The law of similarity cannot be considered as the cardinal principle of homœopathy; but only as the fundamental base of one of the branches of the doctrine: the therapeutic branch.

On the fourth question, What should be understood by spe-

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cificism? what are its characters? to what theoretical and practical errors would it give rise should it prevail? in what does it differ from true homœopathy? according to the report of Dr. Crosesio, the Congress adopts the following:

Specificism, considered in itself and its tendencies, is a formal negation of the homœopathic doctrine. It should be considered as the most dangerous and the most radical heresy that it is possible to imagine, notwithstanding it may have adopted the principle *similia similibus curantur*, since this principle, isolated from the other principles of the doctrine, does not suffice in itself. Should it prevail, it would tend to re-establish all the errors taught in the allopathic schools. It differs from true homœopathy as much as a negation differs from an affirmation, or as a contradiction differs from a complete and regular doctrine.

The fifth question, Does Homœopathy, such as it has been bequeathed to us by Hahnemann, constitute a complete doctrine? if not, what principle, what law should be sought for to render it so? was answered by Dr. Brasier, and adopted as follows:

Homœopathy, as received from Hahnemann, is a complete doctrine; for it rests on a physiological principle, vital dynamism; on a pathological principle, the dynamic nature of disease; on a principle of materia medica, pure experimentation, and on a principle of therapeutics, the law of similarity.

The sixth question, What analogies exist between the law of similarity, and what the allœopathic school call the substitutive method? what are the differences? was answered by Dr. Dalean, and adopted as follows:

Notwithstanding the appearance of some analogy in the enunciation of its precepts, the method called substitutive, differs essentially from the law of similarity. A true antagonism prevents confounding under a same denomination this therapeutic method, purely empirical, with the rational doctrine called homœopathy; for the same reason it is impossible to confound them in practice.

The seventh question, Does there exist a point of conciliation between the homœopathic and allœopathic schools? was answered by Dr. Cosnec, and adopted as follows:

No, there does not and cannot exist any conciliation between the two schools; whether homœopathy be considered in its principles or in its method and means, there can be no possible conciliation. Homœopathy, being a radical reform in medicine, can concede nothing to the allœopathic doctrine; to try to conciliate the two schools, would be a step to the denial of homœopathy.

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SECTION II.

Pathology.

1. What should the ***Diagnosis*** be, homœopathically considered? After a long discussion on the report of Leon Simon, the answer was referred to the next Congress.

2. In naming diseases, the nosology of the old school is generally used; can we at present establish a nomenclature, which can be the rigorous expression of the homœopathic pathology? On what principles should it be based? Dr. Leon Simon reports that a nomenclature would be useful and desirable, but that such a nomenclature being necessarily the rigorous expression of the pathology, it is impossible to establish it before first establishing the homœopathic pathology.

3. Does there exist a fundamental difference between the syphilitic and sycosic virus? Dr. Chancerel reports, and the Congress adopts the following:

1. The syphilitic and sycosic virus show themselves by diametrically opposite primitive symptoms; 2, they do not the less differ by their secondary symptoms; 3, the cure of these two morbid conditions calls for the use of therapeutic agents, different and appropriate to each of them; it is therefore evident that there exists between these two virus a fundamental difference.

SECTION III.

Materia Medica.

1. Is there any other method besides *pure experimentation*, aided by *toxicology* and *clinical experimentation*, to find out with certitude the pathogenetic virtues of medicines? Mr. Ledure reports, and Congress adopts the following:

In the actual state of science, no other method can be pointed out. But the Congress desires that numerous pure experiments, carried to the utmost limits, should be tried on animals.

2. What is the best method to pursue in the present state of our knowledge in pure materia medica, to establish the characteristic of each medicine? Or thus modified, according to the report of M. Perry, What is the best method to pursue, &c. to determine what are the characteristic symptoms of each medicine? Congress adopted the following:

a. In the present state of our knowledge in pure materia

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medica, the best method consists in the deep and comparative study of the pure pathogenesis of each one of them.

b. The method to facilitate such study, as likewise the practical applications, would consist in making new pure experiments, directed with the view of establishing groups of symptoms and complete tablets of morbid conditions which each medicine may develope.

c. These new experiments should be made as much as possible, with very high dynamizations, in order to avoid the secondary symptoms.

d. The attentive observation of primitive effects produced by medicines in every high dilution during the treatment of disease, may already furnish valuable information, for the pathogenesis considered in this new point of view.

3. In the preparation of homœopathic remedies, is there only division of the substance triturated or diluted, or else division of the substance and impregnation of the inert mass in which it is triturated or divided, by the properties with which it is endowed? Dr. Ledure reports, and Congress adopts, as follows:

In the preparation of the homœopathic medicines, there is not only division of the substance triturated or diluted, but there is also impregnation of the inert mass in which it is triturated or diluted, by the properties with which the substance may be endowed.

4. In the homœopathic dilutions, is the increase or the diminution of the pathogenetic force proportional to the attenuation of the matter? Congress adopts as follows:

In homœopathic dilutions, the development of the pathogenetic force ought to be proportional to the attenuation of the matter; but there may be a point which cannot yet be named, at which this force seems to have a tendency to decrease.

The Congress expresses the wish that a series of experiments be made with dynamizations more and more elevated, with the view of ascertaining on the one hand the progression of the pathogenetic force, and also of examining if new symptoms will be developed under the influence of these progressive dynamizations.

SECTION IV.

Therapeutics.

1. What is the most appropriate dose in the treatment of acute and chronic diseases? Or in other words, in what degree

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of dynamization has a medicine the power of curing without producing aggravation ?

2. Should the doses be repeated as well in acute as in chronic diseases ?

3. Do the acute diseases call for the use of high, medium, or low dilutions ?

These questions were answered by Dr. Nunez, and adopted as follows :

a. In homœopathic treatment, the determination of the dose and of the dilution are subordinate to the more or less rigorous homœopathic choice of the medicine.

b. The dose should be in the inverse, and the degree of dilution in the direct ratio of similitude which exists between the morbid symptoms which we have to contend with, and the properties of the medicine which we apply to them ; that is to say, the more this similitude is complete, the more the dose should be weak and the dilution high ; the less, on the other hand, this similitude between the morbid and medicinal symptoms is exact, the lower and stronger should the dose be.

c. The more homœopathic the medicine is, the more injurious is it in strong doses and low dilution.

d. In the cases in which practice has provided, by incontestable facts, the efficacy of low and medium dilutions (from 3 to 30), prudence exacts that we should abstain from very high dilutions (say from 200 to 2000), unless, for exception, the low and medium dilutions have been unsuccessful in such cases, or until a series of experiments have demonstrated that the very high dilutions are still more useful.

e. The doses of medicine should be in inverse, and the degree of dilution in direct ratios to the receptivity of patients to homœopathic medicine.

f. When a medicine is truly homœopathic, the repetition at short intervals, in acute as well as in chronic diseases, is always useless if not injurious.

g. The more homœopathic the medicine, the less useful is the repetition, and the more, on the contrary, is it full of danger.

h. The less the medicine is homœopathic, the more necessary is the repetition and the cure uncertain (in direct treatment).

4. Are there other diseases, except the scarlatina of Sydenham, the variola and the Asiatic cholera, to which homœopathy can oppose a preservative treatment ? What are those diseases ?

To this Dr. Croserio answers, and Congress adopts, as follows :

All the virulent and miasmatic diseases are susceptible of

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preservatives, independently of the diseases indicated in the question. It would seem that measles and hooping cough may have found their preservatives in pulsatilla and drosera.

5. What is the mode of local action of medicine? In other words, What effects does the direct action of medical substances produce on the skin and mucous membranes? Is this action always chemical or physical, or always dynamic? or else does it vary according to the substances used, dynamic, physical or chemical? how can they be distinguished? what consequences would this distinction have on practice?

Dr. Croserio reported that the above questions could not at present be answered, and they were referred to the next Congress.

6. Is the law of similarity the only principle of therapeutics, or is there a hygienic medication, called rational, which should be the indispensable auxiliary of the specific method?

Dr. Corme reports, and Congress adopts, as follows:

The law of similarity is sufficient for every case of therapeutics, and in no case should the hygienic or rational medication be applied; this pretended medication is but a return towards the old allopathic practices.

7. In the treatment of an incurable disease, is it allowable for a homœopathic physician to have recourse to certain means used in allopathic practice, such as opiate, &c., in order to allay the pangs of dissolution?

Mr. Ebhers reports, and Congress adopts, that in no case should a homœopathic physician have recourse to such means.

8. Are there in homœopathy, exceptional cases, in which bleeding may be resorted to? What are those cases?

Mr. Ebhers, having examined the question in its physiological, pathological and therapeutical bearings, reports that, in no case is it allowable to have recourse to bleeding during homœopathic treatment.

9. In a homœopathic treatment, can hydropathy be of any service? What is the value of this last?

Dr. Longchamps of Fribourg reports, that homœopathy may sometimes profit by certain hydropathic means, such as immersions and ablutions, but that it should be absolutely proscribed in organic affections and in subjects who have a tendency to such affections. The answer to the second question, the value of it, is referred to the next Congress.

10. Can animal magnetism be of service in homœopathic treatment?

a. Simple magnetism may be employed as a palliative agent for the purpose of easing pain, of arresting a painful crisis, or of

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strengthening exhausted forces; but never concurrently with homœopathic medicines.

b. Somnambulism, abstracting clairvoyance, cannot be used in any case, neither as curative nor palliative agent.

c. Clairvoyance is such an uncertain state, that the homœopathic physician should not trust the indications given by the somnambulists, whether respecting themselves or others. In no case, should he give up the positive indications furnished by the pure materia medica, for the adventurous solutions which the somnambulists may offer him.

11. What should be thought of mineral waters and their use?

Dr. Gouré reports, and Congress adopts, as follows:

a. We cannot use mineral waters without first knowing their pathogenetic effects.

b. This previous knowledge once acquired the mineral waters should, besides, be subjected to dynamizations before being used.

12. Is mercury the sole specific of syphilis?

Dr. Croserio answers, Yes, in simple, genuine syphilis mercury is the sole specific.

13. In the treatment of diseases called surgical, are there not cases in which the homœopathic physician may be allowed to make use of two surgical means, viz., compression and cauterization?

Dr. Leon Simon reports:

a. Compression is a palliative and never a curative means.

b. It may be used as an adjuvant in chronic diseases, considered thus far in the province of surgery; in such a case it should be simply contentive.

c. It may also be employed as a provisionary hæmeostic, in traumatic hemorrhage.

d. It may, finally, be usefully employed, as a mechanical means of dilatation, to atrophy certain adhesions, or enlarge a natural orifice contracted by adhesions or cicatrices.

e. Cauterization should be rejected from the treatment of diseases of internal or medicinal origin; it should be reserved for the cases of bites of poisonous or rabid animals.

14. Respecting regimen and the mixture of medicines, Mr. Croserio reported as follows:

1. The homœopathic regimen, as indicated by Hahnemann, is necessary in the treatment of diseases; nevertheless, we should pay attention to the habits and age of the patient, as well as to the exigencies of climate.

2. In no case can the mixture of medicines be considered in any other light than that of heresy in homœopathy.

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CASE OF DROPSY AND INVETERATE ULCERATED LEG.

COMMUNICATED BY H. SHERRILL, M. D.

Mrs. P. Fowler, aged 46. In 1816 she had a severe attack of child-bed fever, during which she was given a large quantity of calomel, was thoroughly salivated, and was a long time under its effects. After this she was affected with pains in the limbs and ill turns. In 1832 she had the cholera severely, when she again took freely of calomel, and was a long time sick before she recovered. Soon after this she was taken with derangement—became a frantic maniac. This state lasted about three years, when she recovered and became rational. After this, in 1840, she was attacked with dropsy—had ascites, followed by general anasarca—the legs were very much swollen—they got to be ulcerated very extensively. Those diseases have gone on rather increasingly ever since, except that the ulcer of the right leg has healed. Now for more than two years she has been very large in all parts of the body. The abdomen is enormously distended; it is about five feet in circumference, and there is a general œdema of the whole body and of the face and hands. The left leg is twenty-five inches in circumference below the knee. This leg has an extensive phagedenic ulcer on it, which surrounds it with very hard, callous, uneven edges. She suffers with great pain in the leg, severe pain in the back and through the abdomen, and is very much troubled with dysuria. Since the dropsy came on she has been almost continually using remedies; sometimes regular allopathic treatment, at others botanic remedies, and at others she has taken quack nostrums. She stated she had not obtained any permanent benefit from any of the treatment, and had given up as incurable, and concluded to submit to a hopeless fate, when I began the treatment of the case. After taking a minute record of the case, we gave her Ars. 3 dilution, and Cann. 2d in alternation, two doses of each in twenty-four hours; emollient poultices were applied to the ulcerated leg.

Sept. 1*st.* The dropsical swelling has considerably diminished; the dysuria is much relieved, and there is less pain and inflammation in the leg and ulcer. It seems unnecessary to detail the treatment of this case, further than to notice the medicines given, and the result. Suffice it to say that the remedies were given in a manner which seemed applicable to the condition, or

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varying or alternating to meet the indications. They were given in about the following manner:

Sept. Ars. Cann. Sulph. Stramo. *Oct.* Rus. Merc. Stramo. *Nov.* Silex. Rus. *Dec.* Ars. Cann. *Jan.* 1847. Ars. Stramo. Cann. &c. &c. The medicines used were all strictly homœopathic, either in triturations or dilutions, from the first to the fifth potence. She steadily improved, and in two months the abdomen was twelve inches less in circumference, and the general dropsical symptoms were very much diminished. The ulcerated leg had diminished very much in size, and the ulcer was half healed.

Dec. 1st. Nitrate of silver as a lotion was daily applied to the ulcer, and a roller bandage, which had a happy effect. By the influence of this treatment the callous edges of the ulcer diminished, and the ulcer healed rapidly.

Feb. 1st. The ulcer is entirely well. She is fully relieved of all the dropsical symptoms, except of the abdomen. The circumference of this part is about twenty-four inches lessened. She is free from pain of any amount, her general health seems good, and she has a good appetite. She walks about and rides out, and is able to do a good deal of work, and enjoy herself cheerfully in visiting and seeing her friends.

OLD SCHOOL HOMŒOPATHY.

BY JOHN C. PETERS, M. D.

1. In the 8th vol. Am. Jour. of Medical Sciences, p. 243, we read that Dr. Feist has derived great advantage from the use of Savin in uterine hæmorrhages, which have continued for a long time, and when the discharge was thin, pale, and fetid, he administers four three-grain pills three times a day at first, and gradually increases the number until ten are taken at each dose. The credit of being the first to call attention to the use of this article in metrorrhagias, is awarded to Dr. Wedekind.

2. On the next page of the same Journal, Dr. Elliotson, of London, is made to say that hydrocianic acid will relieve vomiting far more than any other medicine; yet a little farther down he states that, "although it will relieve the vomiting arising from mere morbid irritability, it will, from its irritating propensities, likewise cause it, for if you give an over-dose it may produce ex-

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treme nausea, extreme vomiting, and perhaps pain in the stomach." It will be seen that it is more apt to cause nausea and vomiting than pain, yet Elliotson asserts that those who try it, "will be much more struck with its use in lessening vomiting, than in lessening pain in the stomach;" in fact he states that "it is no exaggeration to say that he has frequently seen vomiting, which has lasted for months, cease on the exhibition of the first dose of this medicine; even in cancer of the stomach it will allay the vomiting and pain much more than any thing else."

3. The Calendula officinalis, when applied to a sore, causes severe burning, which passess over into actual pain, yet Westring found it the only remedy which would alleviate the burning pain in an extremely painful cancerous induration of the breast.

4. In the same Journal, p. 240, we read that Dr. Fritze, of Magdeburgh, speaks in very favorable terms of the Sulphuret of Potassa, or Liver of Sulphur, in croup; a teaspoonful of a solution of twelve grains in half an ounce of water is given every half or one hour, while the anterior part of the chest is rubbed with hartsborn liniment. In most cases, in a few hours the cough becomes looser, with a free expectoration of mucus and shreds of false membrane, while the respiration becomes less embarrassed.

5. Ibid. p. 239, we read that the celebrated Græfe, of Berlin, has detailed five cases of gonorrhœa, in which the chloride of lime was employed with advantage,—of the strength of one drachm to eight ounces of emulsion; a tablespoonful every three hours; after taking two or three doses the patient experiences painful erections, burning in urethra, and pain in voiding urine, but all these symptoms abate much before the whole of the mixture is taken, and the discharge diminishes in quantity—three portions generally perfect a cure.

6. The use of Carbo vegetabilis in inflamed and burning hæmorrhoids, has long been known to the homœopathists. In the same Journal, p. 368, Dr. Fahnestock informs us that soft, fine cork, charred, then rubbed in a mortar and sifted, then triturated with pure olive oil to the consistence of paint, and applied to the inflamed piles with a camel's hair pencil, often affords very prompt and wonderful relief; he has seen persons in the most excruciating agony from protruded piles, almost instantly relieved; he cannot account very satisfactorily for its mode of action in allaying irritation.

7. In the Med. Chir. Review for October, 1845, p. 554, we read that Dr. McGregor thinks that the grand peculiarity of Asiatic cholera is an internal congestion, which nothing so effectually

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counteracts as the action of vomiting, and assumes that the physician must therefore be most careful that he does not use any means to arrest too quickly this so frequently salutary effort of nature. He says that a vast deal of harm has been done, in cholera more especially by the injudicious administration of large doses of Opium and other sedatives to stop at once the vomiting and purging in the early stages of the disease. Dr. McGregor's favorite remedy in cholera, and one with which he positively assures us he has scarcely or never failed in curing the disease, when timely and rightly administered, is *Croton Oil.* He thinks it acts as a powerful anti-congestive agent, by the vomiting and purging which it produces, and asserts that when free vomiting ensues, the cold, clammy skin of the patient becomes moist and warm. He has given as much as five drops of Croton oil to one patient within five hours, and the patient recovered. What do the high dilutionists say to that?

In the same Journal we learn that Dr. Jephson, after trying the ordinary remedies ineffectually in Asiatic cholera, viz., stimulants, Calomel, Opium, &c. &c., had recourse to the use of emetics and neutral purging salts. The results, he says, were very favorable; dose, one-quarter grain of Tartar emetic, and one drachm Epsom salts every half hour; after the third or fourth dose, the vomiting and purging often ceased. Opium invariably appeared to do mischief in the long run, and seemed to increase the tendency to relapse. Dr. Jephson remarks with great simplicity, in reference to the modus operandi of his treatment, that it is not the simple effect of an emetic which is beneficial, but it is the *sedative!* effect of the saline tartar emetic to which he attributes the benefit from its use. In illustration of the sedative! influence of Tartar emetic! on the stomach, he gives a case of cholera, in which the irritability of the stomach was only allayed effectually after six grains of hill opium, and six grains of tartar emetic had been taken; in a short time the patient fell asleep; after this the stomach was so much less irritable that the patient retained sago and wine, and recovered rapidly.

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ON DISEASES OF THE HEART,

By Cl. Mueller, M. D.

TRANSLATED WITH NOTES, BY JOHN C. PETERS, M. D.

PART IV.

(Concluded from No. 4)

PHOSPHORUS.

Effects on the healthy subject: Congestion of the heart, and palpitation, which becomes very violent after eating; palpitations with anxiety, coming on in the evening, and early in the morning on waking, while in bed; frequent and violent palpitations; violent beating of the heart in the afternoon, after slight mental emotion, and lasting for an hour, preventing one from lying down; another slight paroxysm on going to sleep; palpitation early in the morning, after an ordinary breakfast; palpitation consisting of two, three or six powerful throbs, while walking or sitting, after dinner, or of one or two throbs while lying on the left side at night; several violent beatings of heart, from slight motion, especially of the left arm, or from rising up in bed, or from stretching oneself, all of which are relieved by rest; violent palpitation as soon as one awakes in the morning, or in the evening after lying down; violent palpitations at night; quickened circulation; throbbing of the carotids.

Clinical experience corroborates the usefulness of Phosphor in palpitations from abdominal infarctions, and from flatulence, while several of the above heart-symptoms arose, or were aggravated after eating, and it is well known that in many organic affections of the heart, the paroxysms are aggravated after eating, especially of indigestible or flatulent food.

[Phosphorus is apt to produce jaundice, and it is well known that disease of the heart is apt to be followed by enlargement of the liver, and by jaundice. Dr. Mueller thinks that Phosphor. can scarcely ever be indicated in acute endocarditis, but we can see no reason why a remedy which acts so powerfully upon the heart as it, and which is so apt to produce inflammation of every tissue with which it comes in contact, may not prove homœopathic to acute inflammations of the heart. However this may may be, Dr. M. has certainly neglected to point out the variety

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of palpitations against which Phosphor must prove most serviceable, viz., in those which arise from irritation or abuse of the sexual organs. J. C. P.]

RHUS TOXICODENDRON.

It causes: Violent pulsating stitches above the heart, forcing one to cry aloud; stitches in the region of the heart, with painful lameness and numbness of the left arm; palpitations while sitting still to such a degree that the whole body shook at each throb; feeling of weakness of the heart, as if it were trembling (it is said that persons who are taken with trembling of the heart after every febrile excitement, especially of a rheumatic nature, generally have dilatation of the heart), inexpressible anxiety, with aching about the heart and rending in the sacrum; true cardiac agony, preventing sleep for more than half a night.

It is a peculiarity of the action of Rhus that the most violent attacks and complaints arise while the body or organ is in a state of the greatest quiet, and is held as motionless as possible, while motion produces relief; this characteristic also holds good of the effects of Rhus on the heart, and is peculiarly valuable, for there are but few diseased conditions of this organ in which the opposite does not obtain; but in insufficiency of the Aortic valves, very few dangerous or severe paroxysms arise, as long as the heart possesses sufficient contractile energy to force on again the blood which regurgitates through the unclosed valve; hence every thing which debilitates the heart, such as blood-letting, large doses of Digitalis, low diet, an inactive and sluggish mode of living produces considerable disturbance and dangerous symptoms; while every thing which tends to strengthen the constitution, such as good diet, iron, bark, judicious exercise, &c. are productive of benefit; to this state Rhus is preeminently homœopathic.

[It deserves attention in diseases of the heart, from metastases of erysipelas, and other eruptions, and from rheumatism. J. C. P.]

GRAPHITE.

Its causes: Oppression of the left side of the chest and of the heart for several hours in the morning; aching in the region of the heart at each inspiration; piercing pain in the cardiac region; throbbing of the heart, so violent when lying on the left side that the bed clothes are moved by it, attended with anxie-

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ty, and relieved by turning over; violent commotion of the blood in the heart and rest of the body from the slightest motion; violent palpitations which jar and move the hand and arm, and make one anxious; violent throbbing of the heart occurring as suddenly as electric shocks, and extending to the neck.

Although there is no clinical experience of the benefit of Graphite in heart-diseases, still the above symptoms are too decided not to render it an important remedy, even in the severer forms of hypertrophy and dilatation, especially when arising from the suppression of chronic herpes, eczema, &c.

Sepia produces a number of unimportant heart symptoms, and may prove useful in the palpitations of persons suffering with chlorosis or amenorrhœa. Calcarea may prove useful in the heart affections, organic or functional, of markedly scrofulous subjects; Oleander and Natrum, Carb. and Mur., are referred to by Mueller without the indications of their use being very evident or exact. In conclusion we must apologize for the length of time which the concluding number of this paper has been delayed; in point of fact we took too little interest in the above drugs, which have as yet produced no evident organic changes to wish to incorporate them in an article devoted especially to the consideration of organic diseases of the heart. With such remedies as Corrosive Mercury, Arsenic, Bismuth ,which produce indubitable inflammation of the endocardium and valves, and Colchicum and Croton which cause extensive pericarditis, and such remedies as Aconite, Digitalis, Veratrum, Spigelia, Cannabis, &c., against the functional derangement, it seemed almost useless to multiply remedies. [J. C. P.]

Sacket's Harbor, 10th March, 1847.

MESSRS. EDITORS:—The allopaths in this section, after having exhausted their wits in foolish and ridiculous comparisons, and rung all the changes possible upon the inertness and inefficiency of Homœopathic medicines, as well as their poisonousness, &c., have obtained the aid and co-operation of a certain learned Professor, of an obscure college in some remote part of Ohio, who in the profundity of his laborious researches, has found out that they are now instead of inefficient so powerful that but few constitutions can bear them, and another Sangrado, that has lately come into the place, following up bleeding and calomel equal to his won-

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derful master of old, not sparing even the aged and infirm, or the feeble delicate child of a few years old from the lancet, has discovered from a few months knowledge of homœopathy, that those who take the medicine long, run into a consumption! Surely we live in an age of wonderfully deep and rapid investigation, and the disciples of the sage of Meissen have reason to blush at their stupidity when novices make such truly wonderful, rapid, and disinterested discoveries!

A day or two ago, I had an opportunity of witnessing some of their exalted practice, for which I shudder, and from which I think you will with me exclaim, "good Lord, deliver us." The attending physician informed me in the morning that a Mr. Hovey had a child nearly a year old that had been sick with a bowel complaint, for which he had given it hydrarg. cum creta and opium, and that two or three times he had thought it nearly cured (primary effect of the opium), and then it would be worse again (secondary effect), but that that morning it was taken with vomiting, and he thought likely the father would come after me to see it with him. I heard no more until about half past 5 o'clock P. M., when I was requested to visit the child—that the doctor was waiting. I shortly repaired to the house and found a fine fleshy girl apparently in the agonies of death and pulseless, though the doctor thought since he had given it some brandy he could distinguish a pulse. I found the face pale with a slight bluish appearance around the mouth, the lower jaw relaxed and hanging with the under lip puckered and drawn in, and twitching at the corners of the mouth, the eyes fixed, half closed, glassy, slightly convulsed, and turned rather upward, the pupils contracted and immovable, frequent rubbing of the nose and upper lip with the arm or hand as if itchy, suppressed and irregular intermitting breathing, returning after some minutes as if slightly spasmodic, or rather like a hiccough, a general insensibility, and a little later a coughing on swallowing a liquid. Vomiting and purging had ceased about eight hours before. I informed the doctor, that the child appeared to me to be laboring under too much opium, and while the doctor was getting an emetic ready, I learned from the nurses, that it had taken and retained three or four doses of three drops each but the last, of laudanum, at intervals of two hours, and that the last time, about three hours and a half before, the mother, in turning it out got too much and poured it back without rinsing or wiping the spoon, and dropped the three drops in it and gave, making probably one dose of from five to six drops at this time, and from twelve to fifteen drops in the short period of four hours,

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from 10 to 2 o'clock, to say nothing about what the child had probably taken previous to this period. There can be no doubts of efficiency or power in this case only to allopaths, nor fears of consumption to homœopaths, but that there was a *quantum sufficit*, as the sequel proves, must be apparent to all, which made me again feel quite satisfied with my conscience and the little doses, though I did not have an opportunity of trying them here, in Rome. We could not get the stomach nor bowels to act from enemas, there was such an insensibility ; I tried to use my stomach pump, but found the tubes imperfect and leaky. We made use of coffee and injections of the same, also camphor, ether, frictions, and the warm bath, but the child died about twelve or thirteen hours after, and all is well because it was allopathy. When will men having a doctor prefixed to their names, and even professors, raise the veil of prejudice and incredulity that obscures their vision, and see a primary and secondary effect and the true symptoms of medicines ? and when will an enlightened public compel them to raise that veil, as in Austria and Germany, &c. ?

Very respectfully yours,

D. S. KIMBALL.

DOUBTS CONCERNING THE PROPRIETY OF SUPPRESSING CHRONIC CUTANEOUS ERUPTIONS, ESPECIALLY THE ITCH, BY OINTMENTS AND CAUTERIZATION, SUGGESTED BY THEORY AND EXPERIENCE TO

FRANZ PUFFER, M. D. OF VIENNA.

(Continued from No. V. of the Examiner.)

Etiology and Diagnosis of Itch.

A glance at the geographical prevalence of the itch must remove every doubt as to its being an endemic disease, the propagation of which so much depends on local and social circumstances that we must concede to it a power of spontaneous development. Thus we see the contagious plague dependent on endemic conditions, and rarely appearing beyond its usual limits. Thus again, we meet with the itch, chiefly amongst the lower grades of society. Food and country, have a powerful influence on the appearance of this disease. We find it of very frequent occurrence in districts, where much sour cheese is eaten, and likewise

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in elevated regions, for instance Switzerland and Tyrol. In flat countries it is infinitely less frequent, and hardly ever met with in moorlands.

One of the principal causes which favor the development and spread of the itch in general, is want of cleanliness, though we do not mean to trace its origin to this. Filth, however, is undoubtedly a great obstacle to the treatment of itch in *private practice.* Where filth and want are present, it is impossible to cure itch. Besides, it is the duty of the physician, for the sake of guarding other persons against contagion, to separate the patients from them, which in that rank of society where the itch is most prevalent, can only be effected by removing them to the hospital.

Many modern dermathologists reject the previous theories of itch-metastases, itch-cachexia, &c. entirely, and rest on the pathological discovery which according to Hebra constitutes the only true characterisic of itch, to wit, the *itch-animalcule ;* acarus exulcerans Linnæi, or according to Raspail, the *sarcoptes hominis.* (The real itch, is therefore called by Hebra *scabies sarcoptica.*)

This discovery of the itch animalcule is pretty ancient, but has occasionally been lost sight of.

An Arabian, Avenzor, makes mention of it. In 1634, an Englishman (Monfet) described these animalcules as the smallest creatures, *generated* on old cheese, wax, and on the human skin.

Bonomo, in 1682, saw some poor women extract little vesicles with the point of a pin from the skin of their children who were afflicted with the itch, which he recognized as small animalcules, and minutely described them in a letter to Redi. In Linnèe's time it was generally acknowledged that the cheese, flour, and itch animalcules, though of a different species, belong to the same family of animals. Both Linnèe and Wichmann, but especially the latter, renewed the interest for these animalcules, and it became universal in France owing to the labors of Raspail.

This established fact, that the itch and the animalcule appear simultaneously, and the latter only then, when there exists true itch, has had a weighty influence on the views respecting the origin of the disease, and its treatment, which according to our opinion has not met with the attention it merits.

First of all we must bear in mind the circumstance that it has repeatedly been an unsuccessful undertaking on the part of very respectable men to discover the insect.*

*This was the fate of Autenrieth, Alibert, Willan, Bateman, Grossmann, Ritter, Stark, Heberden, Becker, Canton, Richter, and lastly of

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We are far from agreeing with Dr. Droste that consequently the acarus is not to be looked upon as a characteristic of itch, because the not finding it may have been owing to some mistake of those who searched.

Thus Charus found the insect after searching for it a long time, after having been shown how to proceed about it by another, and this may have been the case with many other physicians, even Rust. Or the failure may be attributed to the patient. Thus the insect may have been looked for where it did not exist, for instance in pseudo-scabies, eczema, impetiginodes, prurigo, &c. All this goes to prove that for the uninitiated it is extremely difficult to diagnose itch by the characteristic presence of the insect,* and the practical physician would be very excusable in mistaking itch for some other exanthematous disease, such as lichen simplex, lichen urticarius, prurigo formicans, eczema rubrum, eczema impetiginodes, or vulgare, &c. which greatly resemble scabies sarcoptica.†

Taking this into consideration it is very desirable that some other characteristic symptom of the itch should be discovered beside the acarus, which is perhaps sufficient in a strictly scientific aspect.

We believe that the peculiar contagion of itch, disputed by Hebra, ought to be conceded. He denies the existence of that contagion as a characteristic mark of itch: 1, because the disease may occur spontaneously; 2, because it is very difficult to discover when and where the contagion took place; 3, because it

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Biett, who for months employed the best glasses and microscopes and repeated his experiments upwards of eighty times. Sanson and Pillage (see Froriep's notes, vol. xxvi no. 6, 1830, p. 207) and Prof. Nitzsch, of Halle, were no more successful. Previous to Biett, Drs. Gallioth and Chiazugi, of Florence, had in vain endeavored to discover the insect. In spite of the most careful investigation Rayer discovered only lice on the skin of itch patients, when the patients were very dirty. Neumann (see his Pathology) says: After collecting the matter of itch and examining it through the solar microscope, I always discovered the long, saw-shaped infusoria which are seen in every kind of animal fluid; as regards the acari of Mr. Gale, with six feet, a long sting, and a proboscis, I have never seen them except in his plates.

* Kruger Hansen, the ardent advocate of the acarus, regrets that the diagnosis of the itch by the mere eye should be so difficult, and Paul Frank thinks that cutaneous eruptions can only be correctly exhibited to the eye by means of the painter's brush. In modern times we require microscope, lancet, and an uncommon skill to diagnose such diseases.

† According to Biett and partly according to Hebra, lichen simplex, lichen urticarius, prurigo formicans, eczema rubrum, eczema impetiginodes and eczema vulgare, are very similar to scabies sarcoptica.

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would be idle and impracticable to wait for a confirmation of the diagnosis by the contagion spreading to another individual. As regards the first objection we deny that the pathognomonic character of the contagion of itch is at all impaired by the (certainly undeniable) power of spontaneous development inherent in the disease, for this reason, that the spreading of the itch from one individual to another is very rapid, its head-quarters being amongst those classes of society who live in crowded houses and without cleanliness, two circumstances equally favorable to the development of the various forms of psora. It is but seldom, and then accidentally brought into the higher grades of society, and then discovered only when becoming a subject for professional treatment.

At any rate the physician may be guided as correctly by the proof a posteriori, when it does once exist, as by the discovered animalcula and insects. It is not difficult to learn from the patient how the contagion took place; and if we are satisfied that a cause for the supposed contagion had existed, it would not be necessary to enter into any further investigations to confirm the diagnosis, because no other chronic eruption is propagated by actual contact. Newmann says, that a close investigation of the origin of the eruption is a good safeguard against a false diagnosis. Although the first appearance of the itch on the hands, the absence of the eruption on the face,* increased itching in bed, and other negative signs are strong symptoms, yet we rest our diagnosis mainly on two points: 1, the animalcula; and if we should not find these, 2, the character of the contagion.

According to Hebra, all the appearances on the skin together, taken in connection with the simultaneous troublesome itching,† and the whole course of the eruption, which is modified by scratching, are insufficient to the diagnosis of itch.

The same author divides the symptoms into primary and secondary. Amongst the former, he enumerates the itching, the blotches, the vesicles and the pustules; amongst the secondary, the symptoms occasioned by the scratching of the patient. By

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* The itch never invades the face. He whose itching does not become worse in bed, has no itch (Wichmann, etiology of itch).

† According to Biett, the itching of the real itch is accompanied with a pleasurable sensation; in prurigo, on the contrary, the itching is sharp and burning. In eczema rubrum the itching is a kind of general burning; in eczema impetiginodes it is acrid and burning; in ecthyma the itching resembles somewhat a lancinating pain, as is experienced in the furuncle.

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the scratching, says Hebra, the tips of the blotches are excoriated, and little black scabs are formed by the exuded and dried blood. These are converted by the scratching into large excoriations and blotches, which again undergo other changes, growing larger and more numerous, finally infiltrating and causing a thick reddened spot on the skin, with an uneven and ragged surface. If the itch continues longer, all these phenomena are increased, and added to it, we find the purulent decomposition of the isolated blotches which have been mentioned above. This change either occasions as many pustules as there were blotches, or else excoriations and ulcers secreting a pus, which changes by the contact with the air, into green or brown dry scabs. In more intense degrees of the itch, we find nearly the whole body covered with little achorous pustules growing out of the pustules, which make their appearance all over the skin; in that case a complete image of the itch is exhibited by the most varied efflorescences, such as vesicles, psydracic and phlyzacic pustules on the hands, papulæ and the above-mentioned pustules with the scratched little blotches, covered with black-red scurfs, and the green and brown crusts to which those pustules give rise; blotches and ulcers on the extremities, similar blotches on the nates or around the middle portion of the body, which are covered with scales or crusts, lastly achorous pustules which are scattered over the whole body, and the yellowish crusts arising from them.

With regard to the classification into primary and secondary symptoms, (the latter being occasioned by the scratching,) we are struck with an arbitrariness in reference to the latter, which cannot be indifferent to us, as will subsequently be shown. The scratching must necessarily give rise to great changes in the appearance of the diseased skin. The vesicle, the pustule, will burst; the exuding pus (occasionally mixed with blood when the scratching is violent) or the lymph will form brownish, dark-red or green scabs, the scratching may lead to excoriations and ulcers; but the appearance of new pathological formations upon the skin, such as blotches, achorous pustules, &c., cannot reasonably be ascribed solely to the repeated irritation occasioned by the scratching.

In the first place, nobody can pretend to say what appearances would exist, without scratching, since the desire to indulge in this has probably never been withstood by any individual afflicted with the itch. In the second place, we discover no other change in the healthy skin, upon scratching it, than the trace of the nails abrading the epidermis more or less, ac-

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cording as the scratching has been carried on with more or less force.

The point of the nail can extract nothing from the skin *which had not already been formed by the internal morbid process going on in its tissues.*

But if the desire to scratch arise from an itching occasioned by a deep-seated cause, we find in consequence of a long continued rubbing and scratching no trace of an irritation of the skin, as is the case in pruritus gulonum, pruritus vulvæ, and arthriticorum, explethora, &c. If the itching was occasioned by some external cause, such as the bite of a musquito, any body, resisting successfully the temptation to scratch, may convince himself that *without touching the spot* it will result in an infiltrated thickening or elevation of the skin, surrounded by erythema. We find the same results from the bites of other animals. Consequently, we believe, in opposition to Hebra's views, that the manifold efflorescences which strongly characterize the itch, are attributable to a *specific disease of the skin*, and that the scratching occasions merely those unessential changes taking place in the vesicles, pustules, &c., as above described, such as exudation, rupture of the vesicles, desiccation, peeling off of the skin, ecchymosed streaks, &c. If the scratching of itch-patients really formed so essential a part in the development of the eruption, we might, with equal propriety, consider as secondary the first visible eruption on the skin, since the itching and the consequent scratching both precede all other symptoms. They both remain constantly present through all the phases of this disease of the skin, and sometimes hang on to the patient after convalescence and total disappearance of any exanthema. Besides it appears to us that the term *scabies vera* and *spuria*—rejected by Hebra—most appropriately designates the diagnostic difference between this disease and those very similar to it in external appearance.

When, a year ago, I read Hebra's Essay on the Itch, I really thought it would create great sensation amongst homœopathists. To identify the itch with the animalcule appeared to me nothing short of proclaiming the homœopathic cure of itch as a downright impossibility. What could be accomplished by internal remedies alone against an impurity of the skin—caused by an insect? What could the high potencies do against it? But I anticipated many voices amongst the physicians of the old school in opposition to this theory; because to declare the doctrine of metastasis of the itch as a phantasmagory existing in the brains of some doctors, would be upsetting all the time-

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honored views of antagonism between periphery and centre, and *vice versa*, which is evident in all conditions of disease; and would likewise be rejecting numerous facts compiled by the best authorities in medicine, men having unimpeachable testimony in favor of their acute judgment, and extensive experience in hospital and private practice.

In attempting to give due credit to the physiological experiments instituted upon itch-patients, and the consequent conclusions with regard to its treatment, we merely contemplate recommending to our colleagues a more general attention to this important and intricate disease. Though our views and observations are backed by authorities whose names are honored in the history of science, we are met by Hebra and Vezin, by a formidable array of good authorities, which they look upon as better and weightier than ours. We do not pretend to be an umpire between the two parties, but we may say that some individuals brought forward as authorities on the part of our opponents, do not unconditionally agree with Hebra—such as B. P. Frank, in his "*Generalia de impetiginibus:*" *Fatemur interim*, nos morborum, contagio celebrium, qui interna non minus quam superficiem affligunt, qui ex ista recenter licet repercussi, difficiles ac diuturnos viscerum affectus relinquunt, non facile *vivas intelligere causas*, atque *ipsa*, quæ febribus non paucis præsunt, quæ veneream luem, jam sanato cutis ulcere, sine novo fomite per annos continuant, quæ blennorrhœam, quæ post multos a morsu canis rabiosi menses, hydrophobiam inducunt, *contagia* insectorum in his recessitatem ac verisimilitudinem omnino excludunt. Thus, until 1827, the itch was cured in the clinic for physicians at Vienna by the internal and external exhibition of sulphur (the well-known specific) in moderate doses, paying careful attention to cleanliness. Wichmann, the clever and powerful advocate of the theory of animalcula, says, "The resorption of the eggs does after all not appear so unphysiological, since we know that lymphatics and lacteals absorb into the circulation much larger creatures." This hypothetical assumption he attempts to fortify by facts of peregrinations of ascarides in hares, pigs, and sheep. But whether the leading pathologists are entitled to more consideration of their theories in a case, like this, of practical observation, than the results arrived at by such men as Sauvages, Tourtelles, Schœnlein, Autenrieth, &c., through years of experience, we leave to the impartial reader to determine.

[To be continued.]

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A FEW WORDS ON HIGH POTENCIES.

TRANSLATED FROM THE GERMAN,

BY A. C. BECKER, M.D.*

Dr. Gross in his journal presents us with an article, very modestly headed as follows: "My last experience in Homœopathic Practice."

This did not attract our attention, because the same author has frequently, and under various circumstances, given us his "*latest*" experience.

So long as Dr. G., in his introduction to said article, confined himself to a pointed anathema against all low dilutions, and compared their effects to a deluge of rain, we suspected nothing out of the way; but when we found Gross imperatively insist-

* The following review of Dr. Gross's cases is taken from the last number of the Austrian Journal of Homœopathy. We publish it in the Examiner, because we wish our readers to be acquainted with the views and opinions of all the leading men of our school. The cases alluded to in the above review, are contained in the first and second number of the Examiner, Vol. IV. If Dr. Gross's cases were intended as specimen cases, he might have undoubtedly chosen cases more to the point. His cases, however, are a matter of very small importance as regards the validity of the high potencies. I have always found, without a single exception, that those who oppose the high potencies do so from *mere feeling*, not from experience. I use the high potencies every day, and I am more and more convinced that they very often effect cures where the lower potencies fail. I will record my last experience on that subject. A few days ago, a lady of about forty-five, complained to me of the following symptoms: Had been costive from her childhood; for the last six months, had an ineffectual urging to stool every day after breakfast, which was excessively painful, with cuttings in the bowels as in dysentery; the urging returned several times through the day, the pain being frequently so excruciating that she came near fainting; towards evening she succeeded in pressing out one or two small and stony clots, the bearing down being frequently so excessive that flashes of fire started out of her eyes. When she felt the urging, the rectum felt entirely powerless. I gave her alumina 200, two pellets, which she took at night. Next morning, for the first time in many months, she had a natural, easy, copious, and entirely painless stool; the pain had disappeared entirely. Three days after this, the symptoms returned somewhat. Took alumina 30, without the least effect. Had her pain again for three days. Took alumina 200, as before. The pain disappeared again immediately, and the stools have been perfectly natural, except rather hard, until this day. If the medicine had nothing to do with these changes, it seems to me, we may as well give up attributing any effect to our remedies.—Hempel.

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ing, that "in future high potencies are to be employed exclusively, or, to say the least, in the majority of cases," which appears to us like making this maxim a fundamental law in homœopathic treatment, we came to the conclusion that said article transcends the limits of a newspaper paragraph, and becomes a dogma, and that the celebrated practitioner at Jutterbock assumes the language of a *Reformer!* As such he must submit to a criticism of his dictum until it shall have been ascertained how much there is of truth in it, *if any!*

We cannot concede to Dr. Gross a patent as inventor, because the theory of high potencies is nothing new. Any one familiar with homœopathic literature will remember that such numbers as 60, 100, even 1500 have frequently been suggested, but never been noticed hitherto by any practitioner. How could the discovery of any truth, admitted into practice have been followed by such utter neglect, if it had not been pretty generally admitted, that thirty attenuations afford ample room and time for the full development of the medicinal powers of a drug? It is not likely that any latent virtues remaining undeveloped by thirty attenuations will be developed by the thirty-first!

Dr. Gross, however, is of a different opinion. He presents us with a ladder to the sky; a scale of myriads, by which, he contends, the true curative powers of medicines can only be developed. His standard numbers are 200, 400, 800, 900; and he consents to lower triturations merely by way of exception.

There is one point Dr. G. has omitted to make us acquainted with, and that is whether he has reached the highest mark of dilution, for which the respected reformer may have to pay very dearly. How easily somebody else may assume that the potencies of Dr. Gross are far too powerful; and who may with the same propriety, and for the same reasons, maintain, that the truly curative powers of drugs commence with the 5 to 10,000th attenuation.* Such an observer would be no less at a loss than Gross has been to give us "cases" in support of his theory; and that *fide optimar*, Zimmermann says, "Experience and facts have always had to bear the sins of medical vagaries."

Two highly respectable men—Stapf and Rummel, who have materially contributed towards the growth of Homœopathy, whose contributions for nearly thirty years have been sound and valuable, have imitated the experiments of Gross, and, as they assure us, have found them verified by their results.

* In fact, Dr. Tietzer speaks of the 2000th of arsenic, in a late number of the Archiv.

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But authorities in science are no longer respected. Whoever advances a new theory now-a-days, has got to prove it. Dr. Gross knowing this, *attempts* to do so in two ways, theoretically and practically. With reference to the former, he alludes to Hahnemann's having nearly killed a child with the whooping cough by giving it drosera 60, and his being obliged to return to the 30th attenuation. "If drosera 60 had so powerful an effect as nearly to destroy the life of a child, it follows clearly that the power of the drug had been materially increased by the process of trituration—an obvious proof, that the scale of potencies had to be descended, instead of ascended, for the purpose of reaching that point at which the power of drosera was mild enough to be curative without causing any secondary symptoms."

And on another page he continues, "Only by continued trituration (potenzirung) the latent power is developed, and this ultimately becomes so powerful and uncontrollable, that it aggravates instead of curing. But on further continuing the trituration, we reach a point where the fully developed virtue of the remedy acts as mildly and effectually as can be expected from any truly curative agent."

We must confess that we are not shrewd enough to arrive at the same conclusion, and must look upon G.'s reasoning as a beautifully invented hypothesis, *without any scientific foundation.* According to Gross's views, the process of dynamization* is analogous to the process of spiritual fermentation. He considers the drug devoid of spiritual power (juice of the grape) in its natural state. It has to undergo the work of fermentation, during which it is inadequate for use, and even hurtful (in the same way as the juice of the grape), to become a purified liquid, endowed with spiritual powers.

To justify such an assertion Gross ought to have tried every individual drug in every degree of power; then, and *then only*, would it have been possible for him to state positively which number of every medicine contains a great and uncurbed power, exaggerating instead of curing, and which number of every medicine contains the requisite power, sufficiently controlled, to answer all expectations. But since Gross has not tried the whole scale in every attenuation, because the thing is almost impossible, we repeat that *the theory of high potencies is an arbitrary doctrine, not founded on science.* It is also arbitrary to assert, that one remedy may be attenuated to 200, another to 400, a third to

* Venia sit verbo.

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800. Gross's hypothesis is contradicted and upset by himself in sometimes administering the same remedy in the 200th, then again in the 800th, then again in the 400th, and declaring its efficacy, which would be utterly impossible, if its curative powers could be developed only in a certain attenuation.

But if Dr. Gross, disregarding theories, should insist on having proved his principle of high potencies satisfactorily by the following "cases," we shall dispute that fact, if those "cases" do not clearly and unanswerably prove:

1. That in every case the diagnosis was correct and consistent with the present standard of medical science.

2. That the professed cure had really been accomplished.

3. That the cure was owing to the action of the high potencies. "Aliud est curare, aliud sanare. Multi sanantur, non curati."

4. And *especially* that the same cure could not have been accomplished by a lower attenuation of the same remedy better or at least as well. We say *especially;* for every body will easily perceive that if No. 3 and No. 900 should produce one and the same effect, it would not be a matter of indifference if one or the other was given. Whoever is not struck with this at first sight is herewith requested to attenuate a single drug *lege artis* till 900. He will soon convince himself, that much time, heavy expenses, and a very large space, are required to furnish a homœopathic druggist's shop with a complete assortment of high potencies.

The proposal to buy the attenuations of Mr. Jenicken or Mr. X. is woefully inconsistent with the powerful efforts that have been made for 35 years to convince us that dispensing our own medicines is an essential part in homœopathic practice.

As a matter of course, however, all difficulties, if ever so great, amount to nothing as soon as the *superiority* of the highpotencies has been *proved.*

The high potencies cannot claim *superior* efficacy compared with those chiefly in use now, unless they render assistance where the lower have proved inefficient.

But to prove their superiority a low dilution must be given in a certain chronic case, time must be given for its action, this must fail, and a subsequent exhibition of the same drug in a high attenuation must effect a real and lasting cure.

On proceeding to a critical examination of the several cases we do so without any preconceived impression for or against the theory of Gross. We only wish to examine analytically whether

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the cases given do really prove what they were intended to prove, and firmly adhere to Martial's maxim: parcere personis, dicere de vitiis.

Case 1.

Dr. G. relates a case of staggers in a horse where coculus $\frac{1}{200}$ put a stop to the attacks.

Those forms of disease, which are free from pyrexia, and occur in paroxysms, are not calculated to substantiate any principle of medicine, or the virtues of any drug; and staggers of horses least of all. Dr. Veith, a veterinary surgeon, says: "Such attacks cease for a long time, which accounts for horses with the disease living many years, and being sold meantime over and over again." There can be but fewpractical men in the profession who have not met with similar delusions.

G. relates in the same article a case of chorea which he thought radically cured by causticum $\frac{1}{30}$ till some time after he discovered that he had been mistaken. And if he now considers the same child more reliably cured by caust. $\frac{1}{400}$, we wish him joy, but are not certain how long it will last.

Case 2.

Gross says, "I had a common diarrhœa from taking cold, for which dulcamara was the similium. I found the 30th attenuation of the remedy in this case, as in others previously, ineffectual, and had always been obliged to resort to the 1st. In the present instance I took it into my head *to smell* of the $\frac{1}{200}$ and the diarrhœa was instantly arrested.

According to our opinion, this case is more likely to contradict than to support the theory of high potencies. G. confesses that dulc. 1 relieved him after the 30th had failed. How could this be possible if "the power of the drug increases as you ascend in the scale of the attenuations?"

If Dr. G. means to prove by the above case, that dulc. $\frac{1}{200}$ really possesses curative powers, he furnishes a fact without any practical interest to the physician, who learns from him at the same time that dulc. 1, cured him as readily and surely. But if G. intended to prove, that dulc. does not reach its gently curative power, until attenuated 200 times, the 30th ought, according to his theory, to have caused a powerful exacerbation, of which no mention is made.

But what does he mean by being "obliged to resort" to the 1st attenuation?

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Is it easier to the busy practitioner to dilute a medicine 200 times, than to administer the 1st attenuation?

Is the latter, because customary and more natural, so objectionable to Dr. G. that he reluctantly resorts to it? We confess to find it by far more convenient and applicable, as soon as we are convinced of its equal merits.

Case 3.

My son, 13 years old, had his toes frost-bitten. In the evening I made him smell nux. vom. $\frac{4}{200}$ and the next day his feet were well.

Dr. G. tells us that his practice had been doubled, since he became aware of the blissful effects of the high potencies. But why he should, amongst his extensive selection of cases, have chosen such an ephemeral occurrence as a frost-bitten toe, is incomprehensible to us.

How frequently such like cures are mere delusions, may be illustrated by the following case.

My daughter, 10 years old, had her left hand frost-bitten last winter. Some evenings afterwards there was in it great pain and considerable swelling. But as on my return home I found the child asleep, I prepared for the next morning a dose of petroleum $\frac{1}{6}$; a remedy which had frequently relieved her previously in similar cases. However, when morning came, the difficulty had altogether disappeared, without leaving a trace behind, and of course the child received no medicine.

Case 4.

A felon, likewise under my roof, accompanied by most painful inflammation, suppurated by the next morning, after the patient had only smelt hepar sulph. calc. $\frac{1}{200}$ which was followed by immediate recovery.

Of this whole case, which is intended to prove a theory of great importance, Gross tells us nothing more than the unmeaning pathological name, and the drug administered. We almost suspect that he meant to discover how far he might impose on the credulity of his readers. How could he otherwise have cited such cases—he who is incessantly appealing to the master? Has not Hahnemann repeatedly and correctly explained the nominal pathology of cancer? Has he not stigmatized generalizing as the grave of science?

G. speaks of a "felon in my house," without mentioning sex, age, individual constitution, or cause. Is it all alike to Dr. G.

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whether the patient was a scrofulous child or a gouty old man, or a hysterical woman of an exceedingly nervous temperament, or a syphilitic debauchee? whether it was caused by local injury or previous taking cold?

Could all such cases be met by hepar, and hepar only? G. says nothing about the symptoms and appearance of the diseased finger, (Nosography,) and leaves us in total ignorance about the substratum of the disease. Was it situated in the integument, or in the cellular tissue, or in the tendinous sheaths? or in the periosteum? We know not. This can only be determined by the violence and variety of the symptoms, and on these chiefly depends the result. We ask again: Is hepar, and hepar only, indicated in all these cases? Finally, G. is silent on the day and stage of the inflammation, when the hepar was held to the nostrils, and leaves us ignorant whether the suppuration took place on the second day, and really in consequence of the smelling, or on the seventh, in the course of nature. Are we unjust in saying that such cases prove *less than nothing?*

Case 5.

An exceedingly painful suffering in the right ancle of a lady, which had been lasting six months, would not yield to any remedy. At last I ordered her to smell phosphorus $\frac{1}{200}$. For the first week afterwards she experienced no benefit, on the contrary, rather an aggravation. During the second she felt somewhat better, and after the fourth week she was able to walk well on even ground.

After having, from the previous cases, become accustomed to almost immediate curative effects of high potencies, we were not a little astonished that in this present case Gross ascribes with confidence the improvement of the pain in the ancle to the smelling of phosph. $\frac{1}{200}$ four weeks before. If Dr. G. is really as convinced of this *post hoc, ergo propter hoc,* as of his own existence, we have nothing to say. Whoever can take it as a matter of faith is welcome to do so. But we cannot ever admit such cases in testimony of the efficacy of high potencies. Common sense is outraged by the assumption that a smell conveyed to our senses to-day, could possibly display its medicinal powers weeks hence, although meantime we shall have been exposed to a variety of smells, the direct antidotes to the former. Gross ought to have added, whether there was no change of season at the time of the recovery.

Case 6.

A girl of 13, delicate, who had been troubled several days with

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tooth, head, and face-ache, stitches in the ear, and profuse flow of saliva, smelt Chamomilla $\frac{1}{200}$, which was followed by the first quiet night, and no more pain on the following day.

Instead of criticising the above case we request Dr. G. to take up any repertory, and look for the heading of "Chamomilla," or the article on "Tooth-ache" and "Face-ache." He will soon convince himself, that ever since the introduction of Homœopathy, these complaints have been cured by chamomilla in *every attenuation*, as rapidly, and even more rapidly than in his case. We therefore did not stand in need of the wonderful discovery of high potencies to assist us in charming away tooth-ache in one night by chamomilla.

Case 7.

A lady had a very exhausting cough, which troubled her chiefly at night, for which pulsatilla was indicated. It would not yield to $\frac{1}{3}$ of that drug, but one dose of the $\frac{1}{200}$ at once removed the cough.

This case carries with it at first sight the appearance of good testimony, because the high potency was not administered till it had been shown that the lower dilution did no good. But on investigating the case a little closer, we think Dr. G. ought in support of this testimony have informed us: 1. Whether in this case, as in case 5, he had waited three weeks for the effect of his prescription of pulsatilla $\frac{1}{3}$. 2. Whether between the administration of pulsatilla $\frac{1}{200}$ and the final recovery, three more weeks had not elapsed. The reader might then have been at liberty to judge for himself whether the credit of effecting the cure of the cough was due to puls. $\frac{1}{3}$ or puls. $\frac{1}{200}$, or the six weeks time. That pulsatilla was really the homœopathic remedy in this case Dr. G. has omitted to prove. The mere assertion "a cough for which puls. was indicated," would satisfy but few physicians who think for themselves.

According to our opinion, reports of successful cures are valueless, unless the prominent characteristics of the remedy correspond to the character of the disease, and the individuality of the patient, and unless this is especially dwelt upon in the report. But if the choice of the remedy cannot pragmatically be proved by the materia medica pura, the medical treatment assumes the character of empiricism, is no longer rational, and does not deserve to be chronicled.

Why is it that the practical cases related in the first volumes of the Archiv have gained so many proselytes to homœopathy? Because conceived in the spirit of our principle, they were con-

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vincing and instructive. Latterly this very important *punctum saliens* has been lost sight of. The consequence is a great accumulation of materials without value for the present, without value towards the future foundation of special therapeutics.

Case 8.

A child six months old, in the country had a pediculated polypus at the external angle of the right eye, of the size of a small pea, which was daily increasing in size. I gave the child Lycopod. $\frac{1}{200}$ and from that day the polypus ceased growing; in a week it had gradually diminished, and in a fortnight totally disappeared.

This case, we confess, would in itself have been sufficient to throw us for ever into raptures with the theory of high potencies, if we could give it full credit, on the meagre testimony of the above few lines. But the cure of polypus of such a size, in such a place, in so short a time, is an occurence so rare and so important, that the case deserves to be subjected to a more critical analysis.

A pediculated polypus at the angle of the eye, is in itself a rare occurrence in surgery. Our oldest surgeons and oculists hardly remember to have seen such a one. Professor Jungken in Berlin, saw one like it once, and owing to its rarity, describes it very fully. In that case the bulbus was completely covered upwards and downwards, and pushed backwards, deep into the orbit. Similar appearances, or at least an eversion of the eyelids, with its consequences, ought to have been amongst the symptoms going to substantiate Dr. G's polypus. But since he mentions nothing of this kind, we take it for granted, that the eye had no further appearance of disease. But how is it possible, that a foreign body like the pedical of a polypus, could have remained for some time between the conjunctiva of the bulbus and the conjunctiva palpebrarum without causing a chronic inflammation and increased mucous secretion?

As to the treatment, Dr. G. does not give us the reasons that guided him in the choice of the remedy. What has polypus in the eye in common with lycopodium? We have very attentively read the article on lycopodium in the Materia Medica Pura, without being able to discover the slightest indication for the formation of polypi.

But since, in spite of the doubtful diagnosis, and though we are at a loss for the grounds on which the treatment was based, we are not at liberty to dispute the truth of the fact, we cannot escape from this labyrinth of contradictions in any other

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way, than by assuming that the supposed polypus was nothing but a degenerated Meibomian gland, situated on the edge of the eyelid. Such swellings frequently have a very deceptive resemblance to polypi, and Jungken says of them that they sometimes reach the size of a small pea, last a good while, and then commence totally to disappear.

We have ourselves observed a similar case during the last year. A scrofulous child, 6 years old, had a swelled Meibomian gland on the edge of the upper eyelid with a complete pedicle, which gradually vanished by the use of hepar sulph.

Should our view of the case appear rash, and Dr. G. be convinced of the correctness of his diagnosis, we request him to gainsay our doubts, because in the present state of the case, we look upon it as no testimony at all.

Case 9.

A child six months old had a hydrocele, which I cured in four weeks by one dose of aurum $\frac{1}{200}$.

All our remarks on case 4, equally apply to the present case, with a few modifications. We have to add, however, that, since Dr. G. says nothing of the origin or duration of the disease, we are at liberty to take it for granted, that he refers to a common hydrocele congenita. Schuger, who was the first to institute instructive researches into the hydrocele of children says, "The congenital hydrocele of children occurs much oftener than has generally been assumed, but it has frequently been overlooked, because the usually horizontal position of the infant rarely admits of a considerable and permanent swelling, and because *nature frequently removes the evil*, before it has been well observed."

Chelius says, "It is by no means uncommon to see congenital hydrocele cured by the vis medicatrix naturæ. Dentition and febrile excitements of every kind, have a powerful agency in the absorption of hydrocele."

Brenner tried several remedies with one of his children, nine months old, who had a hydrocele congenita, but all in vain. Ultimately he vaccinated the infant. A considerable fever then made its appearance, and the hydrocele disappeared.

If so many natural and artificial agencies can contribute towards the removal of a complaint, we certainly have good reason to demand that a physician who pretends to have cured such a complaint, should give us at least the negative assurance, that it has been done without the assistance of any of these agencies.

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Case 10.

A young merchant had been afflicted some time with a dry, choking cough, accompanied with gagging, and especially depriving him of his sleep at night. I gave him in the evening cupr. met. $_{2}\frac{1}{0\,0}$; the following night the cought was worse than ever, but in the morning it was gone, and never returned.

We know from our own experience, that a cough of that kind is cured very readily by cupr. met., although we have never given the $_{2}\frac{1}{0}{}_{0}$, but always the $\frac{1}{6}$ of that remedy. Consequently we had the advantage over him by 194 attenuations in expense, trouble, and waste of time. Besides which we have saved our patients the pains of such exacerbations as that related above. And what we have noticed in our patients, had been observed by other physicians in theirs, as is amply proved by the repertories.

We have purposely criticized and refuted the first ten cases in the order we found them, and without any selection.—All we have said on them applies more or less to the remaining 30. We therefore do not hesitate to declare, that not a single one of the 40 cases related, bears either of the four tests we have suggested, and we consequently reject them as testimony in favor of high dilutions.

And should any our readers object to take our word for it, we are ready to refute every one of the remaining 30 cases as fully and as *κατ' ἄνθρωπον*, as the preceding 10.

But some will say, all these 40 cases are taken from the infancy of this most blessed discovery! The subsequent reports may be more mature and better, and more extensive testimony! This argument induces us to follow Dr. G. a few steps in his second pilgrimage, for the purpose of either finding our opinion confirmed, or to take it back, if we should find ourselves in error

[To be continued.]

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THUJA OCCIDENTALIS.

AN ESSAY.

BY CARL MAYRHOFER, M. D.

(Continued from No. V. of Examiner.)

F.

Jacob Landesmann, chief physician to the battalion of Grenadiers, under Major Blankardt, made two experiments upon himself with Thuja.

First proving with dilutions.

The unquestionable effects which L. had experienced from a few drops of the first dilution of Bryonia, induced him to commence the proving of Thuja with the smallest doses of the higher potencies, and to descend by gentle degrees to the lower.

After he had discontinued taking Bryonia for three weeks, and had felt free from any drug-symptoms for two, he took, from the 4th to the 20th of Sept. 1844, regularly every morning one hour before a milk breakfast, three globules moistened with the 27th dilution of Thuja, (1 : 100 prepared by himself five years before).

On the 4th and 5th of Sept., L. remarked no change in his sensations.

On the 6th, in the forenoon, he observed a *drawing tearing* in the right arm, lasting several hours.

On the 7th, he perceived the same sensation.

On the 8th, drawing, sticking pains in the right index and middle fingers.

On the 9th again, drawing tearing in the right arm, in the morning; later, at about half past ten, debility and lameness in the right fore-arm, and strong trembling of the right hand, in which the veins swelled without any apparent cause. This appearance lasted half an hour, and disappeared while writing.

On the 10th, *violent itching on different parts of the skin*, particularly on the breast, with a sensation as if the skin at those spots was pierced *with many very fine needles*, which irresistibly obliged him to scratch. On the evening of the same day, there came on, without cause, a heavy cold preceded by dullness of the head and frequent sneezing.

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On the 11th, at 10 in the morning, a sticking pain in the ring-finger of the left hand; towards noon, *stinging itching* on the breast again, and on both sides of the neck, and at 9 in the evening, drawing pains in the left shin-bone.

On the 12th, a slight pain was observed in the right side of the pharynx, extending to the ear, somewhat aggravated by swallowing.

On the 13th, the morning pain in the neck, had entirely disappeared, but returned in the afternoon, with feeling of dryness and increased thirst, and wholly vanished again in the evening.

The remaining days presented no new symptoms. It is particularly to be remarked, however, that the *catarrh* was troublesome through the whole of this proving, and had *this peculiarity*, that it often completely disappeared for hours together, and then suddenly returned without cause, with renewed severity, and with much sneezing.

From the 20th to the 28th, L. took every morning six globules moistened with the sixth dilution, which had no other effect than that they seemed to sustain the still continuing catarrh.

From the 29th Sept. to the 3d Oct., L. took again the 27th dilution, and five drops besides every morning, but without effect.

On the 4th, 5th and 6th, he took every morning five, and from the 7th to the 17th, ten drops of the sixth dilution. Whereupon, besides the still continuing catarrh, the following symptoms appeared:

On the 5th, in the afternoon, *cutting pains* in the *vesica* for some minutes.

On the 6th, in the morning, sticking, cutting pains in the left side of the neck, as far as the left ear, which soon disappeared again.

On the 7th, in the afternoon, drawing pain in the left middle finger.

On the 8th, repeated drawings in the left great toe, and at night *lascivious dreams with a pollution.*

From the 9th to the 12th, except the constant catarrh, no symptoms.

On the 13th, dryness in the throat; soreness of the breast with aggravated catarrh, and in the night *confused lascivious dreams.*

On the 14th, in the morning and at noon, a feeling of stoppage in the left ear, with diminished power of hearing, each time lasting several minutes.

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On the 15th, in the morning, distinct, violent stitches from the anus into the region of the left iliac bone.

On the 16th, at various times, drawings in the left little finger.

From the 18th to the 22d Oct., L. took, every morning, fifteen, and from the 22d to the 29th, thirty drops of the first dilution. On the 18th, the catarrh, which had remitted, became worse with frequent sneezing. Afterward on the same day in the afternoon, a *sharp lancinating* pain in the left frontal eminence, and soon after, sharp tearings in the inside of the right ankle.

On the 19th, were perceived at several times, tearings in the little finger of the right hand, and in the evening dullness of the head in the forehead.

On the 20th, frequent *quiverings* of the *lower lid of the left eye.*

On the 21st again, frequent quiverings of the same *eye lid;* further, *drawing* in the little finger of the right hand, and restless sleep with *lascivious dreams.*

The following days passed without symptoms. But on the 26th, frequent quiverings came on in the afternoon and evening, *pulse-like jerks in the muscles* of the right arm, especially in the deltoid. L. was, also, the whole day, causelessly excited and inclined to be angry, contrary to all his previous habits.

On the 28th, at about half past ten in the forenoon, while walking, he was attacked with such deadly hunger, that he came near fainting, and was obliged, at a very unwonted time, to eat something in a neighboring tavern. This symptom made the more impression on him as it was repeated in the evening of the same and of the following day. He had likewise in the right nostril, a feeling of soreness or ulceration, which was aggravated by pressure upon the ala, but disappeared on the following day.

On the 29th, L. took forty drops of the first dilution, but was prevented by circumstances from pursuing the experiment from that day. No further symptoms developed themselves which could be attributed to the drug. The catarrh lasted until the middle of December, and the prover has much less hesitation to ascribe it to the power of the drug because a catarrh with him never had lasted so long before.

Second proving with the Tincture.

On the 1st. Feb., L. began a new experiment with the tincture of Thuja, of which he took on the first day ten drops and in-

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creased the dose daily by five drops, so that on the 15th of the month, he had reached eighty, and had taken in the whole 675 drops.

Not the slightest change in his feelings followed any dose of the tincture.* From this circumstance, the prover concluded that his susceptibility to the remedy was by this time exhausted and in the conviction that continuing to take it in increasing doses would produce conditional symptoms, depending more upon the quantity than the quality of the drug, he discontinued the proving in order that he might no longer defer the more grateful result of an experiment with a remedy more accordant with his constitution.

G.

Dr. and Prof. Liedbeck, from Upsala, aged 42, of a sanguineo-bilious temperament and narrow build, often suffering from catarrhs and hemorrhoids, made an experiment with Thuja during his residence in Vienna.

He took, at about five o'clock in the afternoon of the 14th Sept., 1844, a teaspoonful of the undiluted tincture. Thereafter, eructations with the taste of the remedy and, an hour later, transient pain in the forehead and in the left side of the face, a sort of twitching.

On the 15th, after having taken 60 drops in the morning; eructations tasting of the drug, then a repeated transitory *stitch* in the left frontal eminence, and a sensation of dryness in the mouth—after another sixty drops taken the same afternoon, *a gloomy, melancholy state of mind* came on, which was still apparent on waking next morning.

On the 16th, seventy drops; followed by eructations, strong aversion to meat, which had already been perceived on the preceding day, difficult swallowing, without any apparent cause, in the throat, stitches in both sides of the thorax under the mammæ, both during respiration and when not respiring. The melancholy frame of mind continued. These symptoms disappeared in the course of the following day, excepting the stitches in the thorax,

* We can render no satisfactory account whatever, why it is, nor under what conditions it happens, that in certain cases attenuations produce more powerful effects upon the organism than the concentrated drug, and in certain other cases, precisely the reverse occurs; and so long as this veil is not lifted, so long will the contest about the superiority of the high on the low potencies remain undecided.

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which often returned and did not seem to be connected with the respiration.

On the 25th, L. took 140 drops of the tincture of Thuja. Eructations followed, and a feeling as though perspiration was about to break out.

On the 26th, the same symptoms followed a like dose. It is to be observed, that the prover thinks that he passed *more urine* during the experiment than at other times.

The departure of our northern brother in the faith unfortunately prevented the further prosecution of the experiment.

H.

Dr. Maschauer instituted two experiments upon himself with the Thuja.

First proving with the Tincture. M. began the proving with ten drops of the tincture taken early, fasting, on the 21st September, 1844. He perceived no effects but an unpleasant taste.

On the 22d and 23d, each day ten drops; followed in the afternoon of the first day by rumbling in the abdomen with emission of flatulence, *copious limpid urine* and constipation? on the second day, scraping in the throat and inclination to cough. In the afternoon, the uvula seemed to be lengthened, and the tonsils were vividly reddened, but the swallowing was not worse.

On the 24th and 25th, thirty drops; on the first day dryness of the palate with inclination to cough, sidelong stitch in the lower half of the left breast; in the evening aching in the forehead with failure of the sight—at night *frequent urination.* On the following day, continued scraping in the throat with frequent cough, the headache and increased urination also persisted, and were accompanied by a *stich* in the left *testicle.*

On the 26th, 40 drops. The scraping in the throat much less; at noon, a double stich in the breast; want of appetite with great thirst and dryness of the mouth; at night *copious urine, with itchings in the urethra.*

On the 27th, when nothing had been taken, restless sleep, interrupted by straining cough; the urine continued increased.

On the 28th, M. took 50 drops, and discontinued the dose for two days. Effects; nauseous taste; eructations with smell of Thuja; frequent hawking with the sensation as if the throat were sore, continuing the whole three days. In the evening, headache in the vertex, remaining until midnight; *itchings in the urethra when urinating;* restless nights.

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On the 2d and 3d October, M. took on each day 60 drops on an empty stomach. On the first day frequent hawking with cough; in the afternoon stitches in the lower part of the left breast and debility, with feeling as if beaten in the limbs. On the second day, soon after taking the dose: dryness of the tongue; throughout the day much thirst and *itching in the anus;* in the evening considerable headache which lasted until midnight; constipation. On the third day, *itching in the anus* passing into a severe *burning* after a hard evacuation; *scraping in the throat* compelling him to cough, accompanied by *itchings in the urethra.* During the whole three days frequent and copious urine, especially at night.

On the 4th and 5th, M. rested. The itching in the anus appeared at times in both days, and the evacuations ceased.

On 6th, 70 drops. The itching in the anus and the hawking and cough became again worse; the latter with oppression of the chest, which seemed somewhat to embarrass the breathing; also, copious urine, hard stool, and restless sleep.

On the 7th and 8th, 80 drops each day. On the evening of the first day, a repeated, violent stitch in the left side of the chest; on both days, frequent raising of mucus with cough and reddened tonsils without pain; disagreeable *itchings in the urethra and anus.*

On the 9th, after taking 100 drops, lasting, pressing headache in the forehead with *burning in the eyes,* which were pained by the light. Continuance of the *itching in the anus and the redness of the tonsils; copious urine,* failure of an evacuation, (M. was accustomed to have a regular passage every day in the morning,) and a restless night. On the three following days, he took no medicine, and the above symptoms, except *occasionally the itching in the anus,* disappeared.

On the 13th, M. took again 100 drops. In the afternoon, *itching through the whole urethra during urination,* and headache on awaking after a restless night.

On the 14th, 120 drops. The headache continued all day. In the afternoon, a violent stitch in the left side of the chest, increased by inspiration. Afterward, a hard evacuation with subsequent *burning in the anus;* the *urine* was copious, rest good.

On the 15th, 140 drops. Two hours after, a violent evacuation with bellyache and *burning in the anus;* in the evening, headache in the forehead; at night, another evacuation and rumbling in the abdomen; also, general debility and *copious urine, with itchings in the urethra.*

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On the 16th, 140 drops. Shifting of flatulence with constipation; scrapings in the throat with cough; in the evening, headache followed by a restless night. During the three following days, no medicine being taken, the evacuations became again regular, but the *urine* remained *increased*, and the sleep was restless.

On the 20th, after taking 160 drops, no evacuation, but a strong urging towards it, with *itching in the anus* and *into the urethra; the urine still copious;* in the evening, headache, which lasted until about midnight; after that, quiet sleep.

After another 160 drops, on the 21st, (taken fasting and diluted with water, as was always done); swelling in the region of the stomach, diminished by emissions of flatulence; in the afternoon, a hard stool and *itching during urination;* in the evening, a return of the headache. On the two following days, no dose was taken and no symptoms were perceived.

On the 24th, 180 drops were followed by these symptoms: uneasiness in the region of the stomach with eructations of the drug; scrapings in the throat, with frequent cough; in the afternoon, headache with *burning in the right eye*, which disappeared on repeatedly washing it with cold water; *copious urine*, especially at night.

On the 25th, M. closed his proving of the Tincture, with 200 drops. After two hours, a sudden debility, with feeling as if beaten, with pain in the calves of the legs; then, an internal chill in the whole body, with dry and hot skin, which compelled him to lie down. He could not, however, keep warm in bed, and the debility increased to such a degree that he could with difficulty move his limbs. At about ten o'clock in the evening this chill first began to disappear, merging in a dry and burning heat, and towards morning, *a sweat broke out over the whole body.* He had no appetite, much thirst, passed no urine during the whole day, and had during the access of heat a full, quick pulse and an intolerable headache. On the morning of the following day, he passed a small quantity of dark-red urine; the sweat continued until noon, and the prover could not leave his bed on account of his extreme weakness. A chill came on again in the evening, followed by a sleepless night.

On the 27th, the debility continued; he had no appetite, his tongue was furred, and he urinated copiously.

On the 28th, for the first time, M. felt better, but could not bring himself to continue taking the tincture of Thuja; for the simple smell of the drug disgusted and horrified him.

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On the 29th and 30th, *the itching in the anus* was again perceived and the *copious urine* persisted.

On the 8th Nov., the prover first considered the action of the Thuja to be exhausted as all the vital functions were then favorably re-instated.

Second proving with the first three potencies (10: 90.)

40 days after the last dose of 200 drops M. began his second proving.

On the 5th Dec., he took ten drops of the 3d dilution and increased the dose daily by ten drops until the 15th of the month, without noting the least variation in his ordinary sensations.

From the 16th to the 23d, M. tried daily ten drops, morning and evening, of the second dilution—with a similar want of result. From the 24th to the 27th he took twice a day ten drops of the first dilution. After doing this three days in succession, the well known *itching in the anus* developed itself and was especially troublesome in the forenoon.

On the 28th, after twice taking fifteen drops of the same dilution, a slight *stitch in the urethra, increased urinating* at night, and dampness at *the anus.*

On the 30th, M. took in the morning 30, and in the evening 15 drops of Thuja of the first dilution afterwards; uneasiness in the stomach, eructations of wind, bitter taste; in the evening, violent headache, lasting until ten o'clock; *copious, limpid urine, itching and sweat on the anus.*

On the 2d Jan., 1845, he observed, after 30 drops, from time to time, *stitches in the urethra with urgent desire to urinate,* loss of appetite, vertigo, and headache in the forehead in the evening.

From the 3d to the 10th, M. took daily 30 drops of the first dilution in the morning, and 20 in the evening. The constant symptoms were: *urgency to urinate* with stitches in the *uretha* and *itchings in the anus.*

This very promising experiment was unfortunately broken off in consequence of the death of a person nearly connected with the zealous prover.

I.

I (Dr. Mayrhofer) proved the *arbor vitæ* upon myself and on my wife.

On myself I instituted four experiments.

First proving, with the first two dilutions. I began the prov-

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ing of Thuja with the second dilution, making no change in my manner of life. On the 8th September, 1844, at 3 o'clock in the afternoon, I took 50 drops without experiencing the slightest change in my sensations ; 100 drops taken early, fasting, on the 9th, produced no further effect nor did 150 more taken in the evening of the same day, nor 200 drops taken on the 10th.

I tried then, on the 11th at 6 o'clock in the morning 100, and in the evening 200 drops of the first dilution, without observing any morbid phenomena.

Second proving with the Tincture in increasing doses.

The want of susceptibility of my tough system to the power of the dilutions determined me to try the undiluted tincture, of which, on the 12th of September, 1844, I took 50 drops morningand evening each, but waited yet in vain for any signs of life in Thuja.

On the 13th, after 100 drops taken early and fasting, I first perceived, during the day: *swelling of the hemorrhoidal veins with tenesmus, itching, and burning in the anus.* In the evening on repeating the 100 drops, I had two slight passages, ending with discharge of mucus, itching, and burning.

On the 14th, in the morning 100, and in the evening 200 drops. The *itching and burning in the anus* increased, and were especially troublesome in the evening after a stool.—During the night, *more frequent and copious urine* than formerly, and immediately after urinating I felt a renewed inclination, whereby a few drops were discharged without pain.

On the 15th, 200 drops taken both morning and evening produced no new symptoms.

On the 16th, at 6 in the morning, 300 drops. Immediately afterwards, nauseous taste and confluence of much saliva in the mouth. After a quarter of an hour, dull headache over the whole frontal region (lasting an hour). At six in the evening, a stool, with subsequent *burning in the anus*, and shortly after a reiterated discharge of mucus, attended with *very violent stitches in the rectum* in the direction of a line from the anus to the sacrum. As the stitches ceased, the itching and burning returned, and lasted until ten o'clock.

On the 17th, 300 drops. *Itching and burning in the anus* remained the prominent symptom, lasting till midnight and preventing sleep. Three stools followed, ending always with discharge of mucus; the *urine* was plainly *increased*, and after urination the *inclination returned, attended with the voiding of a few drops more.*

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On the 18th, at about six in the morning, 600 drops were taken in a glass of water with the following result: Eructations of the drug for some hours, confluence of saliva in the mouth, headache in the frontal region, and in the evening three stools, with subsequent *itching and burning in the anus* and *irritating stitches up the rectum.* On the following day, on which I took no dose, I frequently felt flying stitches under the right shoulder-blade, and in the evening had three stools with the accustomed accompaniments.

As in the course of the 20th, the following day, I perceived no drug-affections, I took 400 drops at about nine in the evening. Before midnight sleep was destroyed by the emission of much flatulence, by *itching and burning in the anus, accompanied by flying stitches in the rectum and by repeated urination;* sleep, however, came on after midnight, and on awaking I found myself better than I could have expected after a bad night. I took no medicine on the next three days; regularly every evening *the itching and burning in the anus* set in; every day also I had two stools ending with a discharge of mucus.

On the evening of the 23d, 500 drops. Increased warmth in the face with dull confusion in the head (effect of the alcohol); unrefreshing sleep, interrupted by terrible dreams (of the dead) and by *frequent urination.* On the following morning dull confusion in the head with general debility. Through the day *flying drawing pains* in various parts, especially in the hands, and in the evening a return of the *itching and burning in the anus.*

From the 25th to the end of the month I ceased to take the drug, and made the following observations: On the evening of the 26th, three round red spots of the size of a lentil, which itched and obliged me to scratch, appeared on the inner surface of the right forearm near the wrist. The itching became *burning* when they were scratched. On the following morning they had disappeared without leaving a trace; on the 28th, I remarked a painful *tubercle* of about the same size in the neighborhood of the anus, on the raphé of the perinæum, which likewise disappeared in a couple of days. *Flying drawing*, now here, now there, and troublesome *itching in the anus*, especially in the evening, developed themselves every day, gradually however wearing off.

On the 1st of October, at five in the afternoon, 500 drops; followed by nausea, eructations of the remedy and (after half an hour) *itching and burning in the anus.* During the night, *discharge of much flatulence and copious urine;* at six in the morn-

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ing of the following day an evacuation with burning in the anus; through the day felt well.

On taking 500 drops on the 2d Oct., the constant *burning and itching in the anus* reappeared, and the night's rest was as usual disturbed by *frequent urination* and restless dreams. On the following day, no other symptoms were perceived except debility and occasional flying *stitches in the rectum.*

I took also, on the 4th, at about three in the afternoon, another 500 drops. In the evening dull confusion of the head and *burning in the anus;* on the following night *abundant urine, much flatulence,* and dreams. On the following day I felt pretty well again; while urinating, however, I made the unpleasant discovery that the glans penis was entirely covered with a *greenish-yellow, ill-smelling secretion,* and after I had cleansed it, I observed on the dorsum of the glans near the hinder border four *tubercles* about the size of a flaxseed, with a *vesicle* on the summit, and in the sulcus near the attachment of the foreskin was a small eroded spot surrounded by a red circle about the size of a lentil.

Nevertheless, on the 6th I again took 500 drops of the tincture; upon which the symptoms already described again appeared, and the *tubercles* on the glans had increased by two. The *urine,* since the large doses of Thuja, had become turbid, and in cooling, deposited a flocky, mucous cloud. Urination was performed without pain, but a sensation was often experienced while seated, as if the *glans had been bruised.*

On the 7th no new symptoms were developed by a fresh dose of 500 drops, except that the *vesicles* of the elevations before described were broken, and left behind little painless *erosions,* surrounded by a red margin, and yielding the secretion alluded to.

During the three following days no medicine was taken, and the *protuberances became flatter, the circle paler,* and at last the *sore spots* disappeared also. Pains, at one time *drawing,* at another *tearing,* were repeatedly felt, especially in the extremities, for the most part while at rest, but in the right tibia also while walking, so as to make me limp.

On the 11th, at three in the afternoon, 600 drops. Beside the usual phenomena, I noticed on the following day *granular, elevated red spots on the glans penis, which was uncommonly sensitive,* and on the 13th the *sebaceous glands of the prepuce appeared swollen and inflamed;* but, on the 14th, the inflamed spots were paler again, the clustered, prominent *tubercles* flatter; and on the 15th the appearance of the prepuce and glans was again natural.

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At three in the afternoon of the 16th I drank 1000 drops in a pint of water. Immediately afterwards, nausea with vomiturition and confluence of saliva in the mouth. After an hour, headache in the frontal region with heat in the cheeks; and half an hour later, general feeling as if beaten, with a chill over the whole body in so remarkable a degree, that I was obliged to go to bed, although it was only six o'clock in the evening. The night was disturbed by many dreams and frequent urination. On the three following days, no medicine being taken, I felt uncommonly debilitated. I was especially annoyed by the *itching and burning in the anus*, attended by several violent *stitches in the rectum* (particularly in the evening). I also had, at times, *drawing pains in the hands and feet*, which still continued even after eight days, growing however weaker and weaker. No change was perceptible in the glans penis, but I felt a burning pain in the perinæum, *the raphé* of which *was more prominent* than usual, and one inch from the anus, *a tubercle of the size of a pea* appeared, which increased for three days, became moist, smarted in walking, and then day by day became smaller and disappeared in about ten days.

Third proving, likewise with the tincture.

After I had desisted for three weeks, and felt myself pretty free from the effects of the drug, I began a new proving on the 8th of November, by taking 300 drops of the tincture at four o'clock in the afternoon; whereupon the well-known Thuja symptoms made their appearance, as *transitory drawing*, perceptible now here, now there, *itching and burning in the anus, copious urine, sensitiveness of the glans*, &c. &c.

On the 9th, 300 drops in the evening. In the night, increased sexual desire, which during the whole course of the preceding proving had been rather diminished than exalted.

On the following day, soon after waking, I was annoyed by an *itching, burning pain in the hollow below the os coccygis*, lasting all day.

The same phenomena recurred on taking 300 drops on the evening of the 10th. Three days subsequently the *glans became sensitive*, and the sebaceous glands of the prepuce *swollen* as before on the 12th of October. On the fourth day I remarked *a red tubercle* between the scrotum and the right thigh; violent *itching in the hollow* below the os coccygis was again very troublesome, and, the *anus became as sensitive* after a slimy discharge, as though *the skin were cracked and chapped there.*

On the 19th, when most of the Thuja symptoms had ceased,

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I took at about three o'clock in the afternoon 1200 drops of the tincture (in weight one ounce and two scruples) in a pint of water. The effect of this draught was at first the drunkenness induced by alcohol; heat in the head and face, uncertain gait, reeling of surrounding objects, &c. In the evening, a general feeling as if beaten, which drove me to bed at eight o'clock. Sleep was interrupted as before, by dreams, and *frequent occasion to urinate.* On the following days, besides the occasional drawing in the limbs, I was annoyed by most constant Thuja symptoms, *itching and burning in the anus with tenesmus*, especially in the evening.

On the 23d, *deep red spots* showed themselves on the glans, and *the inner surface of the foreskin was inflamed and swollen.*

On the 24th, the fifth day after the large dose of Thuja, a *slight burning pain* was perceived in the glans, which on examining in the furrow behind the corona, was entirely covered with a *thin, yellowish, ill-smelling secretion*, on the removal of which *two deep red-spots* were discovered which appeared to be eroded, and from which the fluid alluded to transuded.

On the 25th, the two spots had increased in size, run together, and were covered with *granular elevations*; the *glans was rendered uncomfortable*, but urination was performed without pain.

On the 26th, the whole *furrow* as far as the frænulum *was sore* and covered with *papillæ of the size of a poppyseed.* The secretion from the glans was very copious.

On the 27th and 28th of the month the secretion was diminished in quantity, but some twelve or fifteen *reddish excrescences* arose on the hinder border of the glans, the largest of which was about the size of a flaxseed, and the inner surface of the prepuce was full of *granular tubercles.* On the next day, the elevations on the glans disappeared, as well as the sore spots in the furrow, with a steady diminution of the purulent discharge; the sebaceous glands of the prepuce remained nevertheless some time swollen and prominent.

Fourth proving with the oil of Thuja.

On the 1st of December, at about three in the afternoon, I took three drops of the oil of Thuja on a lump of sugar; the oil had been obtained (one drachm from four pounds of leaves) by the distillation of the tender twigs of the tree; it tasted exceedingly sharp and caused eructations for several hours. In the night *frequent urination*, with very *hasty, incessant urgency*, and on the following day redness of the *glans at the aperture of the urethra.* After taking ten drops of the oil in the evening, the eructations continued into the night.

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On the 3d and 4th, a dull pain developed itself in the *left testicle* as though it had been *bruised*, and was perceptible both when seated and when walking. On the 6th an *eroded spot* appeared again in the middle of the *furrow of the glans*, which discharged *a pus-like fluid*.

On the 7th and 8th, the *discharge from the glans* had attained its former height. The whole furrow was covered over with pus, so that it was necessary to cleanse it often.

On the 9th, after moderate use of wine, the condition was still worse. *The inner surface of the prepuce* was *sore* in spots, *highly inflamed* at the frænulum, the *glans* was sensitive and painful in walking.

I was now content with this painful present, and closed my proving of Thuja. The *discharge from the glans* was first entirely cured, after several alternations of better and worse, at the end of four weeks. *Itching and burning in the anus* lasted the longest, and was still felt at times after the lapse of months.

I must here repeat the observation, that during the whole duration of the experiments with Thuja (unica nocte exempta) the sexual impulse was diminished even to indifference. According to the results above detailed, the chief operation of Thuja is upon the genital and urinary systems. It was especially in the parts under the influence of the *plexus pudendo-hæmorrhoidalis* that its effects fastened themselves, and were produced in objective phenomena. Its influence on the muscles was of very short duration in my case, and it left the respiratory and digestive organs entirely undisturbed.

2. *Proving of Thuja on my wife.*

Maria Anna M., 35 years old, sanguineo-melancholic temperament, tall and slender form, mother of six healthy children, began the proving of Thuja, four months after the birth of her last child, by taking 200 drops of the second dilution. This was at about three o'clock in the afternoon of the 17th June, 1845. She experienced no effect from the dose, nor from another of 200 drops of the first dilution.

On the 19th, in the afternoon, she took 30 drops of the tincture, and on awaking next morning, complained of *painful tension in the left side of the neck*, darting upwards to the occiput and downwards to the scapula, and preventing her from turning her head.

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On the 20th, on which day she took nothing, the tension seemed somewhat to remit, but returned in greater severity on the 21st, after taking 40 drops of the tincture. In the evening also there came on a *crushing pain* in the inner side of the left wrist, in the head of the radius, which last was plainly swollen and painful to the touch.

In the afternoon of the 22d, she took 50 drops. In the evening she felt *tension in both knees and heels*, especially when rising after being long seated. The *stiffness of the nape* of the neck continued.

On the 23d, the same symptoms continued on taking 60 drops. She compared the *tension in the knees and heels* to a feeling as if the feet had been rendered stiff by over exertion in walking. She took nothing on the last days of June, and the *tension in the nape of the neck* and in the *knees and heels* diminished but did not altogether cease.

After a pause of eight days, she continued the proving, by taking 70 drops of the tincture on the first of July. The tension over the patellæ and in the heels, (at the point of attachment of the tendo Achillis,) immediately increased. The rest at night was good, and no change was perceived in the urine or stools.

On the 3d of July, 80 drops were taken in the afternoon as usual, upon which a dull, stunning headache, in the frontal region and vertex came on, which, however, did not last long.

On the 5th and 8th, nothing new was produced by 90 and 100 drops. The *tension in the knees and heels* continued, but was only troublesome while walking, not while sitting; *the tension in the nape* was still occasionally sensible, especially in the morning.

On the 9th and 10th, 120 and 140 drops of the tincture having been taken, no new developments took place, and the prover, stiffened in *neck and feet*, concluded her experiment.

On the 12th, the menses appeared at their regular period, but were weaker than ordinary.

The poverty of symptoms in this proving is worthy of remark in connection with the uncommon duration of the phenomena which did appear. The stiffness of the left side of the neck, and the tension over the knees and in the heels, diminished only very slowly, often disappeared, and then suddenly set in again, and first completely vanished at the expiration of three months.

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K.

Dr. Reisinger instituted on himself three experiments with Thuja.

First proving with increasing doses of the tincture.

Dr. R. took on the morning of the 5th Nov. 1844, ten drops of the tincture, and increased the dose daily until he arrived at 100 drops, which he then repeated every other day, until the 10th December, without experiencing the slightest influence. Various hinderances prevented the prosecution of this experiment.

Second proving with the tincture, in massive doses.

On the 1st of March, 1845, R. recommenced the proving of Thuja. He began with 100 drops of the tincture, and added 100 drops every other day, so that on the 15th the dose was 800 drops. The sole symptom which he ascribed to the drug, was a tolerably strong, jumping, sticking pain in a hollow tooth of the left under jaw, which had never ached before. This pain appeared only upon the day of taking the drug, and about three to four hours after its administration. But this very probable symptom of Thuja disappeared again under the subsequent remarkably large doses. On the 15th, after taking 800 drops, R. perceived in the evening a slight oppression of the chest, with inclination to cough. On the 17th, 19th, and 21st, 1000, 1200 and 1500 drops produced no effect whatever.

R. now discontinued the doses for eight days, and waited, but in vain, for the after effect of the remedy. On the 29th, 30th, and 31st, he took, each day, 1500 drops of the tincture, and remarked afterward, slight vertigo (effect of the alcohol), perpetual eructations, dryness of the pharynx, frequent hawking up of mucus, and *pressing, tensive feeling in the lungs*, that became more perceptible and sticking on taking a deep inspiration. The other functions remained normal.

Encouraged by this impunity, R. took from the 1st to the 5th of April, in daily increasing doses, 1600 to 2000 drops of the tincture, without perceiving the slightest change in his sensations, except a feeling of dullness and confusion in the head.

On the 9th, R. drank at one draught *two ounces of the tincture*. Of the subsequent symptoms, the increased warmth in the stomach and whole frame, the vertigo, the headache in the whole

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frontal region, and the violent thirst, are rather to be set to the account of the alcohol; Thuja will have the credit of the following; swelling of the veins, especially of the arm; eructations of wind smelling of the drug; oppression of the chest with some pain on inspiring; frequent hawking up of a tough mucus; restless sleep with confused dreams, and excited sexual impulse.

Third proving with dilutions.

As was to have been expected, no results followed an experiment instituted by R. with the first twelve dilutions (1: 99). He began with 100 drops of the first dilution, and took daily the same quantity of the succeeding dilutions in regular order, closing his resultless experiment with 100 drops of the twelfth. He had now taken some 25,000 drops of the Thuja tincture, and was well weary of it, but not sick.

Dr. Reisinger's proving of Thuja confirms the opinion, that for the production of a drug disease as well as for the origin of a natural sickness, two conditions are necessary, a noxious influence, and a natural susceptibility. Where the proper soil, the sensitiveness of the organism to the special influence of the drug, is wanting, there no symptoms of disease will spring up, even under the exhibition of full doses of the remedy, and the scattered seed, instead of ripening into full sheaves, will barely bud, or at most give but a very sparing harvest.

L.

Dr. Sterz made two short experiments with Thuja.

First proving with the tincture.

He took the tincture every forenoon between ten and eleven o'clock, upon a lump of sugar. He began on the 13th Oct., 1844, with 5 drops, took 10 on the 14th, and increased the dose each day by 10 drops, until, on the 19th, he took 60 drops, but perceived not the slightest effects.

On the 20th, an hour after taking 80 drops, a sensation of roughness in the throat came on and lasted until midnight.

On the 21st, 100 drops. Immediately after the dose, feeling of roughness on the tongue, the hard palate, and in the throat; at noon sensitiveness of the gums of the molares; at seven in the evening, colic-like pain in the hypogastrium and movings in the bowels as if preceding a diarrhœa, which indeed came on

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very violently at half past eight with severe belly-ache: the pains then remitted, but the hypogastrium remained tender for several hours. His sleep was quiet after midninght, and towards morning *much flatulence* was discharged, the *throat* was still rough and the *fauces dry*. He was frequently obliged to hawk, and throw off white, tough mucus. After ten o'clock in the forenoon he took a fresh 100 drops, upon which, frequent eructations with nausea; at noon, dull confusion in the forehead which disappeared at midnight; in the evening a copious evacuation with discharge of much flatulence. All the morbid sensations had vanished on the next day after a quiet night's sleep.

Second proving with dilutions (10 : 90).

No effects were perceived from 200 drops of the 15th dilution, (the dilutions were prepared with one part of alcohol and four of distilled water,) taken on the 7th, 8th, and 10th of December, nor from the same quantity of the 12th dilution taken on the 11th.

On the 12th, S. took morning and evening 200 drops of the 12th. At noon *feeling of dryness on the palate*, and the next day *drawing* in both thumbs on awaking.

On the 13th, 400 drops of the 12th. Thereupon roughness of the palate and drawing in the right thumb, which last continued all day.

On the 14th, nothing new was developed by 400 drops of the 8th dilution. The drawing in the right thumb extended into the wrist-joint. On the 15th no dose was taken, and except dryness of the throat no symptoms appeared.

On the 16th, 400 drops of the 6th dilution, which were repeated three days after, on the 19th; after which, scraping and roughness in the throat, and drawing in the right knee.

After a pause of twenty-eight days, S. also experimented with the 4th and 2d dilutions. On the 16th, 18th, 19th, and 21st of January, 1845, he took 400 drops each day of the 4th; and on the 5th, 6th, 7th and 8th of February 200 drops of the 2d. The following weak symptoms appeared: feeling of dryness in the throat, with frequent hawking and spitting of a tough white mucus and confluence of much saliva into the mouth; the taste was injured by it, and the food tasted as if it had not salt enough.

M.

Dr. Wachtel proved Thuja only in the dilutions.

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First proving with the 3d dilution (10 : 90).

Our associate, so remarkably sensitive to the effects of Thuja, began his proving by taking 30 drops of the 3d dilution about an hour after breakfast on the morning of the 10th December, 1844.—He observed, in the forenoon, a sudden thrust from before backwards in the right half of the chest; at noon, complete loss of appetite; in the afternoon, *itching and biting in the prepuce;* afterwards, tearing pressing in the upper part of the right thigh and left arm, which greatly resembled the effects of Bryonia, with this difference, that the pain produced by Thuja seized the middle of the affected member, was confined to a small spot, and was mostly in the muscles; while that produced by Bryonia seemed to prefer the joints and tendons. In the evening, he perceived maddening (! R.) twitching in the right frontal eminence. An hour later, this pain attacked the right eyeball much more violently, but shortly disappeared, leaving behind a sensibility of the eye to touch of the hand, which remained a long while. The sleep of the following night was good; but immediately on waking, the same pain re-established itself in the right eye.

On the 11th, 10 drops of the same dilution, producing a return of the chest pain of the day before, but this time in the left half. Afterwards, an unsatisfactory, hard stool, with subsequent *itching and biting in the anus.* In the afternoon, *drawing* through the whole length of the outer surface of the thigh (of which side? M.); in the evening, pressing pain in the frontal and occipital regions; *itching* in the corona of the glans when walking (for half an hour). His sleep was good and comfortable, with lively and pleasant dreams. Feeling of health on awaking, except weariness and lameness in the feet. On the 12th, no striking symptoms followed a repetition of a similar dose; W. only remarked in the middle of the left parietal bone a *spot* of the size of a dime, *sensitive* to the touch, and a *drawing* from the crest of the right *iliac bone to the upper part of the thigh.*

On the 13th, *pressing in the occiput* was the only symptom after taking 10 drops of the 3d dilution. On the 14th, after a similar dose, *pressing in the forehead* lasting all day.

W. now discontinued the Thuja from the 15th December, 1844, until the 7th January, 1845, inclusive, in order to see how long the effects of the drug would continue; and acknowledges his astonishment at the duration of its action. During this time, he observed the following symptoms:

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On the 15th, violent *drawing and pressing in the sacral region* for two hours in the forenoon. On the 16th, while writing, *drawing pressing* in the right thumb (for five or six minutes); then in the index, later in the middle, and finally in the little finger. In the afternoon, the same sort of pain appeared in the left arm, shifted then to the upper part of the thigh of the same side, soon after appeared in both the mastoid processes of the temporal bones, then in the frontal eminences, where the pain took more of a digging-twitching character, and finally reappeared in the extremities. This wandering about of the pains continued through the following day. On the 18th, for several hours in the forenoon, the pain remained in the neighborhood of the left wrist; and during the whole afternoon, in the upper part of the left thigh.

On the 19th, while lying down, the *pressing in the sacrum* was fixed in the same spot for a whole hour. It was diminished and disappeared on motion; but afterwards appeared while lying in bed, in *the lower part of the left thigh*, in the same spot where it had already appeared once before. The prover remarked this day, on the edge of the upper lip, two small, dark-red, burning spots, of the size of a lentil; on which, during the three following days, little elevations were developed, which dried up and fell off. Later, two new spots appeared, which ran the same course. He observed in addition; feeling of stiffness on the left side of the nape of the neck, which had been already perceived during the first days of the experiment, but had been attributed from the beginning, by the prover, to an uncomfortable position in bed.

On the 24th and 25th W. was often tormented by a very painful tearing *drawing* in the left side of the chest, in the neighborhood of the fifth and sixth ribs. This pain appeared when standing and sitting, disappeared when moving, and was rather diminished than increased by a deep inspiration.

On the 26th, *crawling drawing in the left zygoma*, which left behind for a long time a feeling of dullness. This symptom appeared again on the 27th, on the same, and afterwards on the right side. In the evening, *drawing tearing in the* mastoid process of the left temporal bone, and then in both *eyeballs*, where the pain ceased.

On the 28th the prover was annoyed through the whole day with a *crawling, pressive pain* in the left side of the sternum, which was *confined to a spot* about the size of a dollar, remained the same in rest or motion, and finally left the feeling as though the *spot was sore.*

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After three weeks, isolated symptoms were still perceived. The pains were, for the most part, *drawing, tearing or crawling*, seldom pressing, and least of all, sticking. They were mostly *confined to a small spot, seldom continued long, frequently changed their location*, and came on *distinctly when at rest* as well as during motion.

Second proving with the 12th dilution.

After W. had almost ceased to perceive the symptoms produced by the proving of the 3d dilution, he took on the 8th of January, 1845, at seven o'clock in the morning, three ounces of the 12th dilution. An hour and a half afterwards appeared (weakly marked) the characteristic *tearing drawing* pains, sometimes in the *frontal eminences* and in the *occipital protuberances*, sometimes in the middle of the left arm and thigh (only when at rest). The *crawling and drawing* in both zygomata, and in the left upper maxillary bone, came on instantaneously, and disappeared again as rapidly as it had appeared.

On the 9th, rather violent drawing in the right shoulder, and later, without the slightest cause, cutting and griping in the left side of the abdomen.

On the 10th, no abnormal sensation was perceived; but on the 11th, extraordinarily violent *tearing* in the left *concha*, and soon after in the left *eye*, which ended with a *darting stitch* through the middle of *the eyeball*. *Copious urine* also came on.

On the 12th, the prover remarked in the region of the heart a *small spot*, sensitive to the touch, *with pain, as if it were sore*, and on the following day a similar spot immediately upon the vertex, upon which the skin was somewhat reddened. At ten o'clock he went to bed in good health, but after half an hour was suddenly seized with *anxiety*—after which a slight perspiration broke out; whereupon he fell asleep but continually started up again. Finally, *drawing pains* in the arms and feet, and especially in the *small of the back*, came on. These having ceased, he had quiet sleep till morning.

On the 14th, W. found himself tolerably well; only general weakness and frequent accesses of drawing pains in different parts of the body annoyed him. In the evening, the general debility increased, and he was obliged to go to bed at seven o'clock. After some minutes *his feet became as cold as ice*—he became again *anxious*. It was a very striking symptom that in no position of the body, whether sitting or lying, could he feel the pul-

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sation of his heart. *Slight shiverings*, which spread themselves by little and little over the whole body, came on. At last, after a quarter of an hour, he experienced a *trembling of the heart*— after which *a general sweat* broke out, so that in the course of a minute the whole body was wet. This was followed by dozing for an hour, unrefreshing, and disturbed by frequent starting and horrible images. When he awoke from this, he was tormented with *drawing and tearing pains* in the hands and feet, and when these last suddenly disappeared, the *anxiety* and *heart trembling* returned. It was only at the expiration of a quarter of an hour that his heart again beat regularly; but then *drawing tearing pains* in the epigastrium, in the hypochondria, on the chest, but worst in the small of the back, came on, ending in a slight perspiration, and finally in sleep. On awaking, W. was very weak, and every part of his body felt as though it had been bruised; the head, however, was free from pain; the weariness, too, nearly disappeared in the course of the day. (15th.) The prover went to bed later than usual. After he had lain quietly for a quarter of an hour *his feet began again to become cold*, *anxiety* again came on, and in an instant, in place of the regular beat, he felt a *trembling of the heart*. The sweat that then broke out was interrupted by the prover's being called to a patient: on his return, at the expiration of an hour, he slept tolerably well until morning.

On the 16th, during the day *drawing pains*, *now here*, *now there*; weariness with apparent loss of sensation in the limbs; in the evening after lying down, *cold feet again*, with *anxiety and palpitation*, but less in amount and of shorter duration.

Isolated symptoms were still remarked by the observant prover, six weeks after the three ounces of the 12th dilution had been taken. The following were daily visitors: *the drawing pains* in the hands and feet, in the sacral region, and between the shoulders. The *crawling drawing in the zygomata, and the tearing in the occipital protuberances and in the petrous portion of the temporal bone* were oftenest perceived. No chest or abdominal symptoms appeared. But *wartlike excrescences* frequently appeared on the back of the right hand,* on the *chin and other places*. A *furunculus*, behind the right ear especially, continued a long while, and formed a scab, from which exuded a glutinous moisture. This soon dried and fell off, when another formed; it was sensitive to the touch, and lasted four whole weeks.

* These *excrescences* deserved a more full description. Editor of the Austrian Journal.

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Finally, W. repeats the observation, that the symptoms of Thuja came on almost exclusively during rest, remained but a little while, and were either rendered worse or caused to break out afresh, by the use of spirituous liquors, excepting the customary beer.

This interesting result authorizes the conclusion that individual susceptibility for a particular remedy, plays a very important part in the proving of drugs. While *Reisinger's* constitution, unsusceptible to the influences of Thuja, remained almost unmoved by massive doses, that of *Wachter*, especially subject to Thuja, produced with the smallest doses the most abundant harvest of symptoms.

N.

Dr. Watzke instituted four experiments with Thuja, and of all the drugs which he has assisted in proving, Thuja seems to have found the least sensibility to its specific effects in him. He experienced no regular drug sickness, although isolated Thuja symptoms were clearly developed.

First proving with dilutions gradually descending.

"I took," says W. "on the 26th and 27th November, 1844, twice in the forenoon, six drops of the 12th dilution, and during the two following days the same dose in like manner of the 9th, and observed a strict diet. Whether the symptoms which then appeared were certainly produced by the Thuja or not, I do not know; but of this I am confident, that they were such as I had never before experienced, and such as almost constantly returned when I subsequently experimented with larger doses of the drug.

"There appeared, especially during the time of proving, repeated, *short, dry cough*, without throat symptoms or pain in the chest. The *hypogastrium* appeared the whole time somewhat *inflated* and sensitive to pressure, and even to *the jar of the foot on the ground*. It seemed to me as if I perceived the *vesica to be larger*, and I was obliged to urinate oftener than usual; but I had neither pains in the urethra, nor was the urine at all changed.

"From the 2d to the 14th December I took nearly every day a dose of Thuja; until the 6th, six drops of the 9th; until the 10th, six drops of the 6th; and on the 13th and 14th, six drops of the third dilution.

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"Although during this time I did not altogether observe a strict diet, still some certain symptoms of Thuja manifested the working of the drug; *certain*, because they were renewed with renewed intensity under the larger doses.

"These symptoms were, *dry cough, pain in the patellæ, frequently returning*, whether sitting or walking; *a twitching as if a tendon were slowly drawn out and then suffered to return*; a similar pain while sleeping; the outer malleolus of the right foot was painful while walking, as if after a false step; circumscribed pain in the inner side of the thigh, as if after a long walk; *swelling in the region of the hypogastrium with frequent urgency to urinate.*"

Second proving with small increasing doses of the tincture.

"From the 19th December, 1844, to the 2d January, 1845, without changing my ordinary mode of life, which was not confined to a very severe diet, I took at about noon of every other day, a dose of the tincture of Thuja, beginning with 10 drops, and increasing it each time by 10, until on the last named day I arrived at 80 drops.

"The abnormal sensations which I experienced during the duration of this experiment, were the following: contractive pain in the right temple, pretty severe, often returning and always lasting several seconds; pressure in the right eyeball; biting in the corner of the right eye [once at about five o'clock in the evening (without any cause affecting the eyes), the surrounding objects which I wished to regard suddenly swam before my eyes; I could not see clearly, much less read. This lasted nearly a quarter of an hour]. Sensitiveness of isolated spots on the thorax; feeling of weight, and frequent cramp-like constriction in the chest; dry cough, increasing in a direct ratio with the duration of the experiment, becoming constantly more troublesome, and finally obliging me to lay aside the proving for a while; *sensitiveness and feeling of inflation in the region of the vesica with frequent urgency to urinate*; violent itching in distinct points on the inner side of the thigh *and on the parts of the genitals covered with hair*; *sensibility of the glans* and darting stitches through it; remarkable *indifference to the opposite sex*; several times, on awaking, drawing pain in the great toe: a feeling in the little toe as if the skin were lacerated in spots; weariness of the lower limbs; especially remarked in the lower part of the thigh."

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Third proving with steady doses of the tincture.

"From the 16th to and including the 20th January, I took daily 100 drops of the tincture without noticing any new symptoms; those developed under the previous proving again appeared with less violence, except the dry, frequently returning cough, which rendered me so anxious about my health that I was induced to discontinue the experiment."

Fourth proving with large increasing doses of the tincture.

"On the 5th of February, I took 150 drops of the tincture; on the 6th, 300; on the 7th, 450; on the 8th, 600; on the 9th, 700; on the 10th, 900: each time between ten and eleven o'clock in the forenoon.

"These doses produced nothing new; they simply caused the most of the symptoms developed by the second experiment to return, more markedly, and with greater force. The last dose of 900 drops was followed, during the whole afternoon, by frequent eructations of food with the taste of the drug, and several times by violent, nearly watery, but painless diarrhœa.

"Were these last two symptoms the result of accident? or was the organism so loaded with matter incapable of being assimilated by means of the previous large doses, that it was obliged to get rid of it by the shortest route? and had it already by that means lost the capability of further developing in itself the characteristic symptoms of Thuja?"

Let the last proving reply to these queries!

"On the 25th of February, I took in the forenoon *two*, and on the 27th *three table-spoons* (about 1500 drops) *of the tincture*, at the same time observing a strict diet.

"If these enormous doses gave me no drug disease regularly classified in any nosographic system, they at least produced in me the firm conviction, that I could be very regularly and earnestly sick on taking the medicament in that quantity. The goal, which I had proposed to myself in this experiment, lay now at last in view! Why did I not then attain it? I confess, I had not the courage for it. The energetic attack which the drug had already made upon my thoracic organs, frightened me back. Already had my first experiment with the dilutions pointed out to me this unpleasant tendency of Thuja, although but

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slightly, and I found it advisable to break off the second and third provings almost from the beginning.

"The somewhat numerous symptoms that constitute my last proving, began to appear for the most part some hours after the dose, and confined themselves principally to the first twenty-four or forty-eight hours; but nevertheless, they did not run an acute course, nor vanish, like meteors, after a single appearance, but returned separately during the period of from 8 to 14 days. They seemed to have a chronic character, and a marked, though irregular periodicity.

"*It was more especially upon the thoracic organs*, as in the former provings on the *muscles, the head, especially the occiput*, and *upon the organs of generation*, that the Thuja exerted its influence. The peculiarity of the muscular pains was that they generally affected the *middle* instead of the tendinous portions of the muscle. Most of the symptoms came on *during rest*, many of them *on waking* in the morning.

"To prevent a tedious and unnecessary repetition, I confine myself to a description of one day, the 27th of February, which was one of the richest in symptoms. At 11 o'clock in the forenoon, I had taken three tablespoonfuls of the tincture.

"Immediately after the exhibition of the dose, the head felt cloudy; I felt my spirits excited and became lively and loquacious (effect of the alcohol?). Soon I perceived a slow-drawing, sometimes darting pain in the right half of the face, from the temple to the teeth; then the whole became sensitive, and increased in sensitiveness with the subsequent symptoms, in the course of the afternoon. The occiput was externally warmer to the touch in a particular spot, corresponding with which I felt heat and pressure in the brain. At times dull stitches ran through the brain, generally in the direction of the eyebrows, and from the eyeball to the occiput.

"*The chest smarted internally, as if sore, especially during the dry cough which appeared from time to time. In some spots I had the feeling, as if the thorax from without, and the corresponding portions of the lungs from within, were strongly and durably constricted;* a feeling which returned frequently and strongly on the following days, especially during rest, induced frequent deep sighing, and annoyed me not a little.

"There were spots here and there on the thorax and extremities, painful *as if from a thrust* and especially during movement. In the other spots I perceived a stitch, leaving behind an itching, as if they had been bitten by fleas or ants; in the forearm sev-

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eral times a coursing and gurgling, as of single drops of blood rolling one after another. I had frequently, for a minute at a time, a pain which in the axilla, in the dorsum of the foot, and on various points of the external chest, was pinching and pressing; in the patellæ and heels was stinging, and in the external ear compressing.

"Violent twitching came on in isolated muscular parts, which was strongest in the middle of the upper part of the right thigh and of the left arm. In the ends of the fingers and toes the twitching was finer and more transient. This muscular twitching was frequently repeated on the following days in different parts, and was one of the most troublesome symptoms; for example, it still came on on the 13th of March, and lasted for almost ten minutes in the chin.

"*The stinging pain in the heel*, often returned, and was especially troublesome in walking, (for a quarter of an hour.) *The inner side of the upper thigh, and the parts of the genital organs covered with hair*, were very unpleasantly affected with *itching and scraping*, frequently lasting from 5 to 10 minutes. *Frequent stitches darted through the glans*, and *the whole member, especially the glans*, was constantly sensitive. An uncomfortable sensation of fulness in the region of the bladder forced me to frequent urination; the quantity of urine did not seem increased, and its quality was perfectly normal. My digestion and evacuation seem to have been left nearly or quite undisturbed. The symptoms of the fourth proving, (Eructations of food and Diarrhœa,) must be considered as the result of accident.*

"The most lasting and most troublesome symptoms in my case, as may be gathered from the foregoing account, were those which affected the muscles and the chest. *The dry cough, the constriction in spots on the thorax* and in the corresponding parts of the lungs, (frequently returning, very irritating and annoying, compelling frequent deep inspirations and ameliorated by wine and beer,) first entirely disappeared in the course of about eight weeks. The striking *indifference to sexual intercourse*, by no means customary to me, continued during the whole experiment, and, in fact, still longer."

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* Although Thuja has produced gastric symptoms in various provers after the exhibition of large doses, yet, it must be considered as established as the general result of all the experiments, that gastric affections are the effects not of the quality but of the quantity of the drug; effects, which may result from the administration of any of the remedies in enormous doses.

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O.

Dr. Wurmb instituted five experiments with Thuja; four with the tincture, and one with dilutions.

First proving with small doses of the tincture.

W. took, from the 17th, until and including the 21st of September, 1844, at about 5 o'clock in the evening of each day, a coffee spoonful of the tincture of Thuja; omitted it on the 22d; took the same dose at the same hour on the two following days; omitted it on the 25th, and from the 26th to and including the 30th, again repeated it. The following were the results. On the 18th, in the morning after urinating, *burning in the urethra; very painful stitches from the urethra to the anus; pressing in the region of the neck of the bladder, with urgency to urinate.* These feelings, which the prover thought similar to those usually perceived at the beginning of a clap, or after drinking new beer, lasted about twenty minutes.

On the 19th, soon after the dose: *tearing* in the outside of the right ankle; then in the left elbow; then *drawing* in the inner side of the upper thigh, and finally *tearing* in the second joint of the right thumb. On the 20th, soon after dinner, violent *pressing* in the left *temple* which continued all the evening, but in a less degree. During the proving, the stools were softened, more copious, and took place from two to three times a day.

Second proving with larger doses of the tincture.

After a cessation of eight days W. took, from the 8th to and including the 14th October, at five o'clock in the evening of each day, two coffee spoonfuls of the tincture; with the following result: On the 11th of October, soon after the dose, *feeling of roughness in the throat,* lasting some hours; pressing in the right *side of the chest,* particularly noticeable when breathing deeply, and when bending the body; at seven in the evening, drawing in the first joint of the right thumb especially during rest, instantly disappearing on moving the finger, and returning as quickly on the cessation of the motion. This symptom continued nearly an hour; several times, *drawing* in the third joint of the right ring finger, and *pressing* to the left under the short ribs.

On the 12th, the *pressing pain* appeared at the lower extremity of the right *side of the chest,* after getting up; it was

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somewhat violent at first, but decreased very much during the day, without, however, entirely disappearing. In the morning a very copious, soft stool. In the evening, on going out, after taking the drug, vertigo, *drawing* in the inner surface of the right thigh, in the right knee, in the right calf, in the bend of the left elbow, *in both popliteal spaces*, especially the left. The feeling of roughness in the throat was less than the day before.

On the 13th and 14th, the sexual impulse was exceedingly importunate (without any known cause). He thinks he passed more urine than usual.

On the 15th, *frequent*, and on every occasion *copious urination*.

On the 16th, the *prominences* of the right *elbow* were painful, as if after a *severe knock*, and this feeling did not entirely disappear until the 18th.

Third proving with large doses.

From the 20th to the 30th October, W. took daily at nine in the morning, and five in the evening two coffee spoonfuls of the tincture, and observed as follows: On the 22d, in the morning after getting up, painful *drawing* in the second joint of the left thumb, (only during rest) for about two hours. The same feeling, but not lasting, and much weaker, appeared in the course of the forenoon, in almost all the finger joints (but only during rest). For an instant, this drawing appeared in the inner side of the left foot, as far as the sole. In the morning he had the usual, and at eleven o'clock a papescent, stool. At six in the evening, sudden drawing on the inner side of the left foot into the metatarsus.

On the 23d, no evacuation. In the evening, before going to sleep, *drawing* in the left side of the neck. Restless night. He awoke at two o'clock, and for an hour could not go to sleep; then fell into a sleep which was interrupted by frequent waking. He had besides, a feeling of stoppage in the right nostril, with frequent sneezing and *chilly feeling* in the feet, which were externally warm to the touch.

On the 24th, immediately after getting up, a very troublesome *drawing* in the *left side of the neck* and in the left shoulder, which only disappeared in the afternoon.

At ten o'clock in the forenoon, *drawing* in the right heel, and half an hour later, in the right index finger (disappearing instantly on movement). The symptoms of the nose continued, with dull confusion in the head. As W., according to his own

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observations, is but little sensible to changes of temperature, and can trace no cause for this cold, he thinks that these symptoms must be ascribed to Thuja.*

On the 25th. The cold with its accompaniments, sneezing, dull confusion in the head, &c., continued. At about eleven in the day, transient drawing in the index finger. Two hours subsequently, a similar drawing in the left superior maxillary bone. At eight in the evening, troublesome drawing in the left side of the hypogastrium (for a couple of minutes), which spot was also painful to the touch.

On the 26th. The catarrh is still present, only somewhat diminished in degree. In the forenoon, sudden drawing in the left thumb and right little finger (immediately disappearing on movement and as quickly returning in rest). At about ten in the forenoon, drawing in the hypogastrium on the left side, and tenderness on pressure. At about two in the afternoon, troublesome clawing in the sternum, *frequent short dry cough, and increased discharge of urine.* Frequent waking at night; towards morning, a pollution.

On the 27th, on rising, drawing in the right thumb; at ten in the forenoon, drawing and pressing in the hypogastrium, on the left side particularly when touching it; during the day, drawing, now here, now there, and frequent hacking cough; in the afternoon, drawing in the right arm and forearm; towards evening, painful drawing in the right great toe; at six in the evening, pressing in the middle of the sternum.

On the 28th, perfect health.

On the 29th, immediately after the dose, drawing in the lower incisors; about eleven, drawing in the right thumb; at five in the afternoon, drawing in the left superior maxillary bone; in the evening, feeling of roughness in the throat and frequent short, dry cough.

On the 30th, in the forenoon, drawing in the right superior maxillary bone, in the inner side of the left forearm, and in the fingers of the right hand; feeling of roughness in the throat, and frequent dry, hacking cough. The catarrh, which had vanished, showed itself anew by an increased secretion of mucus from the nose. Copious urine.

On the 31st, increased urination; the catarrh worse.

On the 1st November, in the morning, a loose stool, and after it a troublesome pressing in the anus, which remained the whole

* It is certainly a property of Thuja, for the catarrh came on in the same way with several of the provers.—M.

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day. The catarrh became very severe, and one or the other nostril was almost constantly obstructed. At three in the afternoon, sneezing succeeded by very violent sticking in the lower part of the right lung, which lasted until eleven in the evening, when, although very severe before, it disappeared at once. This sticking was greatly aggravated by sneezing, deep breathing, and coughing (but not by movement). Pain, as if the parts were sore, in the region of the ribs on touching them. At four in the afternoon, drawing in the fingers of the right hand, and afterwards in the right elbow.

On the 2d, drawing in the right calf the whole day. The catarrh reduced to a minimum. At four in the afternoon a hard, scanty stool, and *pressing and itching in the anus* for almost the whole evening.

On the 3d, the running from the nose is again pretty copious; frequent sneezing; at about four in the afternoon sneezing, and then some painful stitches in the side of the chest, within.

On the 4th, at six in the morning, very severe stitches in the lower part of the right side of the chest; about five in the afternoon, drawing tearing in the right knee.

Fourth proving with very large doses.

From the 7th to the 14th December, W. took every day at about 9 in the morning, a tablespoonful of the tincture.—Effects:

On the 7th, a pollution in the night, and after, a troublesome burning in the urethra.

On the 9th, want of appetite, especially in the evening. On the 10th, a pollution in the night.

On the 11th, feeling of roughness in the throat, which soon went off; then for an hour, a feeling in the throat as if there were a painless tumor there. At four in the afternoon, a papescent stool, and transient drawings often flitted about, now here, now there, especially in the upper part of the thigh. Urine increased.

On the 12th, pressing in the left breast, after the sensation in the lower lobes of the lung, especially when breathing deeply—frequent urination; no evacuation.

On the 13th, *chills*, even in the warm room; in the evening, well; no evacuation.

On the 14th, on waking in the morning, *drawing in the left side of the neck;* then drawing in the upper part of the left thigh (lasting two minutes and rendering walking painful). Two

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stools followed, one hard and unsatisfactory, afterwards another papescent, and which left behind a long continuing burning in the anus.

On the 15th, in the forenoon, three papescent stools (at six, nine and eleven o'clock). Dinner nauseated him. *Chills* even in the warm room, and apprehension of becoming sick. At six in the evening these symptoms vanished, and the feeling of health was restored.

On the 16th, sudden drawing here and there, especially in the fingers of the right hand; no evacuation; at four o'clock in the night, a pollution.

On the 17th, sudden drawing in the limbs.

On the 18th, in the morning, a hard, unsatisfactory evacuation; drawing in the limbs—at one o'clock, feeling of dryness and sense of constriction in the throat. It was the same sensation that is perceived when one is for a long time exposed to the heat of the sun without drinking. In the night a pollution.

On the 19th after rising, *burning in the external canthi and in the urethra;* drawing pain in the inner side of the left forearm, during the whole forenoon, particularly when the arm was at rest. The feeling of dryness and constriction in the throat appeared again in a slight degree. Drawing in the inner side of the left upper thigh, in the right knee, and in the right hip. At six in the evening, a very unsatisfactory stool after much straining.

On the 20th, feeling as if the *eyelids were swollen* and a foreign body were in the eye;—drawing, now here, now there, in the extremities; in the evening, pressing towards the back in the chest, with oppressed breathing; no stool.

On the 21st, in the forenoon, an unsatisfactory stool; drawing in the extremities, especially on the inner surface of the upper part of the left thigh and forearm (only while at rest).

On the 22d, in the afternoon, another unsatisfactory stool, drawing in different parts of the extremities, not lasting long, but frequently quite troublesome.

Fifth proving with dilution.

After a pause of five weeks, W. on the 27th, 29th, and 30th of January, 1845, took each day, about six in the evening, two tablespoonfuls of the 12th dilution of Thuja, and on the 10th of February, at about five in the evening, he took three ounces of the same dilution.—The dilutions were prepared with distilled water.

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On the 30th of January, he first perceived, soon after taking the drug, feeling of dryness in the throat, lasting two hours; in the evening, drawing in the right thumb and forearm; then in the left thumb and in the teeth of the right superior maxillary bone. The increased secretion of mucus obliged him frequently to blow his nose.

On the 31st, in the morning, frequent sneezing, stoppage of the right nostril, alternating with running. This catarrh lasted a couple of hours, then suddenly vanished; it appeared again for a little while in the evening, and ceased suddenly as if cut off.

On the 1st of February, the same symptoms.

On the 10th, immediately after the dose, feeling of dryness in the throat, which lasted all day.

On the 11th, feeling of dryness in the throat the whole evening; pressing in the left side of the chest, particularly troublesome in the region of the ribs; several times, drawing in the lower incisors, and in the first joint of the right index finger; violent *itching* in the lower part of the sacral region; at night, sticking from the right velum palati into the internal ear; the secretion from the Schneiderian membrane increased.

On the 27th, as a closing experiment, W. drank three ounces of the 30th dilution (prepared with distilled water) at one draught. This was about five in the afternoon; he perceived no result whatever.

This persevering and energetic experiment is not so rich in results as the quantity of the remedy swallowed, would have led us to expect. Whether a want of susceptibility to the action of drug must bear the blame, whether this might have been overcome by still more massive doses, or whether dilutions taken for a greater length of time would have given a better result, must remain concealed. We may be permitted to remark, however, that the proving of drugs, is no such light matter as it might appear to be. Both the idiosyncrasy of the prover and of the drug play so important a part, that a successful proving is often an entirely accidental windfall for the susceptible prover, while the boldest experimenter, with the very best will and the greatest sacrifices, if unsusceptible, can only obtain a scanty and one-sided result.*

* The opponents of Homœopathy have made use of this diversity of result as an argument against the system. They forget, however, in so doing, that the susceptibility for drugs (drug-diseases) runs parallel with the susceptibility for natural diseases; and that, if there be constitutions which a particular disease, for example, variola or syphilis,

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PROFESSOR HUSTON ON HOMŒOPATHY.

BY C. NEIDHARD, M. D.

In 1843 I communicated to the Examiner a short review of Prof. Dunglison's Introductory on the subject of "Medical Delusions," including Homœopathy. Since then the Professors of this college have been comparatively silent. The "humbug par excellence," having, however, in the mean time not gone down, as they predicted it would, but rather increased in power and magnitude, the Professor of Materia Medica in Jefferson College, Dr. Robert Huston has been appointed, or has appointed himself, to the task of amusing the medical class of 1847, with an account of his views on Homœopathy.

As this performance possesses neither literary nor scientific value, some might, perhaps, consider it best to pass it by unnoticed, like other articles of similar cast. But as in the eyes of many, the dicta of a Professor, however absurd and unreasonable, carry greater weight than those of a commom practitioner, however well informed, I have thought it might subserve the interests of Homœopathy, if some notice were taken of it in the Examiner, and its errors exposed.

In the first place, I must mention as the most striking phenomenon in this lecture, that it is from beginning to end almost entirely filled with the subject of Homœopathy, a sufficient sign, that the Professor deems it important enough to give the medical class a warning to beware of it. This certainly denotes progress, and is a good sign of the times.

After conceding the uncertainty of the old school of medicine, he says: "Has not the glorious uncertainty of law become the commonest of proverbs? Would any one stop all legislation, abrogate all courts, put an end to all trials of jury, and live without law in the world?" then passing over to theology, he argues thus. "Have the teachings of the doctors, the denunciations of the pulpit, or the prayers of the pious, banished sin from the world, and made Christianity every where abound? Shall we then turn

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cannot infect, there must also be constitutions which cannot be rendered sick by a particular drug. It is only after repeated trials on individuals of the most diverse constitutions, and under the most varied influences and conditions, that we can obtain a true notion of the character of a remedy, resting on sure and broad foundations.

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our backs upon the preacher, stop our ears to his exhortations and reproof, and close our houses of worship?" etc. He naturally concludes, "Shall we, because there is room for improvement, abolish the old system of medicine, because it is not perfect?* But to the honor of the profession of law, be it said," he continues, "that the instances, in which any of its distinguished members countenance quackery in medicine are comparatively rare. But not so with clergymen, from whom the violent impostors and pretenders in medicine have received their most efficient support." We war not with law or theology, our business here is with medicine, and especially Homœopathy, or what the lecturer has deemed fit to proclaim as such. This may be summed up under the three following heads, and in his own words. If they are very contradictory, the fault will not be laid upon us.

1. "Homœopathy is one of the intangible, incalculable, and altogether subtile conceits, that ever and anon come teeming forth from the mind of imaginative Germany."

2. "Its principle, 'like cures like,' is neither altogether new nor altogether true." (This would imply, that there is *some* novelty as well as truth in it. Why has Dr. H. omitted to state the degree of novelty and truth contained therein? Ah, this would have led him to a discussion of some of its merits, which even he, prejudiced as he is, could not overloook.)

3 "Of all the humbugs, to use a familiar term, that ever were invented to test the powers of credulity, homœopathy, in practice is the greatest, because it is the least."(!!)

To verify these sweeping condemnations, he furnishes us with some fragmentary pieces from homœopathic writings which, in this unconnected form will of course appear to the uninitiated as very absurd statements. We solemnly protest against such a dishonest proceeding, which above all we deem derogatory to the dignity of a public teacher, whose bounden duty would seem to us to examine all new doctrines with candor and liberality, however singular they may appear at first sight. The many enlightened friends of homœopathy will not be cudgelled into submission by being called "proprietors of strayed intellect," by a man of very small intellect himself. The public will demand a close and searching scrutiny into this matter.

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* He strenously protests against the title of Dr. of the old system or old school, and avers, that it is also improving and progressing. Yes, their prescriptions are of late more simple. But we ask him, has not Homœopathy also had the greatest influence in producing this salutary reform?

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Entirely devoid of truth are his garbled extracts about the homœopathic dilutions. The homœopathic school has never restricted itself to the 30th dilution, but given all of them from the lowest to the highest, according to the individuality of the case.

The quotation from Dr. Black, that (the surface of the) 3d trituration was equal to two square miles, is from the distinguished mathematician, Professor Dobler, of Prague, and can be proved mathematically. Instead of scoffing at this explanation, which is only one of the many given by the Homœopathists, the consultation of some mathematician, or the faithful calculation of the surface of a particle of matter thus divided would have shown him, that the absurdity lay not in homœopathy, but in his own understanding.

There is certainly a "spirit" in homœopathy, which to fetter will be somewhat difficult; a spirit, that even a mightier man than our Professor will be unable to quell. We refer here to the allusion made in some homœopathic writings, and which Dr. H. quotes, to the spirit or dynamic force which is developed by the homœopathic manipulation. He seems to think, that his imperfect extracts from some of the most extraordinary doctrines of homœopathy, will suffice to show its absurdity to the medical class. He may yet be mistaken. Many an inquiring mind may by his statement be drawn to a further investigation of the subject, and the progress of homœopathy be indirectly aided by this allopathic professor. But is it not so always? The greatest discoveries of mankind have thus been fostered by their worst enemies, by drawing the attention of the public towards them. All this shows an overruling Providence, that ever uses the weapons of enemies for the benefit of its creatures.

As usual, this Introductory has some anecdotes and stories, in order to enliven the monotonous tone of the rest. One of them is about a Florentine quack, who gave a countryman six pills, which were to enable him to find his lost ass, the pills beginning to operate, obliged him to retire into the wood, where he found his ass. This story he relates with a view to illustrate the fallacy of judgment of homœopathists with regard to the operation of homœopathic medicines. But I ask him, have not the allœopathic pills, which he has swallowed all his lifetime, alone assisted him in his homœopathic investigations? Like the countryman, mentioned above, he has only found an ass, which he has mistaken for homœopathy.

Page 14, he says: "It is one of the dogmas of the Homœo-

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pathists, that a medicine operates only when the peculiar susceptibility to its action is developed by disease, and yet, in the face of the assumption, their knowledge of the properties of medicines, of all kinds, is professed to be derived from experiments made upon themselves and others, while in perfect health." Yes, sir, this is perfectly correct, and you would have found it to be so also, had you taken the trouble of examining the homœopathic writings more closely. You would have learned then, that the medicines proved on the healthy, are used in the common doses. It is only on peculiarly susceptible constitutions, otherwise in perfect health, that the dilutions exert their power.

This view of the subject, although the most natural, he was reluctant to adopt, for the reason, that it would have deprived him of the means of amusing the medical class with an anecdote of a little boy Tommy, who had swallowed some homœopathic powders, which his mother had left on the mantelpiece.

The climax of the ridiculous nonsense, which he conceives is contained in homœopathy, he extracts from Dr. Hering's Domestic Physician, carefully selecting such passages as are apparently in conflict with the preconceived opinions of the public. It is that part of homœopathy, which regards in the correspondence of medicine and disease also the *mental characteristics*. This so important part, of which the majority of old school physicians have hardly an idea, must always appear "ridiculous nonsense" to a Professor, who has the most material notions of diseases.

It will be remembered that Dr. Forbes, of London, in his Allopathy, Homœopathy and Young Physic, conceded to homœopathy an equality in results with the common practice, proved by the hospital reports of Dr. Fleischman of Vienna. Professor H., however, on the authority of a certain Dr. Balfour, who followed Fleischman through his wards during several months at the instance of Dr. Forbes, maintains, that "Fleischman's cases are all very well selected, carefully excluding the old and infirm, and such as in any way present an unfavorable prospect of a natural cure," etc. He calls this a trick—a sheer piece of knavery. But has not Dr. Forbes distinctly stated, that his report of homœopathy was made up after receiving information from this gentleman? Where then is the trick, the knavery? in Dr. Fleischman or Dr. Huston? How low must that allopathic practice have sunk, which seeks by such means to question the authenticity of Fleischman's accurate and faithful hospital reports? Of this Dr. Balfour the British Journal of Homœopathy of Jan-

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uary last speaks, "as obviously a very young man in this kind of observation, as well as in years, who has shown his anxiety to distinguish himself as a partisan in the cause of what he conceives to be legitimate medicine, but is still too much under the influence of names and authorities to be an impartial observer." The same Journal adds, "In conclusion it is evident, from the statements even of those opposed to us, that there exists an hospital, where many thousands of patients have been treated without any of the hitherto conceived necessary allopathic appliances; and after carefully sifting these statements, nothing has been elicited to shake our confidence in what we deem the fact, that the result is more favorable than the average in allopathic hospitals; whence flows the inevitable conclusion, that *homœopathy is a positive means of treatment, or that allopathy is worse than nothing.*" Sapienti sat.

The Introductory winds up with the following apostrophe: "Yes, gentlemen, the water cure! the water cure! will soon fill the mouths and the ears of the people, and some Shifferdecker in Philadelphia, like Hahnemann at Koethen, or Priesnitz at Graefenberg, will become the Juggernaut of the multitude."

With more justice and propriety we might say: Yes, gentlemen, the cleaning out system! the cleaning out system! has always filled the mouths and ears of the people. Some Robert Huston of Philadelphia, like Morrison in London, or Brandreth in New-York, has always been the Juggernaut of the multitude. The three persons mentioned by us, have as much or more affinity to each other, as those he alludes to, and we have more reason to put them in the same category, than he has.

He finally protests against the "popular error of considering medicine to be a system of doctrines and rules, which are handed down unchanged from instructor to pupil, like a religious creed." "Certainly," he continues, "there is no lack of freedom of opinion or latitude of doctrine in the medical profession:" and again, "Every one is at liberty to construct his own articles of faith, and to shape his practice accordingly." If this is his true view of the case, why does he assail men, regularly educated physicjans, when they shape their practice in the direction of homœopathy? He seems to permit progress in every direction but this, and this I conceive to be the "ridiculous nonsense" of his lecture.

A time will come, when also justice will be done to homœopathists, as is already the case with many enlightened laymen. Their doctrines have produced a profound impression upon many

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an honest physician. Its maxims, to the superficial observer apparently so strange, will be found in accordance with the general laws of harmony of the universe. Our studies and investigations on this subject embolden us to declare, that there never was an old or new system of medicine, but only one law of cure, the homœopathic, existing from time immemorial in the world, followed instinctively by laymen and physicians, but only fully established by Hahnemann and his disciples. The proceedings instituted by the ancient and modern physicians for the cure of diseases, were the result of no universal natural law of cure, but originated in their own minds and partook of their imperfect human nature.

The present lecture again gives signal evidence of the lamentable state of the old practice of medicine. It speaks in the most vague manner of the progress of medicine, but you do not get a glimpse of what it consists in, neither does he dare to vindicate the sacra anchora of the prevailing practice. He does not defend his opium and calomel prescriptions, his bleedings, leeches, and blisters, for these, after all, are his main dependences, and of these the public are sufficiently disgusted. In what direction alone, then, can true progress in practical medicine consist? In the direction of homœopathy, in the discovery of specifics for correct forms of disease, in the more minute examinations of the individual phenomena of disease, in trials of medicines on the healthy, etc. etc., and all the other maxims of the new doctrine. All this has been indirectly conceded by Dr. Forbes, who, if he proceed one step farther, will be hurled by his brethren from his proud allopathic eminence, and his high authority in ancient medicine disavowed.

ANACARDIUM.

By John C. Peters, M. D.

The fruit of the Malacca nut contains an acrid, caustic, thick and black fluid, which was formerly used to touch fungous excrescences, syphilitic ulcers, to arouse sluggish eruptions, modify ulcers, and to calm the pains in carious teeth, &c.

The almond of the fruit is white and sweet, and furnishes an oil employed against the itch and vermin.

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The whole dried fruit is ranked among the spicy stimulants or aromatics, and has been compared to cubebs, &c.

THERAPEUTICAL USES.

1. *In Loss of Memory.*

From the Archiv we learn that Anacardium was prized as a valuable remedy in want of activity of the brain, torpor of the senses, but especially in weakness of the memory, by Avicenna, Mesnes, Serapion, Mathiolus, Paulus von Ægina, Zarutus von Portugal, Schenk von Graefenberg, Macasius, J. Rajus, Vogel, &c. Whence the confectio anacardina was also styled by the ancients the confectio sapientum; but as it often failed when used improperly or injudiciously, it received the name of confectio stultorum from Caspar Hoffman. We would naturally expect that a spicy or aromatic remedy would exert a stimulating effect upon the brain, hence we are inclined to admit that it produces primitively an unusual excitation of the imagination, with great flow of ideas, gradually passing over into perfect absence of thought and stupidity. It also causes great acuteness of the memory, with vivid recollection of the slightest long forgotten things, and great flow of ideas; also, great activity of the mind, and inclination to astute investigations, followed however by aching pains in the forehead, temples, and occiput, by a bruised feeling in the brain, and by stomach-ache. Increase of the imagination, especially in the afternoon, with constant flow of fresh ideas, which he must follow; excitement in the evening, with many new projects, followed by gradual dullness, and finally by perfect stupor.

The above effects render Anarcardium more homœopathic to the complaints of intellectual and literary men than Nux vomica; especially as we will see that it causes weakness of digestion, flatulence, profound hypochondriacal humor, derangement of the liver, marked by aching in the region of the liver, light colored stools, bitter taste, and dryness of the mouth, &c.

The above state of simple intellectual excitement is apt to pass over into one of joyous excitation, followed by laughing at serious things, with gravity about laughable occurrences, which forms the first step towards Anacardium-insanity, to which we will refer again anon, contenting ourselves with remarking here, that according to M. Moreau, a peculiar state of general exhilaration or joyous excitement, closely analogous to that above described, is often a precursor of insanity, showing, even in the

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mode of access of the disordered mental state, a close correspondence between the effect of Anacardium and those of natural insanity.

Many homœopathists, however, maintain that the primitive effects of Anacardium upon the brain are depressing; Stapf on the other hand, states that it produces quite opposite effects, viz. torpor, and increase of mental activity, and that both are primary, alternate results; Franz experienced a very decided increase of memory and mental activity within one hour and a half after taking the remedy; Hahnemann experienced both exaltation and depression of the cerebral functions, but does not tell us which occurred first; hence, although we incline to agree with Stapf that those symptoms which point to depression of the mental activities are far more valuable, in a therapeutical point of view, than those which point to exaltation, we venture to hint, that such prescribing may not be strictly homœopathic. However this may be, Anacardium is said to produce dullness of mind, difficulty of recollecting, absence of ideas, forgetting one's thoughts, weakness of understanding, dullness of comprehension, such excessive weakness of memory as almost to prevent talking; forgetting every thing immediately, especially names, &c.

2. *In Hypochondria and Insanity.*

According to Noack it is most suitable for nervous-bilious dry constitutions, for those of a melancholic-choleric temperament, and for irritable hypochondriacs. He regards it as homœopathic to melancholia simplex; anoia et abulia melancholica, melancholia moria, misanthropica, athymia, melancholia hypochondriaca. It causes great indifference for every thing, loss of feeling and sympathy; dark, irritable state of the mind, with inclination to go out into the free air; anxious fearfulness and great irritability, moroseness, dejection, taciturnity, great touchiness against offence, and vehement contradiction; anxiety about every occupation, driving one out of bed as soon as he awakes; internal anguish with scruples about every trifle, and fearfulness about the future, with presentiment of approaching misfortune, and supposition that he is surrounded by enemies,—as if the neighborhood were suspicious,—as if some one were coming behind him,—as if a bier were in the next room, upon which lay a friend's or his own corpse; anthropophobia; fits of anxiety and care every evening; loss of courage; despair, with a silly, helpless state of mind, and extremely awkward, sluggish movements; want of

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self-reliance, feeling of separation from the whole world, and as if one's own soul were departed from the still living body, fear of death, want of moral feelings, accursed, godless, inhuman, hard-hearted state of mind.

Until the time of Hahnemann, the effects of drugs upon the mental and moral powers were but little studied; now, however, this subject is exciting much attention; opium is said to stimulate the sexual desires, the intellectual powers and imagination; belladonna is said to dull the mental faculties; hyosciamus to cause impetuosity, moroseness, jealousy, violence, and ill manners. Digitalis diminishes, while stramonium and saffron increase the sexual desires; agaricus causes courage; the cannabis indica, according to Dr. Moreau, in a small dose, causes moderate exhilaration of spirits, and tendency to unseasonable laughter, that kind of restlessness which is usually termed the fidgets, and a variety of feelings common to hypochondriacs, such as sensation as if the brain were boiling over, and lifting the cranial arch like the lid of a tea-kettle; sensation as if the heart moved with unusual violence, while on examination its impulse and sounds are not found to have undergone any increase; also illusions, as to time and space, minutes seem hours and hours are prolonged into years; while a patient is taking a few steps, it seems to him as if he had walked two or three hours; and objects present the same aspect as if viewed through the large end of an opera glass, i. e. diminished in apparent size, and therefore suggesting the idea of increased distance. This erroneous perception of space is also one of the effects of agaricus muscarius, for a person under its influence is said to take a jump or a stride sufficient to clear the trunk of a tree, when he only wishes to step over a straw or small stick. The melancholy produced by iodine is one of the most frequent of its effects; according to Gardner the anxiety and dejection of mind caused by it are great and permanent. It differs from hypochondria, as the patient worries himself with the present and never thinks of the future, and describes it as a feeling of dejection and utter despair, which is harder to endure than the most severe pains, so that they complain of it even when thus suffering. In further proof that each drug, besides its general and special action upon the organs of the body, exerts at the same time an action upon the mental faculties, we would add that, according to M. Otto, ammonia, musk, castor, wine, and ether, increase the powers of imagination and perception; the empyreumatic oils cause peevishness, melancholy, and visions; phosphorus acts upon the generative functions, so also does iodine, and at the same time induces

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sadness; cantharides excites and camphor diminishes the sexual propensities; arsenic causes lowness and depression of spirits and melancholy; gold elevates and excites the spirits and causes hope; mercury induces increased mental sensitiveness, morbid sensibility, and inaptitude for all active occupation; and carbonic acid gas causes placidity of mind; the muriate of morphia is apt to excite inordinate loquacity, Dr. Gregory, noticed this effect in numerous patients, and then tried the experiment upon himself with a similar result. He felt, he tells us, while under its operation an invincible desire to speak, and possessed, moreover, an unusual fluency of language; hence he recommends it to those who may be called upon to address public assemblies, and who have not sufficient confidence in their own unassisted powers; conium dulls and deadens the intellect, &c.. Hence M. Otto truly says: If the psychological action of drugs were better known, medical men might be able to vary their exhibition according to the characters and mental peculiarities of their patients; the treatment of the different kinds of monomaniacal derangement also might be much improved; and he even suggests it as not improbable that a favorable change might be wrought on certain vicious and perverse dispositions, which unfortunately resist all attempts at reformation, whether in the way of admonition, reproof, or even of correction. After this digression, we proceed to the consideration of the use of Anacardium in:

3. *Weakness of Digestion and Flatulence in Hypochondriacs.*

It causes loss of appetite—weak digestion; hypochondriacal humor after eating, with heat of face, aching and tension in the epigastrium, stomach, and abdomen, with nausea, urging to stool, disinclination to labor, great lassitude, and irresistible inclination to sleep.

4. It has been recommended by Noack in amblyopia amaurotica, in chronic difficulty of hearing, in loss of smell, and paralysis of the tongue, as well as in weakness of disgestion, all of which diseases are usually regarded as depending on debility; and hence the inference might be drawn that Anacardium exerts a direct depressing effect upon these organs, rather than an exciting one; but it is easy to prove the contrary, thus:

a) It causes great sensibility of the eyes to light; a halo is seen around the candle at night; illusory flickering, and at times brighter, at others duller burning of the light; glittering before the eyes, &c., all of which symptoms point to that morbid sen-

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sibility of the eyes, which in common parlance is termed weakness of sight, and which most physicians mistake for incipient amaurosis; but the power of vision is not impaired, the minutest objects can be seen as clearly as in the natural state of the eye, but when the organ has been exerted for a few minutes, or perhaps for one-half, or one or two hours, it becomes tired, objects appear dull and confused, or distorted, a sense of weariness comes on in the part, with redness and some lachrymation, the eyelids drop, and a painful pressure is felt on the brow; the uneasiness goes off by rest, and the patient almost invariably feels better after a good night's rest and sleep (Lawrence).—The Anacardium also produces contraction of the pupils, short-sightedness, dimness of the eyes in the evening, as if they were filled with water, forcing one to wink frequently; weakness and dimness of the eyes, network and spots before them, &c.

The same supposition holds good of the anosmia, or loss of smell produced by Anacardium; this is not simple weakness of the olfactory nerves, but proceeds from a state of irritation and catarrh.

5. *Anacardium-Catarrh.*

It causes dryness and obstruction of the nose; tedious coryza and mucous flow; frequent sneezing, followed by the most violent flowing catarrh, with lachrymation; distressing coryza, with catarrhal fever, coldness of the head, icy-coldness of the hands and feet, followed by heat, sensation of contraction of the tendons of the legs, cramps in the calves, and uneasiness about the heart; loss of smell, feverish restlessness, as in catarrh, with lassitude and trembling; dullness of the mind, such as occurs in coryza; almost entire abolition of the sense of smell; sneezing, obstruction of the nose, dry catarrh; constant smell like that of pigeon or chicken-dung before the nose, or of sponge, &c.

6. *In chronic Difficulty of Hearing.*

The Anacardium variety is also of an inflammatory or catarrhal nature. It causes painful swelling of the external ear; earache, dull shocks and stitches in the ears; violent stitches in the ears, with drawing and rending in them; ulcer-pains in the ears, especially when swallowing, and biting the teeth together; itching in the ears, and a flow of brownish matter from them; obstruction of the ears and hardness of hearing; hearing at some times weak, at others unusually acute.

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7. *In Paralysis of the Tongue.*

In like manner we would explain the occurrence of weakness of the tongue, caused by Anacardium; it causes inflammation of the mouth and throat, and consequent heaviness of the tongue and sense of swelling of it and difficult speech; many words are pronounced with difficulty, as if from heaviness of the tongue.

8. *In Syphilis.*

The fluid from the fruit, when mixed with sugar and oil, had an old school reputation against syphilis; it is possible that it may be somewhat homœopathic against some kinds of secondary disease, at least it causes eruptions somewhat similar to syphilitic acne, viz., lentil-sized boils upon the scalp; hard pimples upon the face and nose, which then fill with pus and become sore, and are surrounded with red areolæ (acne rosacea, syphilitic acne); pustules with red areolæ on the right angle of the nose, on the septum, and in the right nostril; hard red pustules on the forehead and nose; suppuration and painfulness of the chin; pustules on the hand with red areolæ, which burst and effuse red serum at first, then white lymph, after which a scab forms, under which pus accumulates.

It may also be homœopathic to the scaly form of syphilitic eruption; it causes white scaly eruption upon the cheek and upper lip; rough, scraped, scaly skin about the mouth.

9. *Against Warts.*

Noack recommends it against warts, but there is no proof whatever of its homœopathicity to this affection, and it was long before used in domestic and old school practice; hence it should not be advised or used by homœopathists, especially as they have at least one remedy against warts, of the homœopathicity of which not a doubt can be raised. A gardener, shortly after strewing some soot over a garden to destroy slugs, observed an extensive growth of warts make its appearance upon his wrists. According to Sir Astley Cooper, the chimney sweepers' or soot-cancer makes its first appearance in the shape of a wart, which seems broken on its surface, and upon this an incrustation forms, which if removed leaves the papillæ on the surface of the wart excoriated, red, and broken. According to Mr. Earle, soot-cancer commences with warty excrescences which may remain stationary for years, and are found principally upon the

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scrotum and groins. In one case of soot-cancer, a stout healthy man had a small wart on the right side of the scrotum; this was snipped off, but the disease returned quickly, and finally the whole scrotum presented one wart-like, or granular and cauliflower-like excrescence; the scrotum was excited, and four months after, another small wart made its appearance almost in the same situation, and in two years more the disease was as extensive and bad as ever.

10. *In Asthma.*

According to the testimony of Garcias ab Horto, the East Indians make frequent use of it in asthma. It causes shortness of breath, especially after eating, and difficult respiration; oppression of the chest, with internal anxiety and heat, driving one out into the open air, and relieved by weeping; hysterical spasms of the chest terminating by a fit of crying; fit of suffocation, attended with cough, which is excited by tickling in the trachea. It would seem most homœopathic to asthma occurring in nervous, hysterical, or hypochondriacal subjects, and excited by a catarrhal state of the chest, or occurring after the suppression of eruptions.

11. *In Hooping-Cough.*

It causes wearing cough, with vomiting of food; night cough, with scraping in the throat; or evening cough while in bed, so violent as to force the blood to the head; concussive cough, like hooping-cough, especially at night, brought on by the least talking, and attended with rattling of mucus in the air-tubes.

A FEW WORDS ON HIGH POTENCIES,

FROM THE GERMAN.

BY D. C. BECKER, M. D.

(Concluded from page 331 of the Examiner.)

Case 1.

"A young man had been intemperate for several years, and had considerably impaired his constitution. His powers of digestion were nearly destroyed, and the support of his system was daily diminishing.

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His father then applied to me. He promised me to watch closely that the patient should have no alcoholic drinks during the treatment. I sent three doses of Lachesis, with instructions that one dose should be administered every ten days. The first was $\frac{1}{200}$, the second $\frac{1}{100}$, the third $\frac{1}{50}$. A year afterwards, I heard that after having taken three doses the patient lost all his fondness for spirituous liquors."

Above all Dr. G. ought to have told us in this case what enemy he intended to meet by lachesis. It certainly could not be impaired digestion, because this was merely a sequel of the abuse of spirituous drinks, and would have ceased of itself as soon as its cause had been removed. Was it the passion for drink? That is no disease, but a bad habit, which becomes a passion, and ultimately a vice. But this cannot be cured by medicine any more than the vice of gambling, improvidence, or avarice. If the father had from thirty to forty days (duration of treatment) carefully kept all intoxicating beverage from his son's reach, as he promised Dr. G., we believe that *thereby alone*, without the aid of lachesis, he would for this time have curbed his son's love for drink.

A distinguished writer, Rademacher, says: "Both in old and modern times many attempts have been made to cure mankind of drunkenness, yet I know of but one remedy, which is more certain than all the old and new clap-traps, and that is the *iron will* to abstain from all intoxicating beverages." "Again," says the same writer, "there are periodical drunkards, who abstain for weeks and months, but when the paroxysm for drinking comes on, they drink themselves out of their senses. Such a paroxysm lasts for months, till nature returns to its normal condition."

In this point of view we regard this case in the same light as No. 1, in the preceding criticisms.

Case 2.

H., four years old, weakly, was very loose in his bowels, after having previously been frequently costive. The fæces were not exactly thin and watery, but quite consistent, yet they escaped involuntarily, without his power to retain them, particularly when standing, and engaged in his plays. One dose of Colocynth $\frac{1}{300}$, obviated this difficulty entirely. In a few days he had a perfect control of his sphincter."

Piorry says that in a chronic state involuntary defecation is chiefly the consequence of a paralysis of the lower portion of the spine, and always a bad symptom. Another author remarks, "The paralysis of the sphincter occurs almost always as a symptom of a generally paralytic state."

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But since Dr. G. alludes to *standing* and *child's play*, the relaxed state of the sphincter cannot be ascribed in this case to a disease of the spine, and as he says nothing about the origin and duration of the disease, nothing about the remedies administered, and tells us of the previous history merely the constipation, it appears to us that the latter itself was the entire cause.

The hard and knotty fæces are certainly able, in passing through the rectum slowly and with great exertion of the abdominal muscles, to press so violently on the sphincter, and to dilate it so much as to arrest its irritability, and cause a paralysis, especially if this occurs frequently or constantly.

Should his diagnosis, however, be correct, we consider the treatment any thing but justifiable.

Watzke has demonstrated, that the direct influence on muscular fibre does not lie within the range of Colocynth. This drug can neither destroy nor restore the lost excitability of a muscle. Should G. ascribe the exciting cause to an abnormal condition of the sacral plexus of nerves, he should find analogies to it in the homœopathic literature, but in those cases the lower attenuations effected the cure. G. ought likewise to have stated, whether the complaint was permanent or temporary—either in consequence of unusual emotions of the mind, succeeding to fear, fright, anger, &c. Finally, it would have been well for him to have stated whether the cure was permanent.

Case 3.

"A delicate child had scalded its face and arms. I gave it Causticum $\frac{1}{400}$, and ordered an external application of Causticum 3, diluted with water. The scalded parts began to heal. But by advice of neighbors the parents had been induced to interfere with my treatment, by the use of house-remedies. The consequence was, that when the case was submitted to me again, I found some deep ulcers in a bad condition, the child (two years) had lost the use of its legs, could hardly sit up, but would sink together. The muscles of the extremities too appeared flabby and in a numb condition. I prescribed Cocculus $\frac{1}{400}$, to be repeated in a week.—Very little improvement. Causticum $\frac{1}{400}$. In a fortnight after, the ulcers had cicatrized, and the muscles were sound."

As far as we know, Dr. Goullon, in Weimar, was the first who employed Causticum internally and externally in cases of burns. But this distinguished physician says on that subject, "I use Causticum in all burns, without exception, internally (3—X in water every three to four hours) and externally (I—II in

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water, a linen rag dipped into it and frequently renewed). This treatment has proved rapidly successful in old sores of months' standing.

The motto of Hahnemann, "Imitate it, but imitate it well," is a very dangerous one in its practical application to high potencies. Suppose a Dr. H. was to apply to the same remedy in the same attenuation in a similar case, and without success, Dr. G. might maintain, that the remedy was improperly chosen. But this would not be the case if the treatment were directed more towards the specific cause, instead of the form of disease. In such cases the drug is indicated under all circumstances. For instance, Arnica in injuries, Causticum in burns, Ignatia against the consequences of grief, &c. And such cases only, are the proper ones for comparison between the various degrees of attenuation.

We ask, now, What judicious practitioner will prefer diluting Causticum, with Dr. Gross, into eternity, when Dr. Goullon assures him, that in all cases he has succeeded with Caust. 3—X?

Case 4.

"A lady, who has been treated by an allopathic physician, for phthisis pulmonum, and ultimately given up as incurable, consulted me by letter. The symptoms, threatening a speedy dissolution, were copious expectoration of pus, slow fever, colliquative night sweats, disposition to diarrhœa, great emaciation, and loss of strength.

"I sent one dose Silicea $_{200}$, and one dose Calcarea $_{800}$, with instructions that the former should be taken at once, and the latter six weeks after.

"The result exceeded all my anticipations. The entire state of things had improved. But the cough had latterly become more frequent, the expectoration, formerly sweetish, had assumed a saltish taste. The sputa on remaining a while in the vessel became thin and saffron-yellow. It amounted during the day to about half a teacup. I gave Lycopodium $_{300}$, upon which the expectoration diminished. All functions became normal. The pulse remained irritable. Lying on the left side provoked inclination to cough.

"Phosph. $_{300}$. Three weeks after, cough and expectoration had disappeared.

"Sudden changes of weather still cause hoarseness and a dry cough. Two doses Arnica $_{200}$. The reply to the latter has not reached yet."

Dr. Gross had not seen the patient in the commencement of his treatment, and therefore cannot tell us whether the allopathic physician meant by phthisis pulmonum the phthisis tuberculosa or the phthisis pituitosa (blennorrhœa pulmonum). The

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symptoms enumerated above apply equally to both forms of phthisis, though the pathological condition is different.

Dr. Gross sends a patient, whose death is daily expected, a dose of Silicea, and fixes the duration of its effect at *six weeks*, not shorter nor longer. He likewise knows beforehand that after the termination of those six weeks, the symptoms will be grouped in such a manner as to be covered by Calcarea, and no other remedy. Truly, we ought not to be surprised at miraculous cures made by a physician, endowed with such prophetic inspiration! But, it is very doubtful whether common-place physicians like ourselves, who, according to Hahnemann's directions, have always to find out the indication from existing symptoms, will ever be able to conquer such severe diseases with such ethereal weapons in so short a time.

Dr. G. himself, however, portrays the cure as being incomplete. But since we have had ample opportunities to observe, that after apparent improvement in the course of tuberculosis fatal relapses take place, we will for the present suspend our judgment on this important case, until we shall have been apprized of its final result.

Case 8.

"A lady who had borne several children, but who two years previously had been obliged to submit to the application of the forceps, retained a fissure in the perinæum, and was again expecting her confinement. During the exercise of her domestic duties, two days previously, she had had a rupture of the membranes, and a consequent escape of the liquor amnii. The nurse found the os uteri but partially dilated, and thought, owing to the absence of labor-pains, the birth might be very much protracted. In this state of the case, my advice and assistance were sought.

"I sent Secale cornutum $_{2}\frac{1}{0}$, with directions that it should be dissolved in three tablespoons of water, and a spoonful of the solution be given every hour. Next day I heard that there had been no occasion to give more than one dose, because after the first the labor-pains had come on violently and brought into the world a strong girl, feet foremost. In this case, then, Secale showed its efficacy in the 200th attenuation."

Dr. G. did not see the lying-in woman, and reports merely what he had heard from the nurse. We do not know what occurred between the rupture of the membranes and the time he was applied to, and he does not himself appear to know.

Was the woman in bed during the last two days, or did she

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continue to the last to attend to her domestic affairs? Had she had severe labor-pains? and which? Of all this we know nothing.

The mere assertion of the nurse, that the os was but little dilated, and that she thought the process of parturition might be protracted, appeared to Dr. G. to indicate Secale. And further, because after the administration of one spoonful of the solution a strong girl, foot presentation, had been born, Dr. G. is convinced of the efficacy of the 200th potency. We call this jumping at conclusions, as much so as if another was to conclude that the strength of the child and the footling presentation were the consequence of the 200th potency.

Do we not frequently meet with women who have lost their waters partially several days before delivery, and yet see the latter proceed without any untoward circumstances?

Do we not also find on all occasions when there is an intermission of labor-pains, that the nurses are very busy in giving the patient all conceivable remedies to bring on the pains again, and then, on delivery, generally ascribe this to the last remedy they have given?

This case proves nothing in favor of the high potencies, and we most emphatically reject the general assumption that Secale is indicated in all cases of absence of labor-pains.

We hold that Secale is indicated in absence of labor-pains if this absence has deen preceded by great and ineffectual attempts at delivery.

Case 15.

"A young woman told me on the 12th July that for the last three days she had felt very chilly; now she felt hot, and pains in all her limbs. Since the previous day, she had had an eruption of small red pimples on her arms, causing much burning and pricking. The small-pox was in the neighborhood.

"Next day the small-pox appeared fully developed on her arms, and in other parts of the body I found newly formed pimples.

"I gave Variolin $\frac{1}{3\,0\,0}$.

"On the 14th suppuration commenced on the arms, on the legs, and on the face. On the 15th the patient was quite ill, complained of great thirst, burning heat, watery diarrhœa after every drink, and pain in all her limbs. The face was swelled and distorted by innumerable pustules. *Variolin* $\frac{1}{3\,0\,0}$. On the 18th again Variolin $\frac{1}{3\,0\,0}$. On the 19th partial formation of scabs. On the 26th, when I saw her last, it was all healed, the skin was merely spotted, without any other marks."

Gross extends his theory of high potencies to isopathy, to which we can hardly object, because if his theory is right, iso-

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pathy is equally so, and there can be no objection to practical application.

But it is a very different thing with arguing proofs. Gross says nothing about the constitution of the patient, nor even whether she had previously been vaccinated or not. We cannot tell from the symptoms as given by him, whether it was a case of small-pox or varioloids. But suppose it had been a case of real small-pox, we all know that a fortnight is the usual time (G. saw the patient from 12th to 26th July) for small-pox to be cured by the vis medicatrix naturæ and proper diet, without the aid of art.

We will assume that Variolin had worked the cure, and shall then find that G.'s treatment bears no comparison with that of Dr. Mayrhoffer, who in an epidemic of malignant small-pox cured his patients in a much shorter time than G. did his, by Acon. and Ac. mur. On comparing this treatment again with that of Tietze, who cured his patients in a very short time with Variolin $\frac{1}{4}$, we come to the conclusion, that more can be accomplished with isopathic remedies in low dilutions than with high potencies.

If Dr. Gross, in his quality of inventor and first representative of high potencies, can furnish no better proof for his theory than the cases he has cited, then we consider as satisfactorily demonstrated, by the remarks made by us upon every individual case, that not one of G.'s cases can stand a severe criticism, and that they are therefore unfit testimony.

All we have said, on the cases brought forward in proof by Gross, applies equally to those cited by Stapf, Rummel and others.

All this, however, does not induce us to condemn the high potencies *de toto*. We have sent for those prepared by Petters and Defau, and have supplied some of our friends with them. The experiments made thus far are insufficient to be worth reporting. In a year from this, however, we shall in this journal communicate the experience of ourselves and friends.

Dr. Fleischmann, says: The invention of high potencies, I regard as a blow to homœopathy. If the results are favorable, I regret that the truth should appear in a fool's-cap, so as to repulse many; if imaginary, I regret again that ghosts should rise to frighten every body.

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LETTER OF DR. NUNEZ TO DR. BŒNNINGHAUSEN.

It is now a year since I last wrote you. Since then, my views and my practice have undergone great changes. You are right, my friend; the recently introduced highest potencies are a real progress in homœopathy, and I believe that this progress would be still more considerable, if we instituted our provings upon the healthy body with the 200th potencies. You were right when you assured me that the results which we can obtain with the highest potencies, are truly marvellous. I am even disposed to believe, that the potencies beyond the 300th are more efficacious than the 200th. Of the 300th, I have seen marked exacerbations.

In a former communication I told you of a marked exacerbation occasioned by Calc. 200, in a case of chronic myetitis, of which the dean of the faculty of Barcelone was suffering. Since then I have seen a still more marked exacerbation from *Calc.* 700 in a case of acne rosacea. With doses of *Sepia* 1200, I have effected a complete cure of chronic constipation of 40 years' standing in a lady of 76 years, which had become so inveterate that the patient never had a natural evacuation and had to use mechanical application whenever she wished to have relief; the rectum seemed to be entirely inactive. Since then I have cured several other cases of chronic constipation with *Sepia* 1200, and have never failed in any case of that kind. *Arsenic* 1200 has cured spitting of blood, accompanied with suppression of the menses, obstinate constipation, burning pain in the stomach and between the scapulæ, all these symptoms of four years' standing; one dose was sufficient to remove them. *Nux* 200 and *Sulphur* 1200 in alternation have cured two cases of tuberculous phthisis at the stage of softening. One single dose of *Ledum* 300 has cured a case of sciatica which had been treated allopathically for six months without the least benefit.* One dose of *Sulphur* 1200 has cured a diarrhœa of eighteen months' standing, attended with phthisicky symptoms; the diarrhœa had been occasioned by the abuse of copaiva in a case of blennorrhœa from the urethra. One

* With Colocynthis 200 in water, one dose a day, I have cured a case of nervous sciatica of nine months' standing, in a military man who had been treated all this time with the usual allopathic means without benefit. I cured him in six days.—STAPF.

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dose of *Cantharides* 200 was sufficient to cure a chronic catarrh of the bladder with hæmaturia and spasmodic closing of the neck of the bladder. Three doses of *Silicea* 1000 have cured a swelling of the size of a plum in a scrofulous child of 11 years, occasioned by the closing of an issue; the swelling was seated between the fifth and sixth ribs on the right side below the nipple, and had been treated with hydriodate of potash and poultices, by which the swelling had become larger. One dose of *Crocus* 200 arrested at once a violent hemorrhage from the uterus. *Veratrum* 300, two doses, has cured a case of diabetes with violent thirst, obliging the patient to hold a moist sponge in his mouth constantly. Three cases of *Natrum mur.* 300 have cured two cases of chronic gonorrhœa, one of fourteen months and the other of three years' standing.

Aggravations occasioned by the 200th dynamizations are sometimes very violent and obstinate. I gave *Natr. mur.* 200 for a chronic gleet, and a complete retention of urine was occasioned by it, which yielded to *Conium.** In another case of that kind, I gave *Sulphur* 200, four days in succession; on the fifth, a frightful inflammation of the bladder set in. One dose of *Calcarea* 700 occasioned a violent congestion of blood to the head and heart, with suffocative fits and loss of consciousness. To a nervous lady, who had been in the habit of being bled, I gave one pellet of *Arsenic* 300; one hour after taking it, violent retching set in, and half an hour after the menses made their appearance, 18 days before the regular period. This lady had always been regular, and had never had an attack of retching.

I have founded a homœopathic society in Madrid, consisting of twenty-four members. The President of the State-Ministry has appointed me his physician; and it has been determined, that lectures on homœopathy shall be given in the University. The lectures will commence on the 1st of January. Send me your Therapeutic Pocket-Book as soon as it is out.

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* A robust female, of 30 years, took Natr. mur. 400 for a chronic leucorrhœa, after which it became excessively violent and corrosive. After the aggravation had lasted four days, the leucorrhœa disappeared entirely and permanently.—STAPF.

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A FEW WORDS ON THE USE OF COLD WATER INJECTIONS IN UTERINE HEMORRHAGE.

Uterine hemorrhage is either active or passive. In old school practice, one of the principal means to arrest uterine hemorrhage, is the external and internal application of cold water and ice. In our humble opinion this is not homœopathic treatment, nor is it the best treatment.

Uterine hemorrhage is a prominent symptom, or rather the most prominent symptom of an internal malady, a malady affecting the whole organism. It may result either from a violent commotion of the circulation, or from a debilitated and cachectic state of the system, want of contraction of the uterus, etc. In the former case the circulation should be quieted by appropriate remedies, in the latter, the organism should be strengthened or the contractile power of the womb restored.

Active hemorrhage from the womb is the result of a violent congestion of blood to that organ, which is met by our principal specific for all similar conditions, *Aconite*. Old school practitioners apply ice, but with what result? Let us inquire. Ice will produce contraction of the ruptured vessels, and will in most cases stop the hemorrhage; but will ice remove the morbid impulse of the circulation? By no means; ice will force the torrent to set in in an opposite direction and produce a congestion in some other organ, the liver, spleen, lungs, heart, brain. In passive hemorrhage, ice is likewise used, but Heaven knows with how little effect, and certainly contrary to all sound reasoning. A few cases will be sufficient to illustrate our remarks.

A lady had miscarried 18 times in the course of 25 years. Every miscarriage was accompanied with active profuse hemorrhage, which was arrested by means of cold applications. After the last miscarriage the hemorrhage lasted three hours in spite of the ice. When the lady recovered her senses, the liver, spleen, heart and brain were violently congested, and remained so for several years. It may be said without any exaggeration, that the liver and spleen were puffed up to three times their natural size, the heart felt heavy as a stone, the head giddy, swimming, with obscuration of sight, inability to think or to recollect things, numbness and excessive painfulness of the scalp, icy-coldness, heaviness and lameness of the extremities, collapse of pulse, etc. *Aconite* and *Digitalis* removed the symptoms entirely.

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The doctor kept telling this lady all the time that she was nervous.

2. In another lady the arrest of active hemorrhage by ice caused a violent congestion of blood to the chest. The chest felt weak and hollow, with stitches flying through the lungs. Every sudden surprise made her heart palpitate, caused a deadly paleness of the face, fainting weakness, icy-cold hands, etc. *Aconite* cured her. This lady too was said to be nervous.

3. A lady had been affected with metrorrhagia for a fortnight. Her abdomen was tumefied, tender, with constant bearing-down pains. One dose of Nux 30 helped her at once.

4. A lady miscarried, with profuse hemorrhage from debility, and was treated with cold applications by a distinguished surgeon of this city for six weeks, without any relief; she was going to her grave visibly. The sensation was as if the lower parts would press through the uterus. The hemorrhage was completely and permanently arrested in two days by means of Belladonna, alternated with China on account of the debility.

5. A lady was taken with active flooding after parturition, for which cold applications were used for 12 hours in succession without the slightest relief. The bed, and floor about the bed were literally deluged with blood, and the patient was, so to say, buried in ice. On examination the uterus was found distended and fluctuating. One grain of *Secale cornutum* at once produced contraction and immediate cessation of the hemorrhage. The lady recovered entirely with a little treatment and care.

6. A lady miscarried and was taken with flooding. When we were called the hemorrhage had lasted three days and nights. The lady was scarcely conscious, cold, pulse wiry, upward of 160, hippocratic countenance. This patient was treated for two hours with cold injections and the tincture of Cinnamon without any effect; the coagula continued to come off in great quantity, and the patient was sinking with fearful rapidity. *Ipec.* 187, four pellets, acted upon her like a charm, according to her own expression, and two doses of Arsenic 200 restored her strength so completely that she considered herself sufficiently well to do without any medicine. However, we left her a phial of Arsenic 30, with directions to take a pellet every night for some time to come.

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DR. JOSLIN'S ESSAY ON HOMŒOPATHY.

We have this very moment been favored with a copy of this Essay, which we most heartily commend to the attention of our readers. The first part of the essay is devoted to a common sense reasoning on the superiority of the homœopathic practice over any other method of healing. This part is full of brilliant and amusing hits, illustrating the foolish opposition to our art on the part of the old school practitioners. The latter part of the essay embodies a theory of potentization and solution. This part of the essay is undoubtedly deserving of the closest attention; it is strictly scientific and argumentative. Dr. Joslin, who is a man of high attainments in the domain of the physical sciences, has availed himself, and we think successfully, of his chemical experience for the purpose of demonstrating the *reality* of the power of comminuted doses. We cannot give an abstract of his reasoning on that point; the scientific part of the discourse is too concise to admit of any abstract being offered; our readers should read the discourse with great care and attention.

We may take this opportunity of expressing our doubts as to the possibility of explaining the action of potentized drugs by the known physical laws. There is a species of chemistry which is beyond the crucible and the microscope, the chemistry of the *aromal fluids*, or the *spiritual forces of nature*; it is upon these forces essentially that the remedial properties of our drugs, and in fact the properties of any created substance, depend. We will explain our views on that subject in a forthcoming publication, entitled, "The Popular Organon of Homœopathy."

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THE PROVING OF THUJA.

BY CARL MAYRHÖFER, M. D., TRANSLATED FROM THE ÖST. ZEIT., p. 380, BY .....*

P.

Dr. Ferdinand Zeiner, forty-two years old, of a delicate constitution and phlegmatico-sanguineous temperament, healthy from childhood (except the usual diseases of that period), for the last two years frequently troubled with hæmorrhoidal affections, instituted four experiments upon himself with Thuja. (It was his first essay with drugs).

First proving with the tincture in small doses.

Without making any alteration in his ordinary mode of life, Z. took, in the forenoon of the 7th of November, 1844, at about 9 o'clock (two hours after breakfast, *café au lait*), one drop of the tincture in water.

Immediately after the dose he experienced vertigo, soon disappearing, *scraping in the throat*, slight griping above the navel, sticking in the right temple, numbness of his left foot, and feeling of weakness in it in walking up and down the room; *feeling of coldness* over the whole body. One hour after, the griping drew from the umbilical region toward the right groin, and occasioned there flying, often-returning pressing. The vertigo, scraping in the throat, and lame feeling in the left foot still continued.

Two hours after having taken the dose, the vertigo and griping in the abdomen disappeared in the open air, but single stitches were repeatedly felt in the right groin and between the sacrum and anus. Frequent urination in the course of the day.

At six in the evening, inflation of the abdomen for an hour, which disappeared by eructations. An hour afterwards (ten hours after taking the drug) *single stitches* were perceived *in the anus* alternating with burning in the prepuce.

At about nine in the evening, the prover's smell† was ex-

* The translator is a student of homœopathy in Dr. Gray's office. I had commenced the translation of Dr. Mayrhöfer's essay, but was so crowded with engagements that I found it impossible to complete the translation to my satisfaction, and therefore requested the author, who is an excellent German scholar, to continue and ultimately complete the work. This translation is satisfactory in every respect, accurate, clear, and complete.—HEMPEL.

† Olfactus an transpiratio?—M.

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ceedingly, almost intolerably, increased, so as to become perceptible to those about him. The night's rest was good; but soon after waking, *the stitches in the anus* came on, and the *biting in the prepuce* also was troublesome for an hour.

On the 8th at nine in the forenoon, Z. took another drop in water: some minutes after, griping above the navel, and during the first hour; *single stitches* in the right *frontal eminence*, scraping in the chest, forcing him to cough, and *quivering* in the upper *eyelid*, *pressing* in the right *side of the forehead*, *biting* on the upper surface of the *glans* and in the prepuce, feeling of weariness in the sole of the left foot when seated.

At ten in the forenoon, another drop. Soon after, he felt *shivering in the back;* the *feeling of weariness* in the left foot, the *sticking* in the *right side of the forehead* and the griping in the abdomen continued. Towards eleven, *drawing in the left testicle* and frequent eructations of wind. At two in the afternoon (four hours after the dose) *the itching on the prepuce* became almost intolerable. Z. also observed during the day *frequent urgency to urinate* with passage of a copious urine. Stools regular on both days.

On the 9th at nine in the forenoon, Z. took four drops on sugar—soon after, slight vertigo, griping about the navel, *itchings on the prepuce*, scraping in the trachea, obliging him to cough; with *quivering* of the right upper *eyelid*, *burning* in the *left eye* near the internal canthus, compelling him to rub it, *weakness of the eyes*, *single fine stitches in the temples*, *feeling of weakness* in the left *foot* when seated, pressing in the small of the back. At two in the afternoon, increased secretion of sweet saliva (lasting five hours), *drawing in the left testicle*, *urgency to urinate*, *with copious urine*, *swelling of the cervical glands*, pains in the small of the back. On the following day, on which nothing was taken, he felt in the forenoon, the pains in the small of the back, *quivering in the right eyelid* and *feeling of weakness in the left foot;* in the evening, *burning in the orifice of the urethra* and *frequent stitches in the anus.*

On the 11th, eight drops of the tincture. Soon after taking the dose, quivering again in the right upper eyelid, *feeling of coldness with numbness of the left foot*, *solitary stitches* in the shoulders, and *frequent chills over the whole body.* At three in the afternoon, a *general chill; drawing in the left testicle*, in the left thumb, *in the occiput; sticking in the temples*, in the right *side of the forehead* and in the *left knee;* pressing in the sacral region.

On the 12th, Z. took nothing. In the evening; sticking

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now in the left knee, now in the head, and now in the elbow and finger joints; then, *general debility* with such *weakness in the feet* that he thought he should fall. On the following day, he observed a *red spot* on the inner *surface of the prepuce* which itched violently and disappeared after twenty-four hours.

Second proving with the third dilution. (5: 95).

After omitting the drug for fourteen days, Z. commenced again on the 25th of November, at nine in the forenoon, by taking four drops of the third dilution on sugar. Soon after, he perceived griping about the navel, *itchings* on the right *knee*, on the left shoulder, on the *scrotum* and divers other places, and *burning on the inner surface of the prepuce.* After an hour: violent *drawing in the testicles;* vertigo; *greatly increased secretion of saliva* (of a metallic taste) lasting two hours, with *swelling of the salivary glands.* In the afternoon from four to five o'clock, *sticking pains in the glands of the groin.* During the whole day, *slight chills* in a warm room; *increased urgency to urinate.*

On the 27th at nine, A. M., eight drops of the third. After a quarter of an hour, *itchings on the prepuce*, griping about the navel, *sticking in the left side of the forehead*, pressings on the right shoulder; *weakness of the eyes*, particularly observable when writing. After an hour and a half, renewed *increase of saliva* (of an acid taste) during two hours; *sticking* in the *anus* and violent stitches in the left side of the chest which frequently returned throughout the day; continual slight *chills and increased secretion of urine.*

On the 28th, the symptoms of the preceding day were repeated after taking twelve drops of the same dilution.

Third proving with the tincture in strong doses.

Z. ceased taking the drug for eighteen days, and commenced again on the 17th December by taking fifteen drops of the undiluted tincture, whereupon, in the course of the day, he observed the following symptoms: *pressing in the forehead, frequent stitches in the frontal eminences, sticking, at one time* in the right, at another in the left side of *the chest*, griping about the navel; *scraping in the throat, intolerable biting in the anus, drawing in the left testicle, obscuration of the eyes* while writing.

18th. Twenty drops of the tincture. Soon after the exhibition of the dose: staggering while walking in the air; *press-*

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ing in the middle of the forehead, sticking in both frontal eminences (lasting the whole day and continually increasing); *general debility with weakness in the feet;* sticking in the shoulders and in the right knee; *stitches in the region of the groins,* often repeated during the day, with the feeling *as if the inguinal glands were swollen; intolerable itching in the anus* lasting almost the entire day; *hasty urgency to urinate, with copious urine.*

19th. No medicine. On awaking, *sticking pain in the left frontal eminence,* as well as violent *pressing between the shoulders,* which feeling had entirely disappeared eight days before; frequent twitching in the middle finger of the right hand. The *itching in the anus* appeared but seldom.

20th. After twenty-five drops; dull confusion in the head, weakness in the feet when walking; sticking in the forehead and in different parts of the body, especially in the shoulders, arms, and legs; in the evening, *spitting of much saliva.* The *itching in the anus* is almost gone; the *tongue and palate* are very sore.

On the following three days, no dose.

21st. On awaking, sticking in the left shoulder, and in the course of the day *flying stitches in the glans;* there was also *an increased secretion of saliva.*

22d and 23d. The whole of the symptoms gradually disappeared, and the prover no longer perceived the troublesome *itching in the anus* which had so much annoyed him during the whole continuance of the experiment.*

24th. Z. took thirty drops. During the first two succeeding hours: *burning and itching in the anus,* griping about the navel, painful constriction in the hypogastrium, weakness in the feet, cracking in the knee-joints, *drawing* in the *right groin* and *pressing in the renal region.* At six in the evening: *pressing in the forehead, sticking in the left frontal eminence,* acid taste with *increased secretion of saliva,* swelling of one (which?—M.) of the cervical glands (tonsils?—M.)

Fourth proving with the 12th dilution. (10: 90).

1844, January 4th. After having rested ten days, Z. took ten drops of the 12th dilution. During the first two hours, he observed during rest: transient griping about the navel, *repeated stitches about the anus,* which continued to increase in vio-

* In my case this itching in the anus was the most durable symptom, and disappeared after the lapse of several weeks.—M.

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lence during the day, eructations of wind, sticking in the left side of the chest, on the left scapula and right temple, *failure of the eyes* when reading, transitory *chill* over the whole body with cold hands in a heated room, pressing, at one time in the right, at another in the left arm, drawing in the fingers, pain (of what sort?—M.) in the nape of the neck, stitches in the left side of the forehead, *numbness of the sole of the left foot* while sitting, *crawling in the toes*, extraordinary weakness in the left foot when going out, slight reeling, pains in the small of the back, and *increased secretion of saliva.*

At four in the afternoon, *drawing in the left testicle* with feeling of weight in it, *urgency to urinate with copious passing of water.*

During the three following days, no medicine being taken, frequent pressing in the forehead, sticking pains in the frontal eminences and temples, pressing between the shoulders.

8th. Fifteen drops of the 12th. During the first two hours: *pressing and sticking in the forehead, sticking in the shoulders, stitches in the anus, numbness of the left foot, drawing in the left testicle, feeling in the testicles as if they moved*, drawing in the fingers and pressing in the left upper arm.

All these symptoms disappeared while walking in the open air.

9th. No dose. *Frequent itching on the glans and prepuce* alternating with *stitches in the anus*, and *the urgency to urinate was frequent and hasty.*

12th. The proving was concluded by taking twenty-five drops of the 12th dilution. Thereupon he observed: *pressing* in the middle of *the forehead*, sticking pain in the right axilla, *increased salivary secretion*, which lasted all day, *stitches in the inguinal glands, itching in the anus, flying stitches in the glans, weakness of the eyes* when reading, pressing between the shoulders and *crawling* in the toes of the left foot which were painful in treading. In the afternoon, while seated, feeling of lameness in the left foot. At seven in the evening, when walking, uncommonly violent stitch between *the coccyx and the anus.*

13th. After waking, sticking in the left side of the chest, lasting all day.

On discontinuing the drug, all the abnormal manifestations disappeared.

Dr. Zeiner accompanies his beautiful and instructive proving with the remark, that during its whole period, the sexual desire was completely asleep; and he further made the obser-

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vation, in accordance with the experience of other provers, that the greater part of the drug-symptoms were most clearly developed during rest.

Q.

The boldest and most indefatigable prover of Thuja was Prof. von Zlatarovich, who took in 155 days, 42,260 drops of the tincture in large doses. He not only proved it on himself, but also upon a female.

1.

Zlatarovich's proving upon himself.

First proving with increasing doses of the tincture.

1844, Sept. 6th. Z. began his proving with six drops of the tincture, which, as also the succeeding doses, he took in the morning, fasting. On the three following days, he took eight, ten and twelve drops, and experienced no effect. On the 10th, after taking fourteen drops he first perceived, in the evening, a transient *pain in the vertex, as though the bone were repeatedly pierced with a needle near the sagittal suture.*

11th. No effect after sixteen drops.

12th. After eighteen drops, in the evening, *pressing and burning in the hæmorrhoidal vessels* (? ED.) and frequent violent sneezing which returned on the morning of the 13th, after twenty drops.

From the 14th Sept. to the 5th of October inclusive, Z. increased the dose daily by two drops, and observed the following results:

Sept. 14th. After dinner frequent violent sneezing without catarrh (a thing very unusual with him).

15th. In the morning, several times, *short, dry, barking cough.*

16th. In the afternoon and evening, *pressing* in a small spot *under the sternum*, which gradually extended to the scrobiculus.

17th. At night and on waking, several times, *short, interrupted, convulsive cough*, which is excited by an inclination in the larynx and leaves an unpleasant dryness in it. At noon, moderate appetite, head somewhat confused, especially in the forehead, *the throat dry and rough*, and some difficulty in swallowing. In the evening he felt very weak and unwell, with heaviness and tension in the feet, so that walking was painful; the head ached in that part of the anterior half which

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was covered with hair, as though compressed: nevertheless a very good night succeeded.

18th. Of the catarrhal symptoms, nothing is left except a little roughness in the throat. This also disappeared by noon, and he felt well again. Until this point in the experiment, the sexual impulse had been much exalted.

19th. A good night's rest was followed, by a day destitute of symptoms.

20th. On rising, inconsiderable cough and roughness in the throat, disappearing by noon. In its place appeared, troublesome *dryness and sensitiveness of the nose*, as at the commencement of a catarrh. This sensation extended by degrees into the frontal sinuses, and the *eyes* also became sensitive. These catarrhal symptoms disappeared again during the afternoon. At the commencement of dinner, a *jerking constrictive pain* was felt in the hairy portion of the head, and in the afternoon painful *tension* in the right *popliteal space*.

21st. In the forenoon, dull confusion of the head; slight *burning* in the stomach, and in the left external canthus. At two o'clock, violent *burning in the eyes and eyelids;* frequent sneezing. The roots of the hair of the left eyebrow are sensitive when passing the hand over them. At dinner, burning tearing in the whole left side of the face, apparently in the periosteum. After dinner, general uneasiness for a couple of hours. In the evening, *burning pressing pains in the left eye*, on the whole upper surface of the globe, aggravated by the touch; sensitiveness of the left temple; slight *drawing in the nape*, and repeated sticking from the nape to the right ear and axilla. After supper, dull confusion in the head for an hour. On lying down, the right leg was so painful, that he was obliged to place himself on his left side, contrary to his usual habit, and so to lie during the whole night.

For several days the skin on the vertex has been sensitive to the touch, and shines so clearly through the hair, that the prover was afraid he was becoming bald.

22d. On awaking, some headache in the forehead; after rising, the same feeling in the left nostril and right frontal sinus came on that had been experienced two days before; but now the right nostril was entirely free from it. At noon, frequent blowing of thick mucus from the nose. The whole right leg was painful. *Repeated urgency to urinate*, even when there was but little water in the bladder. In the evening, all the morbid symptoms had vanished, except that a little spot upon the vertex, still remained sensitive to the touch.

23d. No symptoms; two liquid stools which were evacu-

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ated, soon after taking the dose, seem to have prevented their appearance.

24th. He had no other symptoms to-day, than a slight *burning in the hæmorrhoidal* vessels, and copious secretion of mucus from the nose.

25th. In the morning, dull confusion in the head, especially in the region of the forehead and temples, which an hour after began to increase and extended over the vertex, but subsequently entirely disappeared; *slight burning in the canthi.* After dinner, *general weariness* with slight headache in the forehead. In the evening, *tension in the extensor muscles* of the extremities and trunk, now here, now there; subsequently heat.

26th. Normal feelings during the day. In the evening, *drawing* and *sensation of weariness, with apparent dullness of feeling* in the limbs, especially in the upper and in the forearm near the wrist; *dull confusion in the head,* especially in *the forehead.* Intellectual exertion soon fatigues; tobacco smoke is not as agreeable as at other times; frequent yawning.

27th. In the afternoon, slight dullness in the head; no other symptom.

28th. In the night, frequent cough with raising of thick mucus. After dinner, general uneasiness, restlessness, swelling of the abdomen, feeling as if beaten in the upper arms. In the evening, good health. The cough ceased in the day.

29th. On awaking, *the glans is very sensitive;* drawing back the prepuce causes pain; frequent *dry hacking cough.* Soon after the dose, general uneasiness and stretching of the limbs. In the evening, frequent violent sneezing and tickling in the nose.

30th. In the morning, frequent sneezing again, with increased secretion of mucus accompanied with *frequent dry hacking cough.*

Oct. 1st. During the day, frequent *dry hacking cough:* in the forenoon, when walking, some *itching in the hæmorrhoidal vessels:* after dinner, strong inflation of the abdomen.

2d. In the forenoon, violent *itching and pressing in the hæmorrhoidal vein.*

3d. In the forenoon, *on the upper lip, an elevated, red, violently itching spot,* which compelled him to scratch, but was gone without a trace at the expiration of an hour.

4th. In the morning, frequent violent sneezing, in a short time ends with dullness of the head: after dinner, extraordinary distention of the abdomen, which seriously embarrassed the respiration.

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5th. No symptoms after taking sixty-four drops.

6th. Seventy drops. At night, *much flatulence* was discharged. In the morning, sneezing; burning in the skin of the right lower leg. After breakfast, frequent eructations with the taste of Thuja; *frequent short, dry, interrupted cough; slight chill.* In the evening, sudden, cramp-like *twitching of the under lip*, and here and there *in circumscribed spots on the skin.*

From the 7th, to the last of October, he increased the dose daily by five drops, so that on the first day he took 75, and on the last 195 drops. The following were the results:

7th. No symptoms.

8th. An hour after the dose, *squeezing in the hæmorrhoids.*

9th. No symptoms.

10th. *Discharge of bloody slime from the anus*, as well by day as at night; frequent discharges of *flatulence*, which were always accompanied by some moisture. Towards evening, uncommonly strong appetite, which must be appeased; subsequently, *pressing in the hæmorrhoidal vein* when seated.

11th. No symptom worthy of mention appeared during the whole day, but in the evening, after much conversation in company, a pressing headache began in the forehead, extended gradually towards the vertex, and slowly disappeared.

12th. One hundred drops. Slight drawing behind the right ear, and some constriction in the ear; ache in the forehead, which, after an hour, merged in the sensation as if a wedge were driven into the temple. Sneezing did not aggravate the headache, but motion of the head and swallowing had that effect. At the same time, cheerful disposition and inclination to intellectual exertion. In the night very good sleep.

13th. Uncommonly comfortable and easy.

14th. In the morning, transitory *burning in the anus.* At noon, tension in the whole right leg, while walking. After dinner, slight sensitiveness in the skin under the hair on the forehead, where the cool air at the open window was exclusively felt.

15th. At noon, frequent violent sneezing.

16th and 17th. No symptoms.

18th. In the afternoon, burning and pressing in the stomach, lasting several hours.

19th. Several small, painless *tubercles* appeared *upon the head.* The hair comes off on the vertex.

20th. In the morning, raising of tough mucus: in the forenoon, *itching in the perinæum* when seated; slight drawing over the left eyebrow.

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21st. At noon, great dullness of the head; drawing in both thighs. In the evening, pressing in the forehead and in the right temple.

22d. On waking, ache in the forehead, which disappeared again after half an hour. After a normal evacuation, *burning and drawing in of the anus.* At noon, drawing in the lumbar muscles, while walking.

23d. At noon, drawing again in the loins. The lumbar vertebræ are somewhat painful when leaning forward in sitting: *feeling of soreness in the perinæum.*

24th. No symptom during the whole day.

25th. In the morning, on rising, drawing from the loins towards the nates. After dinner, very violent *itching in the anus.*

26th. At night, increased secretion of mucus in the larynx and trachea.

27th. Slight pressure in the hæmorrhoidal vein; in the evening slight drawing in the left upper arm.

28th. *Drawing, now here, now there;* but worse on the *left side of the body; burning* in the external *canthi.*

29th. In the morning, slight heat and redness, with burning on the upper lip; drawing in the left arm.

30th. On awaking, frequent violent sneezing with tickling in the nose, and *burning in the eyes,* as though a catarrh were coming on; drawing in the right forearm.

31st. In the forenoon, *itching and burning in the hæmorrhoidal vessels,* when walking; *internal shuddering and feeling of cold* the whole afternoon, with dull confusion in the head. *In the sulcus inter nates, a clammy moisture is secreted.*

Nov. 1st. The dose was omitted; *drawing* in the limbs, particularly in the right forearm, aggravated by movement of the limb; *coldness* in the hands and feet; drawing in the whole right leg; pressing in the left side of the chest.

2d. Two hundred drops. In the morning, *rouhgness in the throat* with continual inclination to hawk, and with a deeper tone of the voice, which disappeared again after breakfast. At noon, *burning and feeling of soreness in the anus.*

3d. Two hundred and five drops. In the forenoon, drawing in the right elbow joint, and *squeezing in the hæmorrhoidal vessels.*

4th. No dose. At noon, violent *itching and squeezing in the hæmorrhoids; tension in the extensors* of the right arm, when writing. In the afternoon, normal state. In the evening, a renewal of the violent squeezing and pressing in the

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anus: *very earnest frame of mind*, in spite of the cheerfulness of those around him; a small *suppurating boil* on the back.

5th. Two hundred and ten drops. At noon, *drawing* in the right lower leg, especially on the outside toward the ankle, and in the right hand, particularly in the thumb. In the afternoon, from four to six o'clock, severe burning and pressing in the stomach.

6th. Two hundred and twenty drops. In the forenoon, burning in the stomach for an hour. At noon, flying stitches on the right side near the sternum for a quarter of an hour.

These stitches had this peculiarity, that instead of being aggravated, they disappeared on taking a deep inspiration, and returned again only on the succeeding expiration. In addition, slight tension in the extensors of the right hand, and drawing in the dorsum of the right ring finger.

7th. Two hundred and twenty-five drops; and he daily increased the dose by five drops until—and including the 16th of November, when he took two hundred and seventy drops—in the morning, *discharge of copious, inodorous flatulence*, and a hard unsatisfactory stool; tension in the bend of the right elbow, when writing.

8th. In the forenoon, pressing and burning in the stomach for an hour. At noon, he perceived a sensation as if the lower part of the thorax were surrounded with a bandage, which sensation disappeared in the afternoon. In the evening, a very disagreeable pressing in the region of the heart, confined to a small spot.

9th. Immediately after the dose, rolling and rumbling in the intestines; afterwards, frequent *dry hacking cough; tension* in the right hand, especially in the thumb; the same in the outside of the right thigh, extending into the knee; particularly when walking and bending. In the forenoon, the right knee joint was painful when seated, but the pain soon disappeared, and was succeeded by a feeling of cold in the knee. A transitory pressing and tension in the heart then came on, and on its ceasing the coldness in the knee was again perceived, but in a less degree. All these symptoms were gone at noon. At half-past one, on closing the eyes, a feeling of vertigo, (an obscure designation! M.) The power of thought was increased, but rather for analytical than synthetical reasoning.

10th. Half an hour after the dose, rumbling in the intestines, with slight griping; frequent coughing up of mucus.

11th. In the morning, *roughness in the throat*, and frequent

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hackicg cough. The *upper lip* somewhat swollen and *burns.* After a loose stool, *burning in the anus.* After dinner, dull confusion of the head; afterwards *heart-burn.* These symptoms disappeared in the open air. In the evening, slight *burning in the eyes.*

12th. In the morning he felt well. At noon, dull confusion of the head; *burning and dryness* in the right *nostril,* up as high as the frontal sinuses; *slight burning in the right eye;* oppression in the lower part of the thorax; frequent short, *dry hacking cough.* He feels much better in the open air, than in the room: the indefinite feeling of uneasiness, however, cannot be exactly described. In the evening, the knees were painful while walking, as though bruised; the weight of the body seems to him to be too great for the legs.

13th. *At night he urinated more than usual.* In the morning, after rising, frequent raising of mucus, leaving behind a feeling of sensitiveness in the larynx: *discharge of copious inodorous flatulence.* After dinner, drawing behind the right ear, with single *stitches in the mastoid process of the temporal bone.* When this symptom had disappeared, as it soon did, short accesses of *crawling and running* on the left side *of the occipital bone* came on; also *burning and pressing in both eyes.*

14th. On waking, aching in the forehead, which disappeared by degrees after rising, but returned at about half-past nine, became heavy and pressing, and only vanished after four hours; after which, pressure on the vertex, as if a weight lay there. To these were added, weariness and uneasiness in the whole body, *coolness and flying shudderings over the back.* At noon, his food had a disagreeable bitter-sharp, after-taste, which was recognized, especially at the root of the tongue and in the fauces. The uneasiness became less after dinner, but even black coffee left behind an unpleasant after-taste.

15th. Soon after the dose, constriction about the navel and slight pressing in the lower border of the right orbit, soon going off; but the orbital edge remained sensitive to the touch, and to the closing of the eye for a quarter of an hour. Afterwards, tension in the right ankle while walking. The respiration is not altogether free; the thorax is raised during inspiration, with somewhat more difficulty than usual, and a short, *dry hacking cough* frequently comes on: a *violently itching tubercle* makes its appearance *upon the upper lip,* near the right corner of the mouth.

16th. An hour after the dose, oppression of the chest; troublesome breathing, drawing between the shoulders, burn-

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ing and pressing in the stomach, increased by movment and by speaking. Constriction of the anus after two papescent stools. Also, heaviness and lameness in the right arm, and slight *drawing* in the right *masseter*, with *confluence of saliva into the mouth.*

From the 17th to, and including the 29th, he ceased to take the Thuja, and observed the following symptom :

17th. In the night, *drawing* in the right *upper arm, axilla, and shoulder*, preventing his lying on that side. In the morning, these pains became intolerable, but by warmly wrapping up the painful parts, they gradually diminished, and finally entirely disappeared, leaving behind a feeling of lameness in the arm. At about half-past nine, the tearing in the shoulders and upper arm returned in *frequent short attacks.* After dinner, general weariness and universal feeling of discomfort. In the evening he feels generally better, but the pain in the shoulder is again very violent, and in the right arm; especially in the forearm there is a condition bordering upon *paralysis, with feeling of coldness.* Before going to sleep, *very gloomy frame of mind.*

18th. At ten in the forenoon the pain in the arm came on in short accesses, was sensible until noon, but was milder than the day before, and ceased entirely in the afternoon. The mind became more cheerful again.

19th. The pain in the arm is entirely gone and Z. feels well the whole day.

20th. At noon, slight drawing in the small of the back, *drawing* in the left *groin* and frequently *a dry hacking cough.* No trace of the pain in the arm.

21st. Burning in the whole nose, which seems to feel as if swollen, with increased sensitiveness on the septum, on which several *vesicles* are to be seen. The *upper lip* is likewise sensitive. In the afternoon these symptoms have disappeared again, and the vesicles on the nose are dried up. On the two following days no drug symptoms were observed.

24th. In the evening of the 24th and the whole forenoon of the 25th an exceedingly troublesome headache came on, which was seated in the upper surface of the vertex, was heavy and pressing, and from time to time in single stitches and thrusts. The brain was apparently unaffected but the *head* externally was somewhat *sensitive* to the touch, as were also the eyes. Cool air diminished the pain; when it was at the worst, he supported his face in the concavity of his hand and for some time rubbed his forehead, eyes and face, whereupon the pain entirely disappeared, and in the evening his head was wholly

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free, except a slight crawling and running on the places before indicated. On the four following days, no symptoms.

Second proving with massive doses of the tincture.

Nov. 30th. 300 drops of the tincture. Two hours after, slight *tearing in the nape*, and distension of the abdomen by flatulence.

Dec. 1st. No medicine was taken. In the morning he remarked upon the forehead over the root of the nose, a *red streak*, which did not itch nor present any appearance of roughness, and was visible until noon. He had a feeling over the crest of the right ilium, on touching it, as if it had been bruised. At noon, a transient drawing came on in the first joint of the right thumb which was, in consequence, somewhat less easily moved.

2d. 300 drops. In the forenoon, the *red streak* was again visible upon the forehead but no other especial symptom manifested itself the whole day.

3d and 4th. 300 and 310 drops produced no effect.

5th. 320 drops. There appeared *in the sulcus between the nates* not far from the *anus a painful spot* which felt sore for an hour.

6th. No drug and no symptoms.

7th. 330 drops. Immediately after the dose, flying stitches in different parts of the body; frequent *dry hacking cough;* afterwards, raising of mucus; in the afternoon, pressing and burning in the stomach for an hour; then, transient feeling of pressure in the heart and single stitches in the lower half of the right side of the chest. Not the slightest trace is perceptible of the hæmorrhoidial congestion, which was usual during the earlier days of the experiment, and this the prover considers as a curative effect of the drug.

8th. No dose and no symptoms.

9th. 340 drops. In the afternoon, slight burning and pressing in the stomach during an hour. In the evening *general weariness* and uneasiness with dull confusion of the head; drawing in the joints of the hands and feet. The abdomen was incommoded by a supper which was eaten with appetite.

10th and 11th. 350 and 370 drops produced no symptoms.

12th. 380 drops. In the morning, a small painless, non-itching *tubercle near the raphé of the perinæum*; the eyes on waking were glued with mucus. In the afternoon, relaxation and sleepiness. In the evening, inclination for exertion; fre-

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quent slight *drawing from mastoid process* of the right temporal bone downwards. Afterwards single, flying, very painful *stitches from the depth of the right ear* through *the external ear*. An hour after, when the ear-ache had disappeared, a violent stitch drove suddenly through the left temple as if an awl had been forcibly thrust into the brain. The pain lasted but a few seconds, but the spot remained for some time sensitive.

13th. 400 drops. In the morning, feeling of fullness with stoppage in the the right ear and frequent sneezing, which returned in the evening, soon after which pretty violent *itching in both nostrils* toward the point of the nose, after a short continuance of which, *a secretion of a thin mucus* followed. Also, sticking drawing on the inner surface of the left forearm toward the wrist, nausea mounting from the abdomen, with slight inclination to vomit.

Z. made the observation that the morbid feelings produced by Thuja are aggravated during rest; and by remaining quiet, symptoms are developed which disappear on motion in the open air.

14th. No dose and no further symptoms except tension in the flexor surface of the right leg and inflation of the abdomen.

15th. 410 drops. In the afternoon a couple of transient tearings in the tendinous expansion on the right side of the neck.

16th. 420 drops. During the whole forenoon a very unpleasant sensation of cold, the external temperature being + 1 R. (34° F.). The *hands and feet are icy cold* and the skin of the hands is purple. At noon, before dinner, for a little while *oppression of the chest with difficult respiration* and slight pain in the anterior surface of the stomach on taking a deep inspiration, as though from external pressure. In the afternoon and evening, these symptoms were gone.

17th. No drug and no symptoms.

18th. 430 drops. Soon after the dose, tenesmus and a hard, very unsatisfactory stool; also, transitory pressure on the chest; *burning in the urethra* toward the bulbus for several minutes; in the evening, something of a headache; at night, quiet sleep.

19th. No dose. On awaking, violent pressing headache in the vertex, which went off by degrees, while he was still in bed, and disappeared entirely after he had arisen. Breakfast did not relish; and while at table, slight vomiturition; to which were added general weariness and faintness, with pressure and sensitiveness in the eyes.

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20th. 450 drops. Not a trace of a symptom appeared in the forenoon; even the eructations with the taste of Thuja, which formerly were sure to come soon after taking the drug, did not once manifest themselves. In the afternoon, general malaise, with a sensation as if a chill were about to come on. Dull confusion of the head for half an hour.

21st. No dose. In the morning, *burning in the skin of the right lower leg*; slight sensitiveness in the vertex and right eye; *feeling of soreness at the anus*. Towards noon, throbbings in the right temple, when rising from a seat. Dinner was devoured with a veritable canine appetite. Two hours afterwards, general malaise, frequent *dry hacking cough*, and slight dullness of the head. In the evening, *pressure* in the hæmorrhoidal vessels when sitting. A painful inflamed tubercule makes its appearance on the right side of the forehead, and the neck appears as if swelled, so that the loose neckcloth is troublesome. Serenity of mind.

22d. No dose and no symptoms.

23d. Five hundred drops. In the morning, before the dose, short, *dry, troublesome cough*, without the former catarrhal symptoms. After it had gradually become quieted, by taking sugar moistened with water, violent burning in the stomach came on, which lasted until he got up. In the forenoon, uneasiness and sensitiveness to the cold air; at noon, troublesome drawing in the right radius, along the forearm as well as in the hand, into the little finger. In the afternoon, *heart-burn*.

24th. In the afternoon, when passing his water, slight *burning in the urethra*.

25th. In the morning, on walking, he had a violent erection, with strong desire for coition; but notwithstanding the existing voluptuous feeling, there was no emission, which is not usually the case with him. He felt besides, weight and tension in the right leg, and in the evening, *burning in the eyes*, especially in the internal canthi.

26th. He felt perfectly well, and so on the 27th he again took five hundred drops. On awaking (before the dose), the sexual impulse was again active, and on this occasion, with normal results. After the dose, in the forenoon, violent *tension in the right lower leg*, on which the skin was painful as though *sore* and *ulcerated*, which sensation was lessened after dinner. In the afternoon again, a very violent erection. Afterward, a delightful feeling of corporeal well-being and inclination to intellectual labor. In the evening, his foot was entirely without pain, and a *short, dry, interrupted cough* was excited by tobacco smoke.

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28th. Five hundred drops again. In the forenoon, when walking in the open air, slight transient colic. As he came in at night from the cold air into a room, he felt a very violent stitch in the right ear, from the external part inwards to the internal, which compelled him to hold his breath, and left the ear sensitive for a while.

29th. No dose. In the morning another, but less severe attack of the pain in the ear came on. He had a sensation in the ear, as if the free access of the air were prevented, but without the slightest diminution of the hearing. In the forenoon, the ear was well again; but after dinner he had the feeling in it as if the external organ were filled with water, similar to the sensation felt when one dips his head under the surface. *Drawing and tension in the occiput.* The right lower leg was twice painful during the day.

30th. Five hundred drops. Immediately after rising, the pain in the right lower leg again established itself. A spot next to the tibia, near a varicose dilatation, smarted as though it was *sore*, was very *sensitive* to the touch, and the *skin over it* was slightly *reddened*. In the forenoon, burning and pressing in the stomach. At noon, but little appetite. In the afternoon, strong inflation of the abdomen; burning in the stomach; *dry short hacking cough*, and *peevish humour*. In the evening, the right lower leg was again painful upon its upper surface, as if sore.

31st. No dose. On rising, after a very good night's rest, the pain in the leg again made its appearance. The spot which we noticed yesterday, is still sensitive, but no more reddened. The ear, which for some days has not felt altogether right, is now entirely recovered. In the afternoon, *heart-burn*. In the evening he felt well.

1845, Jan. 1st. After a good night's sleep, he awoke with a very severe pressing headache, which, at the commencement, was confined to the vertex: after a while extended to the frontal eminences and eyes, and again returned to the vertex and disappeared. In the morning, he hawked up a thick tenacious mucus from the larynx. Although no Thuja had been taken, still the burning in the right lower leg developed itself in the forenoon, as did also, for a little while, a reminiscence of the earache of the 29th December. In the afternoon, severe burning on the inner side of the right lower leg was again troublesome. In the evening, the head and ear were entirely relieved. But when he especially directs his attention that way, the head and earache threaten to come on again,

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which is not the case when he intentionally fixes his mind upon the other suffering parts.

2d. Five hundred drops. In the forenoon, frequent eructations of wind preceded each time by painful constriction of the stomach. Instead of the right, the left ear has, to-day, a touch of the sticking pain. The right lower leg is still sensitive in the spot upon the tibia, heretofore indicated.

3d. Five hundred drops. Heaviness of the right leg, with *burning* on the whole inner surface of the lower leg. At two, in the afternoon, slight searching and griping about the navel. In the evening, great drowsiness.

4th. No dose. In the morning, after much straining, a very hard evacuation, followed by *pain in the anus*. At the same time, borborygmus, and three hours after, a couple of liquid stools, with subsequent *burning in the anus* (over an hour). Pressing and burning in the stomach, two hours after dinner. The right foot is less painful than yesterday. Several *inflamed tubercles* are visible on the face.

5th. Five hundred drops. In the morning, frequent hawking up of thick mucus. The burning in the right lower leg is drawing nearer to the ankle. After breakfast, a very unpleasant sweetish salt taste, especially in the back part of the mouth and on the root of the tongue. At ten, in the forenoon, pressing and burning in the stomach for a quarter of an hour; afterwards repeated coughing up of mucus. In the evening, heaviness and burning again in the right lower leg. The hinges of the under jaw crack when he yawns; a wholly unusual occurrence.* In the night, the whole right leg up to the hip-joint was painful, heavy, and less movable. The pain was drawing and tensive.

6th. Five hundred drops, after which the dose was omitted for six days. The following were the results: Soon after the drops, *burning in the throat*, obliging him to hawk; then slight raising of thick mucus; *frequent sneezing*, with obstructed nose and *roughness in the throat*. These catarrhal symptoms became more severe in the evening, and were accompanied by aching in the forehead, with weight and pressure in the eyes, and were followed by a very restless night.

7th. According to the report of his wife, he has slept very uneasily, has constantly rolled about in the bed and moaned. On waking, his throat is entirely coated with phlegm, and after hawking, the larynx and trachea are painful. Then, general malaise both of body and mind; his head aches in the

* Compare Dr. Huber's proving.

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forehead, *his eyes burn, his nose is obstructed, and his voice is hoarse.* At noon, he felt better when walking in the open air, but when at rest the aggravation again returned. There was much *flowing from the nose, his feet were cold*, and the general feeling of illness sent him to bed early in the evening. It was, however, a long time before he could get warm, and dullness of the head, frequent cough, stoppage of the nose, and, in short, all the symptoms of a slight catarrhal fever set in.

8th. This morning he felt very uneasy, and very weak, and lay in bed until ten o'clock. Afterwards he felt better. At noon, buzzing in the head, which feels dull, frequent *dry cough, pressure in the hæmorrhoidal vessels;* for the rest, good appetite. After dinner, burning in the stomach lasting until evening, when a short, jerking, dry cough took its place. Nevertheless he was incomparably better in the evening than on the previous day. The febrile symptoms came on again at night, but ceased after midnight, whereupon quiet sleep succeeded, and towards morning perspiration broke out.

9th. During the night burning in the stomach. On awaking, frequent *dry hacking cough*, and somewhat deeper and hoarser voice. At noon, buzzing and roaring in the head, and feeling in the extremities as though they had been bruised. In the evening, troublesome *dryness in the nose* up into the frontal sinuses.

10th. In the night, grumbling and rumbling in the intestines. In the morning, frequent *coughing up of thick mucus.* On rising, *burning in the eyes.* At noon, a great improvement over the preceding day; in the afternoon, at one o'clock, while sitting, *single flying, very painful stitches in the anus*, as if from a fine needle. These stitches returned from time to time, but not in so frequent a succession as at the beginning. Troublesome *dryness in the nose.* After dinner, great inflation of the abdomen, to which was added roaring in the head. On movement in the open air, these symptoms disappeared.

11th. On awaking, frequent *coughing up and blowing from the nose of thick mucus;* subsequently, a return of the troublesome *dryness of the nose with sensitiveness of the eyes.* At eleven in the forenoon, violent *pressure in the hæmorrhoidal vessels.* In the evening, the earlier catarrhal symptoms returned, accompanied by *sensitiveness of the eyes and frequent dry cough.*

12th. No symptoms to-day, except a frequent dry cough.

13th. 500 drops. In the forenoon, *squeezing* and *pressing* at the anus; in the afternoon, he felt well. No cough came on, notwithstanding he smoked and spoke much. After supper,

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flying tearing in separate jerks from the angle of the under jaw to the oshyoides pretty deep in the integuments.

14th. 500 drops. Again troublesome *dryness in the nose* with tickling; then griping in the intestines, burning in the right lower leg, and after a very well relished breakfast, a bitter sharp-salt taste in the mouth, particularly about the root of the tongue. In the forenoon, the dryness and pressure in the nose and frontal sinuses so increased, that he was very much incommoded by it in his lecture. At noon, *a catarrhal flowing came on, and disappeared again entirely in an hour after.* Soon after the pressure on the root of the nose, and copious secretion of mucus returned. The pressure on the root of the nose afterward drew off towards the ears, where it produced tension in the auditory passages and stoppage of the ears. This symptom vanished again, after some time, and in place of it transitory *pressure in the hæmorrhoidal vessels* was perceived. After supper, pressing and burning with occasional painful constriction of the stomach.

15th. 500 drops. Immediately after the dose, *dryness and tension in the nose*, with the feeling as if the *whole mucous membrane were swollen;* the taste in the mouth alluded to yesterday, also appeared. These symptoms disappeared after an hour. At two in the afternoon, emission of sparing and exceedingly dark colored urine, causing *burning in the urethra.*

16th. A mucous cough set in in the morning; no dose was taken, and with this exception no symptoms were perceived.

17th. 500 drops. In the morning, frequent *coughing up of thick mucus.* At noon, while sitting quietly in the room, the familiar troublesome *dry feeling in the nose* appeared, which was much ameliorated in the open air, but returned, though less violently, on coming into the house again. The nose first became moist after he had smoked a cigar. He noticed, in addition, two painless *tubercles* about the size of a hempseed in the *sulcus between the nates* not far from the anus. In the evening he perceived *some painful spots on the head*, at most the size of a penny. The pain seemed to be seated in the bone itself.

18th. 550 drops. On awaking, he felt his head all over, but could not detect yesterday's sensitive spots: the tubercles near the anus were also missing. In the forenoon, frequent *cough*, with *raising of thick mucus;* in the afternoon and evening, short *dry cough.*

19th. 575 drops. Discharge of much loud *inodorous flatulence*, and frequent raising of *thick mucus with slight cough.*

20th. 600 drops. In the morning, frequent violent *sneez-*

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ing, with cough and raising of mucus, and slight *burning of the eyes*. He remarked, on accidentally touching *the raphe of the perinæum, that on the right side it was sharply prominent, and felt thickened as if the skin were indurated*, without being in the least painful. *Violent heartburn* an hour after dinner, lasting a couple of minutes, then lulling for several minutes, then returning, and so coming on in *frequent accesses*. Through the whole day, the *nasal secretion was tolerably copious*, and *thick mucus* was thrown off by *frequent coughing*. Pressure in the stomach was occasioned by roast meat eaten in the evening. He also perceived, here and there, a slight drawing under the skin in the tendinous expansions, and on making certain movements with his head a *creaking* in the *cervical vertebræ*. This symptom had already been frequently observed by the prover without any particular attention being paid to it, but, to-day, it was troublesome in a much greater degree.

21st. No dose. He slept remarkably well during the night. In the morning he coughed up mucus once or twice. Towards noon, a very unpleasant, pressing headache came on in the vertex, which diminished in the afternoon, and disappeared in the evening. At six in the evening, slight burning in the stomach and frequent coughing up of mucus.

22d. 600 drops. Thereafter, frequent slight *coughing up of mucus*. At noon, burning in the lower border of the right nostril, which was sensitive to the touch (for half an hour).

23rd. 620 drops. During the whole forenoon he could not get warm, and twice, while walking, spat blood, the origin of which he supposed to be in the cavity of the mouth, but could not trace it with certainty. In the afternoon, burning and pressing in the stomach (for an hour); in the air, *tearfulness of the eyes*.

24th. 650 drops. In the morning slight *coughing up of mucus;* for the rest, he felt well all the forenoon. Afterward, in the room, a watery, *catarrhal flow* came on, and after dinner, frequent, *short, dry cough*. For a long time, the urine, on emptying the chamber, has been found thick and turbid, with a sediment at the bottom of the vessel.

25th. No dose. In the forenoon, an especial feeling of malaise with general discomfort. He frequently coughed up thick mucus, and had pain in his stomach and heaviness in the right foot.

26th. 700 drops. During the night, excellent sleep. In the morning, immediately after the dose, emission of flatulence both upward and downward. He subsequently observed slight

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burning on the inner side of the right lower leg. After breakfast, weakness in the stomach with confluence of saliva into the mouth. While seated at his writing table, he felt the influence of the drug spreading through his system, and he had no doubt that if he remained quiet, manifold symptoms would soon make their appearance, but he was obliged to go out, and the development of the effects of Thuja was always hindered by bodily movement. At ten in the forenoon, slight burning in the stomach and in the eyes, slight squeezing about the anus, and short accesses of drawing in the right arm and leg. In the open air he felt well. After eating ices, scraping sensation in the throat, unpleasant taste in the mouth, and constriction in the region of the os hyoides. In the evening, tobacco-smoke, reading and writing by candlelight produced either burning in the eyes or cough, an intimation that the catarrhal symptoms were the effect of the operation of the drug.

27th. On waking, the eyelids were slightly agglutinated. Some thick mucus was thrown off by slight coughing, and after a papescent stool, slight burning in the anus was manifested.

The dose of 725 drops produced, after breakfast, an unpleasant, resinous, constrictive taste in the mouth. As he was much in the open air no other symptom was developed except frequent sneezing.

28th. In the morning, *coughing up of thick mucus* again. Immediately after taking 750 drops, tearing in the tendinous aponeurosis on the skull (for some minutes); in the forenoon, frequent light *cough with raising of thick mucus;* at noon, great excitement in the genital organs, especially *tickling in the prepuce and glans.*

Z. remarks: "In my case, Thuja operated in a striking manner upon the hœmorrhoidal vessels; for I felt in them, at times, congestion, and then again, such a slimness, I might say emptiness, that it attracted my observation even when I was not paying attention to that quarter; and this alternation of sensations frequently took place twice or three times a day."

29th. 775 drops. No symptoms the whole forenoon. After dinner, sleepiness, *feeling of coldness*, especially *in the feet;* a boring stitch on the right side of the under-jaw; a couple of erections, and on the emission of some very dark colored urine, *burning in the urethra;* late in the evening, when visiting the privy, two flying, very painful stitches low down in the left side of the chest.

30th. In the morning, he several times coughed up thick mucus. After taking 800 drops, *burning in isolated spots* under the skin, particularly on the right side of the chest. To-

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wards noon, while walking in the open air, *a sudden flying stitch darted through the urethra*, came out from the bulbus, pressed almost to the middle of the urethra, and was so violent that he was unconsciously obliged to bend over. At five in the evening, a laming drawing of short duration in the right shoulder and in the thumb of the right hand; soon after, tearing in the palm of the hand near the wrist (for half an hour). At half past eight, he was seized in the street with general malaise and such universal debility, with weakness in the stomach, that he took a small glass of cordial at a coffee-house. After a while he felt better again, but about 10 o'clock he felt an indisposition by no means easy to describe in words; his mind was at the same time wholly undisturbed. It was a long time before he could go to sleep, and he awoke in the morning earlier than usual.

On the 31st and the two following days he took no medicine.

31st. In the forenoon, *burning in the anus; at 7 in the evening, violent heartburn.* Notwithstanding the shortness of the preceding night's rest, he felt, all day, no tendency to somnolency. The wine was voided very seldom. On the following night, a good sleep.

February 1st. In the morning, frequent *hawking up of mucus, sneezing, slight agglutination of the eyes*, and burning in the *right lower leg.*

2d. After rising, *drawing tearing* in the right arm, especially along the course of the ulnar nerve, in the right thigh, in the right zygoma, and in the right side of the chest. After a little while, these symptoms passed off and appeared, but weaker, in the left side of the body.

3d. In the morning, coughing up of mucus and a single sneeze. An hour after 850 drops, *dullness in the head* on the *right side of the forehead*, continuing an hour, and *dryness of the nose.* After dinner, slight burning in the stomach, heaviness and weariness of the legs with dullness of the head, and indisposition to any kind of intellectual labor. *The eyes secrete much gum;* the face is wan, and the appearance bad all day.

4th. No dose. In the morning, slight dullness of the head; *short drawing tearing, now here, now there, but always on the left side of the body.* In the evening, *burning of the eyes* as if the room were smoky (for an hour). Subsequently, debility of the legs, and on writing, a return of the burning of the eyes. The secretion of urine is very sparing; and the urine itself soon becomes thick and turbid by standing, and deposits a copious, clayey sediment.

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5th. 875 drops. Thereupon, *emission of much flatulence;* slight pressing on the inner side of the right knee; transient drawing in the left ankle, afterward in the right thumb, and finally on the radial side of the right upper arm, where the pain disappeared after half an hour; slight griping in the intestines, with the feeling as though they were pinched with the fingers in a circumscribed spot, now here, now there: on smoking a cigar, the dryness of the nose, which had been already often remarked, came on, and the mucus hawked up had an unpleasant, sharp, resinous taste. These symptoms vanished in the open air; but in walking against the wind, *his eyes continually watered*, which had already been frequently remarked to be the case, but had not been specially attended to by the prover. After dinner, great inflation of the abdomen (for an hour) and a couple of gripes in the intestines. In the evening, slight *itching and pressing in the anus.*

6th. 900 drops of the tincture. Immediately after the dose, two sneezings, which seemed to be excited by a vapor rising from the stomach into the nose; then a couple of *short, dry coughs*, and slight burning on the dorsum of the right foot. The eyes were somewhat agglutinated and watery in the open air. During lecture, his voice was hoarse, with frequent inclination to hawk. On coming into the room from the open air in the afternoon, he had, for some time, painful thumping and roaring in both ears. An evacuation, followed by violent pressing, was unsatisfactory.

7th. 925 drops. Immediately afterward, discharge of flatulence upward and downward, burning externally over the lower ribs of the right side; then, burning in the stomach with eructations with the taste of Thuja during the whole forenoon. Burning in the stomach again at dinner, which was eaten with appetite (for an hour). For several days past he has noticed that while he is smoking a cigar, seated at the writing table, he is obliged to cough, dry and interrupted, which was not usually the case. In the evening, on eating fish, pressing and burning in the stomach.

8th. 950 drops. Soon after, inclination to cough, and burning in the throat on the left side near the larynx, which afterward extended toward the left ear, with more of a feeling of soreness, and soon after disappeared. Slight constriction and compression of the lower half of the chest, and transient stitchy pains on both sides of the thorax extending to the armpits. Towards noon, *burning at the anus*, and in the right leg. He felt well in the air. After dinner, slight *burning in the urethra when urinating.* In the evening,

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burning and stinging in the edges of the eyelids (even the smoke of tobacco burns in the nose) *with sticking in the nape over the joint of the atlas* (for half an hour). The following night, he slept well, and *sweat*, on awaking, *so strongly on the inner side of the thighs and legs*, that the skin was completely wet, while the rest of the body was dry. (Compare Dr. Huber's proving.)

9th. Z. concluded his second experiment by taking 1000 drops of the tincture. After the dose, burning in the stomach (for half an hour); then, *feeling of coldness* over the whole body, in a warm room, especially in the hands; rumbling and slight griping in the intestines; somewhat later, *creeping shudderings*, particularly in the *back*, with hot face; heaviness of the eyelids, with slight *burning of the eyes* and heat in the right ear. The breathing, at the same time, was easy, and the passage of the air through the nose free. The temperature of the open air 3° R. (39° F.) affected him so unpleasantly that he trembled from head to foot with cold. After dinner, transient pressing headache in the vertex; *laming drawing* in the right *armpit, coming on by fits;* occasional drawing in the right thumb.

10th. His voice was hoarse during his lecture, and his throat so choked with mucus that he was very frequently obliged to hawk. After dinner, *burning of the eyes* again, and somnolency also, slight compression and crawling externally on the occiput. After a short and very refreshing nap, burning in the stomach, eructations of wind, discharge of flatulence, frequent *dry cough.*

11th. In the morning, after a hard, scanty stool, *pressing and burning at the anus*; also, soreness in the bend of the right arm when extending it (the whole forenoon); pressing headache on the vertex and in the temples (the whole evening); *feeling of coldness*, especially in the hands and feet, and on the anterior surface of the thigh down to the knee, when seated in the warm room.

12th. In the morning, coughing with raising of mucus. In the forenoon, there was a return of the soreness in the bend of the arm, but in a less degree than yesterday.

Third proving with the 10th dilution.

Z. now instituted an experiment with the diluted Thuja.

On the 12th of February he tasted the 10th dilution, which had been provided for the proving, in order to ascertain if he could discover the taste of Thuja in it, which was not the case.

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Thereafter, in the course of scarce a couple of minutes, the same troublesome *dryness in the nose* came on which had been perceived on the third of the month, and remained for half an hour. In the afternoon, he perceived burning and pressing in the stomach (for an hour).

13th. 10 drops of the 10th dilution, which had been previously shaken for five minutes with two ounces of distilled water. In the afternoon, *burning in the stomach* (for an hour) and in the evening, *pressing in the hæmorrhoidal vessels.*

14th. The same dose. After dinner, sleepiness, and on lying down on the couch, instead of the expected slumber, painful, *cold running* from the *nape*, over the *back*, down to the sacral region, which were increased by every movement of the body, and soon disappeared after rising.

15th. For the last time, Z. took 10 drops of the 10th dilution immediately before breakfast (café au lait). Shortly after he perceived a sharp taste in the mouth, and had eructations with the taste of Thuja.

He remarks at this point: "I must confess that I am not in a situation to account for this symptom. How should it be possible for ten drops of the 10th dilution of Thuja, drunk in two ounces of water, followed by a breakfast of bread and coffee and the smoking of cigars, to effect the gustatory nerves?"*

The drawing in the right shoulder also came on for a little while. After dinner, he was again annoyed by the dryness in the nose, already often described, and burning on the tongue; in the evening, burning in the stomach.

16th. An entirely new symptom made its appearance. As he was going to dinner, there *was a sudden sparkling before his eyes*, and a multitude of *black, shining points swam before them*, so that he could not clearly make out surrounding objects. After a while this symptom disappeared; first from the right eye.†

26th. Eleven days after the closing of the proving. In the evening, *tearing and laming drawing in the left axilla*, which on the following day extended to the right shoulder, where it remained an hour. On the same day he perceived, for a short time, a constrictive feeling in the back between the

* In our opinion, this taste of Thuja is to be attributed, not to the ten drops of the 10th dilution, but to the 40,000 drops of the mother tincture which had been previously taken, which had penetrated, and, so to speak, *thujacized* the whole body. A new reaction followed the new and almost immaterial dose, and that might disengage a perceptible portion of the previously taken mass. *Mayrhofer.*

† Compare Dr. Huber's proving.

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scapulæ, which somewhat hindered respiration, and also motion of the arms. Afterwards he had a *feeling* in the internal *canthus of the right eye, as if a grain of sand* had fallen into the eye; this continued until bed-time, and rendered the movement of the eyelids somewhat painful, though no objective alteration in the appearance of the organ could be detected.

28th. The eye was entirely restored; but in the morning, a pressing headache in the region of the vertex came on for a short time, and returned in the evening, accompanied by burning in the stomach. No other effects of the Thuja were remarked by Professor Von Zlatarovich.*

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Zlatarovich's proving of the tincture of Thuja on a young woman.

Catharina Ratmayer, twenty-three years old, unmarried, thin, of a nervous excitable constitution, suffered when a child from scaldhead, and from worms. She was chlorotic from her twelfth to her nineteenth year. The catamenia first appeared in her fifteenth year; but during the first year, they appeared very irregularly, and even at the present time, are somewhat absent for two or three months, especially on any violent mental excitement. They appeared last on the 23d of September, and continued for six days, which has been their usual duration for some time past. She has suffered for a year with accompanying cramps in the abdomen. She has had for some years a flat, dry tetter on the chin and lips.

1844, Oct. 17th. She began the proving of Thuja with ten drops of the tincture, taken fasting in water, in the morning. Two hours after she perceived heat and vertigo (for half an hour).

18th. 15 drops. In the forenoon, pressing in the stomach.

19th. 20 drops. After dinner, transitory *coldness over the whole body.*

20th. 30 drops. She felt well during the day. In the evening, *chilliness for several hours*, passing into heat on lying down.

21st. 35 drops. No symptoms.

22d. 40 drops. In the following night, pain in the stomach, with nausea and vomiturition (for an hour).

23d. 45 drops. Pressing headache through the day, begin-

* We must give this bold and persevering experiment the highest tribute of our acknowledgment and admiration. *Mayrhofer.*

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ning on the right side, afterward extending over the whole head.

24th. 50 drops. In the forenoon, eructations with the taste of the drug and slight headache for a couple of hours.

25th, 26th, and 27th. 55, 60, and 65 drops. No symptoms.

28th. 70 drops. *Coldness all day;* cutting above the navel, extending into the sacral region; before bed-time, difficult respiration with pressure on the chest, by reason of which she could not get to sleep for a long while.

29th. 80 drops. In the morning, on waking, very violent pressing aching in the forehead, lasting all day. The menses, which should have appeared on the 25th, came on, for the first time, to-day, but unattended with colic.

The following six days passed without taking any of the drug. During the first two, she had continual headache, copious eructations of wind, and wandering, drawing pains in the hollow teeth. On the 1st of November she was well. On the 2d she had, in the morning, a three hours' headache, at one time in the right, at another in the left temple, and again in the vertex. On the 3d, the catamenial flow ceased; it had been less than usual.

4th. 85 drops. After breakfast, exceedingly violent colic, and transient cutting and rumbling in the intestines.

5th. 90 drops. A return of yesterday's colic, but less violent; accompanied by *weariness and general weakness*, with heaviness in the feet and general feeling of discomfort. She felt as if she were threatened with a severe attack of illness.

6th. She awoke with a very violent headache, and took 95 drops. During dinner, very severe, but very transitory colicky pains came on suddenly, and also frequent *creeping coldness*, as during a fever.

On the following two days, 100 and 105 drops produced no symptoms.

9th. 110 drops. In the forenoon, *feeling of coldness;* in the afternoon, *frequent feverish alternations of cold and heat.*

10th. 115 drops. Slight headache all day.

On the next two days, 120 and 135 drops produced no symptoms.

13th. 130 drops. She felt all day weak and debilitated.

14th. 135 drops. Violent tearing on the left side of the head, and in the teeth of that side.

15th. 140 drops. For four hours after the dose, she was as if stupefied, sleepy and weak; the rest of the day well.

16th. 145 drops. She then ceased taking the remedy for sixteen days. During this time the results were as follows:

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On the day of the dose, stupefaction again and sleepiness, which did not last so long, however, as on the previous day. In the afternoon, frequent eructations of wind, and pressing in the stomach, which extended through the throat into the fauces. Late in the evening, on going to bed, tearing on the right side of the head, and itching over the whole skin, especially on the abdomen, as if she were covered with an eruption. Painful *inflamed tubercles* appeared on various spots on the body.

17th. In the forenoon stomach-ache and melancholy state of mind; in the afternoon, more cheerful humor. This alternation of humors has already manifested itself for some days past.

18th. In the forenoon, pains in the stomach; *hawking up of mucus; stoppage of the nose*, with nasal sound of the voice, *biting on the whole body;* in the evening, sticking in the head, and transient tearing in the left hand.

19th. In the afternoon, tearing in the teeth of the left side, and afterwards a very restless night.

20th. Very severe catarrh, with increased secretion in the air passages, painful swallowing, and sticking in the head.

These symptoms disappeared by degrees on the following days, and she continued the proving on the 2d of December, by taking 150 drops. Soon after the dose, stupefaction (effect of the acohol? M.) and extreme drowsiness during the whole day.

Dec. 3d. 155 drops. Stupefaction, sleepiness and frequent eructations of wind.

4th. 160 drops. After dinner she was very thirsty and so inflated, that she could not bear the pressure of the strings about her body.

5th. 165 drops. The same symptoms.

6th. No dose. Extreme melancholy.

7th. 165 drops. After awaking, very violent headache, lasting all day and disappearing on the next day on which the dose was omitted.

On the next three days, 170, 175, and 180 drops produced no symptoms.

12th. 185 drops. After dinner, extreme thirst; in the evening, colic.

13th. 190 drops. Colic with two fluid evacuations, great thirst and *cold over the whole body*, with drowsiness.

14th. No dose. She awoke with sticking in the left side of the head, which soon went off; but the head was dull all day. She had also *drawing from the head over the nape and the back to the sacral region*, and complained of *general weakness with heaviness and coldness of the feet*, and in the

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evening, of general burning heat, whereupon restless sleep followed.

15th. She awoke with headache, and took 195 drops. In the evening, *coldness in the back, with alternations of heat.* She has made the observation for several days past, that on bowing, she has sticking in the left side of the head, even if she were not just then suffering from headache.

16th. She closed the proving with 200 drops. The headache with which she awoke lasted three hours, and after it had ceased, sticking pain came on when bowing, but on the right side of the head. After dinner, pressing in the right side of the chest, during the whole afternoon, accompanied in the evening by sticking, which extended into the sacral region. During the whole day, *coldness*, especially in the *back*, with general weakness and sensation as if beaten. In the evening, manifest fever symptoms developed themselves, as: headache, heat of the skin, full, accelerated pulse, besides sticking in the right hypochondrium (especially during respiration), which extended into the sacral region. She went to bed on this account, and general heat came on, succeeded by quiet sleep.

17th. There was no fever, but she felt weak. She has had no evacuation for two days, and no appetite; a bitter mucous taste in the mouth. The pains in the chest are completely gone; borborygmus is frequent in the intestines; in the evening, sticking in the head, and pressing in the left side of the chest. These symptoms are diminished by an evacuation. The sleep was disturbed during the night by heavy, harassing dreams.

18th. In the morning, headache and *cough, with copious excretion of mucus; catarrh* and bitter taste the whole day, *thirst with alternations of heat and cold*, the latter *especially in the dorsal and sacral region*, with hot head and face. On going to bed, *pressing on the chest, with difficult breathing* and sticking in the side. Before midnight, *coldness;* towards morning, *warmth;* finally, *perspiration.*

19th. On rising, violent sticking in the head, especially on moving; great accumulation of mucus. In the forenoon, *alternations of heat and cold.* Toward noon, the headache became very severe, and remained so for half an hour; there came on then, *drawing in the small of the back* (aggravated while seated), *stoppage of the nose, burning of the eyes*, frequent eructations of wind, *difficult*, almost panting *respiration*, violent *cough*, with *raising of mucus.* In the afternoon, slight colic, with borborygmus and inflation of the abdomen. In the evening, *general chilliness* without thirst. The pulse beat at the rate of 100 in a minute, was full and hard. Several *inflamed tubercles* appeared in the face. Her food tasted insipid.

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20th. During the night, in which she continually suffered from *severe coldness*, the catamenia appeared, ten days earlier than usual. In the morning, she felt very ill; her head was dizzy as if stupefied, her mouth tasted very bitter; all her teeth seemed to be loose; she frequently coughed up mucus as thick as lard. In the forenoon, she felt pretty well. Towards noon, *alternations of heat and cold* came on, with *weakness* to the extent of falling. In the afternoon, she felt well again except a slight headache. Catamenia very scanty. She observed for several days past, that she becomes hot at dinner, and her body is covered with perspiration.

21st. During the night, she slept extremely restless. So bitter was the taste in her mouth, that she was obliged to get up in the night and rinse out her mouth with water. She awoke at about three in the morning, and could sleep no more on account of heat. Afterwards, a chill came on, and in the morning a very violent headache, lasting all day. Before dinner, she felt weak and sleepy, and was *cool over the whole body*. She felt better in the evening.

22d. In the morning, headache, but less than yesterday: frequent spitting of saliva and mucus, with hollowness at the stomach and insipid taste. General feeling of discomfort; she looks very ill, is weak, *depressed* in body and *mind*, and is somewhat bloated in the face. Towards noon, an attack of coughing, with raising of tenacious mucus, vomiturition and strangling; after this she felt ill and weak for half an hour, and had a return of more violent headache. At noon every thing tasted insipid. In the afternoon, when walking, great heat, weight upon the chest, breathlessness and occasional dry cough, with sticking in the head. In the evening, *coldness in the back*, with accompanying heat in the head, with great drowsiness and thirst; at night quiet sleep.

23d. In the morning, bad taste in the mouth; less sticking in the head than yesterday; she feels very hot and weak, and is frequently obliged to sit down to rest, although she insists upon it that she is better to-day than for some days past. She coughs very little, and has shorter breath than usual, with weight on the chest; her urine is copious, she has had no evacuation for two days. In the evening, chill again followed by heat, thirst and sleepiness. Pulse 120, full and hard; she is very low spirited.

24th. The same symptoms appeared, accompanied by *tearing in the hands*; in the evening, feverish pulse with headache; a good night's rest.

25th. In the morning, headache; also violent *tearing in the*

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nape, which extended into the axilla (which? M.) and there remained during the whole day. *The upper arms are painful, and so weak* that the patient can, with difficulty, hold them up long enough to arrange her hair; she trembles in hand and foot, looks pale and earthy, is exceedingly out of tune, *sad and disposed to weep;* respiration very short on walking, cough dry, abdomen very much inflated, taste bitter, increased thirst; alternations of heat and cold; pulse not so much accelerated, nor so full as yesterday. A hard evacuation.

26th. The patient feels so weak and powerless that she cannot leave her bed. Her head is very dull; she is as if stupefied and dozes much; her tongue is somewhat furred and half dry; pulse moderately accelerated, full and hard. To these symptoms were added cough and tearing in the left shoulder. This state of things, in connection with a very bad countenance and extreme prostration and depression of spirits, gave Z. reasons to apprehend the development of a nervous fever (? M.), and he gave her a drop of *Puls.* 30. She continued the same for the rest of the day; she had occasional naps during the night, but they were disturbed by tearing in the left axilla and slight colic.

27th. In the morning, the same state of things, but in a somewhat diminished degree. Tongue dry at the point. In the afternoon, bitter taste, redness of the face with cool extremities, irritable humor. She had *Cocc.* 30, one drop. In the evening, copious, general perspiration, with diminution of all the morbid symptoms, and tolerably good sleep at night.

28th. In the morning, striking abatement of all the symptoms. The skin is agreeably moist, the pulse less accelerated, the feelings less gloomy; the tongue is still somewhat furred, and the tearing in the left shoulder is still present, but at times, it goes to the right shoulder and nape. She begins to feel a little appetite, and has had two stools; but she still feels very weak, dozes much, and speaks very *slowly and monosyllabically*. She had *Cocc.* 30, one drop in a tumbler of water with directions to take a tablespoonful every two hours. The improvement continued during the day, and she had a good night.

29th. The pains are considerably diminished; the fever is slight, tongue moist, taste natural, mind cheerful. At night, sleep and copious perspiration. *Cocc.* continued.

30th. In the morning, the patient is exceedingly ill-humored, speaks but little, and keeps her eyes continually closed. For the rest, she complains of no pain, her pulse is but slightly accelerated, and there is nothing further worthy of remark.

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Z. gave her *Rhus.* 24. She sleeps much during the day and has no appetite; the tongue is moist and a little furred; urine copious and yellow. She slept and perspired at night.

31st. With the exception of great weakness and prostration, no morbid symptoms appeared to-day. In the afternoon, the nose bled, after which her head was much relieved.

"It must be observed," remarks Z. in his relation, "that both those about the patient, and she herself had noticed that she was better and worse on alternate days, indications of a tertian type."

"I must confess," pursues he, "that I have no hesitation whatever in considering this whole attack, as it appeared, as caused by the Thuja. Had it been a natural idiopathic affection, there would have been a greater harmony in the symptoms. (? *Ed.*) The febrile symptoms, however, stood in no relation to the extraordinary debility; there were no abdominal pains, no diarrhœa, no delirium, no metorismus, nor any of those symptoms which usually indicate the existence of a typhoid disease.*

1845, Jan. 1st. After a good night's rest, the patient, with the exception of general weakness, which was still present, felt well. Her appetite returned; she was not so depressed in mind as on the preceding days; but her speech is still very slow and drawling. She took *Ignat.* 24. At noon, she was for a short time out of bed, and remained well during the afternoon.

2d. The catamenia appeared without any morbid symptoms, but lasted only one day.

15th. For the first time the convalescent went into the open air, which seems, nevertheless, to have been too soon; for on the 16th chills, want of appetite, peevishness, and a small weak pulse again made their appearance. She now took *Nux vom.* (in what dose? M.) An hour after, a shaking chill, lasting half an hour; heat came on over the whole body, preceded by a gradually increasing warmth. She was so weak that she was obliged to remain in bed the whole day. She had a thickly coated tongue, with bitter taste, but little appetite, and for two days past no evacuation. The febrile symptoms were slight. The *Nux* was continued. The next day she was better throughout, tongue cleaner, appetite returned, had a stool, in-

* We do not, for an instant, doubt but that the above described attack was the result of the doses of Thuja; we recognize in the instability of the symptoms, in their evident discordance, and in the irregularity of the course of the disease, the fundamental characteristics of the drug.—*Mayrhofer.*

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crease of strength. The convalescent now steadily proceeded without any further medication, but it was a full month before she regained her former health.*

R.

Franz Zoth, medical student, 24 years old, choleric-phlegmatic (? M.) temperament and apoplectic build; at 15 had the typhus; a year ago, was treated for ten days at the medical clinique for an inflammation of the lymphatic glands of the right arm, which had come on in consequence of intoxication with Cyanede of Potassium; in other respects was entirely well.

Zoth's proving produced very few results, notwithstanding he took 5000 drops of the tincture within three months.

1844, Oct: 15th, 16th, 17th and 18th. No effects were perceived from 5, 8, 11 and 14 drops of the tincture.

19th. 17 drops. He perceived single stitches in the right frontal region. On the following two days 20 and 23 drops produced no symptoms.

22d. 26 drops. A cough came on, which he regards as having been possibly caused by an exposure to cold.

The cough continued on the following two days, on which 29 and 32 drops were taken.

25th. 40 drops. To the cough was added swelling of the throat, which continued during the following three days, on which 50, 60 and 65 drops were taken.

[To be continued.]

GOLD.

BY JOHN C. PETERS, M. D.

THE majority of physicians regard metallic gold as inert, but Chrestien and Niel assert that finely divided metallic gold produces similar constitutional effects to those excited by the various preparations of this metal; it decidedly promotes the secretions of the skin, kidneys and salivary glands; they even assert that the metallic gold is preferable to the other preparations, when given to delicate and nervous persons, females and

* What became of the tetter on the chin?—*Mayrhofer.*

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infants; they were in the habit of giving from a quarter to one grain, three or four times per day.

The muriate of gold, when injected into the veins, inflames the lungs; to do this it need not exert a specific action on these organs, for as it is quickly carried to them in the natural course of the circulation, it will evince its corrosive action on them as well as any other tissue with which it comes directly in contact. Mitchell thinks that the muriate should be regarded as a diuretic, as it increases the quantity of urine in many cases, even when merely rubbed upon the tongue, also when very small doses are given internally, while Gerardot used six grains, in doses of one-eight to one-fifth, with no other effect than increase of urine. Our only object in dwelling on this point is, to throw into strong relief those functions and organs upon which gold acts specifically. The urine of a patient under the influence of gold, is apt to become offensive, thick and sedimentous, or else abundant, clear and of a beautiful amber color. This would suggest its homœopathicity to Diabetes, and to that most fatal form of dropsy which is attended with increased flow of urine. Its so-called diuretic powers led long ago to its old school use in dropsy, to which it may have a somewhat homœopathic relation, for even when rubbed upon the tongue it is apt to cause supra orbital headache, and a dropsical swelling of the eyelids, similar to that produced by arsenic; it is also said to have caused a hard, red, dropsical swelling of the leg, from the ankle to the calf, excited by very slight rubbing of the boot. However this may be, Vogt says that it has been used in dropsies, especially in those occurring after scarlet fever, or after obstinate fever and ague, inflammation of the liver, or from suppressed menstruation; while Field, Plenciez, Wendt, and Grotzner, used it with distinguished success in old dropsies from abuse of ardent spirits, especially when induration, *i. e.* granular liver was present, and this when all other diuretics had failed; but the good effects did not follow till after four to six weeks' use of the muriate; the swelling and induration of the liver were then also found removed. It is well to add here, that Agaricus, Iodine, and Sabina, are known positively to have caused enlargement of the liver.

If the muriate be pushed beyond one-tenth of a grain per dose, it is said never to fail to produce fever and inflammatory symptoms; so marked is this effect, that it deserves to be ranked with Aconite, Cantharides, Rhus and Phosphor., as a phlogistic remedy. It causes very great increase of animal warmth and turgor vitalis, excessive development of heat, extreme heat of the body, general erethism and quickening of the circu-

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lation, violent fever, and fever with unusual and persistent heat of the skin, &c.; this leads us to express our surprise at Noack's recommendation of it as homœopathic to the venous habit or constitution, for it seems to us to produce a true synochal fever in a more marked degree than almost any other remedy with which we are acquainted; it seems to be a higher order of arterial tonic than even iron; we, of course, are equally surprised with his assertion that it is homœopathic to the phlegmatic temperament, for it seems to be so to the arterial, or sanguine and muscular temperament, for those of large frame, ruddy complexion, short neck, broad chest, and jovial disposition.

Gold-fever.

If the muriate be given in small doses, for from six to twelve days, we notice increase of appetite, more blooming appearance, increase of power and activity of all the motions and functions, even in those of the brain, with increased quickness of the pulse, &c.; but if one-tenth of a grain be given daily for from fifteen to thirty days, a formal attack of fever will set in, marked by shivering, pains in the stomach, back, limbs, and diseased parts, followed by heat, perspiration and redness of the skin, quick, full pulse, &c.; this febrile irritation sometimes only lasts a few hours, at others for several days, and then is attended with restlessness, sleeplessness, suppressed secretions, &c.; it terminates in a general, profuse and critical sweat, which may be extraordinarily violent, have a peculiar alkaline odor, and an uncommon stench; profuse flow of urine also ensues, the sediment of which may be brick-red, or grayish, or the urine may be turbid like butter-milk, and deposit a thick mucous cloud, or the discharges of urine may be frequent and watery. These crises by the skin and kidneys may last from eight to ten days, without exhausting or incommoding the patient much; but if they are disturbed, especially by taking cold, then increased fever, with quick, small, spasmodic pulse, great restlessness, will set in and subside again after the outbreak of a very profuse sweat, or of a pustular eruption, or of an abundant salivation with aphthæ of the mouth. (Vogt.)

The above effects of gold remind us of those produced by influenza, also by Mercury and Aconite. Chrestien once regarded it as absolutely necessary to produce this gold-fever, in order to cure the diseases against which he administered gold, and states that the mouth generally remained good, the tongue

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moist, the appetite remained and even became improved together with the digestion, that the bowels did not become disordered except they rather inclined to costiveness, while there was a marked augmentation of sweat and urine. So important did he regard this, that he insists that the febrile crisis should not be brought on too suddenly and hastily, and then should be managed with skill and circumspection not to bring it to too quick a termination.

It may produce troublesome dryness of the mouth and throat, and when given in very large doses has produced erosion and even perforation of the intestines, this would render it somewhat homœopathic to typhoid fever.

We have seen that it may cause very severe pains in the back and limbs, followed by severe fever, which may subside on the breaking out of a pustular eruption; this reminds us of varioloid and small-pox.

Sometimes very small doses disagree. Cullerier has seen one-fifteenth of a grain, at the second dose, cause gastric irritation, dryness of the tongue, redness of the throat, colic and diarrhœa; Magendie has seen large doses cause violent gastritis, accompanied by nervous symptoms, such as cramps and pains in the limbs, agitation and loss of sleep, followed by great heat of skin, obstinate sleeplessness and fatiguing erections. From the largest doses, Plenk saw spasms, convulsions, anxiety, diarrhœa, vomiting with violent griping, syncope and death; while Hoffmann noticed similar accidents, and expressly mentions cold sweating of the extremities, great lassitude and exhaustion, extraordinary anxiety and restlessness until death, which ensued under convulsions and syncope. In nervous persons it is apt to cause a remarkable restlessness, severe itching of the skin, sleeplessness, even a trembling of the lower jaw, with threatening of trismus, a peculiar stiffness of the tongue which precludes speech, &c.

1. *In Melancholy and Hypochondria.*

Here it is used as frequently by the Homœopathists as against any other disease, yet Vogt tells us that in olden times it was used on account of its heart-strengthening, vivifying, gladdening and diuretic powers; while Riecke, Dunglison and Dierbach, state that the remarkably joyous disposition and loquacity which are noticed after taking gold, deserves particular mention; it is also said to cause general excitation of the nervous system, talkativeness, &c.; Neil and Percy have noticed an enlivening effect upon the whole nervous system, and espe-

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cially upon the brain, and we are told that it was used in old times in hypochondria, melancholy, and idiocy; another author says it causes pleasant loquacity and lust. In Hahnemann's experiments, too, it caused first laughing, then crying; trembling agitation of the nerves, as in joyful hope; frolicsomeness and pleasant comfort, glad, contented mood, with inclination for amusement, alternations of silent irritability and gladsomeness, &c. However, the opposite effects on the brain seem to predominate, for it causes shyness, timidity, despair, courageless discouragement, dejection, sadness and discontent at every thing, with internal vexation at times about a supposed adverse fate, at others, about an imaginary self-offence. Great fearfulness and weakness arising from the cardiac region, and driving one from one place to another; frequent attacks of cardiac anxiety and trembling fearfulness. Great agony, to the point of committing suicide, with spasmodic contraction of the abdomen (abdominal hypochrondia). Melancholy and desire for death. Fearfulness and anxiety even from the slightest noise at the door, from the fear that some one would come in—desire for solitude—irritability and disinclination to speak—constant fretful earnestness and determination. Hasty irritability from the slightest contradiction; anger and violence, with bitterness and scolding.

Noack recommends it especially in immaterial hypochondria; but Gold is an anti-dyscratic remedy, which is said to cause a peculiar alteration of the fluids which is antagonistic to certain dyscrasias, and also a peculiar excitation followed by critical movements and discharges, which lead not only the drug-disease, but the original one to a favorable termination. If this be so, gold may remove hypochondria when depending upon a material cause; we have also seen that it is competent to remove enlargement of the liver, and hypochondria is frequently supposed to be connected with derangement of that organ; we will soon have occasion to show that gold has a specific relation to the syphilitic dyscrasia; while it is said that melancholy occurring after syphilitic gonorrhœa, is an extremely disquieting affection, which often leads to suicide, and which is scarcely ever cured; perhaps gold may prove serviceable here. Noack also recommends it in melancholy from depressed sexual power, and states that it is significant that gold has not only proved itself useful in inclination to suicide, but also has a quite evident (but not homœopathic) relation to depression of the sexual power, and to diseases of the genitals and testes, while late observations tend to show that suicides are apt to have diseases of the genitals, viz., hydatids of the ovaries, testes, &c.

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In this instance also Noack seems to have got the cart before the horse, for gold does not produce depression of the sexual power; Wendt mentions particularly that it caused excitation of the sexual power; for when given in the different forms of dropsy, viz., Anasarca, Ascites, Hydrocele, &c., in old men, it rarely failed to arouse the long slumbering sexual power; Risneno also speaks of its vis aphrodisiaca; while the most hasty glance at Hahnemann's record will prove the same thing. In connection with this it may be well to add that it seems to act also upon the cerebellum; it causes heaviness of the occiput, feeling as if the nape were full of compressed air, aching extending from the occiput to the left temple, or to the forehead, increased by motion.

2. *In Chlorosis.*

Noack recommends it here, when attended with melancholy, a lachrymose disposition, and an eternal seeing of obstacles and new losses. But gold is certainly not homœopathic to chlorosis or amenorrhœa; the metallic, produces feeling as if the menses would set in, with labor-like pains in the abdomen, while the Muriate, causes facilitation of the menses, earlier setting in and excessive flow and continuance of the menses; hence it is more homœopathic to menorrhagia than to chlorosis or amenorrhœa. We have other proofs for this assertion. Vogt says that it had better not be given just before or soon after menstruation, as it readily causes uterine hæmorrhage; quite a number of old school physicians have recommended it in amenorrhœa, viz., Funari, Carron, Dwillards, Legrand, Sonchier, &c.; if the doses be too large, it is apt to cause persistent heat in the stomach, full strong pulse, increase of urine, increased warmth in the vulva, congestion of the pelvis, dry tenesmus, increase of appetite, increased warmth and moisture of the skin, general excitement of the nervous system, sleeplessness, restlessness in the legs, loquacity, redness of the face, starting up from sleep, vertigo, &c. Riecke says that it acts powerfully upon the hæmorrhoidal and menstrual flows.

3. *In chronic congestion of the head; in megrim; hysteric headache; headache after mental exertion.*

As derangements of menstruation are very apt to be attended with headache and congestion to the head, and as gold is very apt to cause derangements of the circulation and arte-

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rial congestion, we think this the best place to refer to Noack's recommendation of it as homœopathic to the above affections.

It causes headache from the morning on, as if from bruisedness of the brain, increased by meditation and reading, but especially by talking and writing, to the extemest degree of violence, and to perfect confusion of the mind.

Also, congestion to the head, rushing and roaring in the head, bloating, glowing and shining of the face, with distention and projection of the eyes; it also produces the opposite effect, viz.: feeling as if all the blood passed suddenly from the head to the legs, by which the latter were placed in a kind of paralytic weakness. Great heat of the head and face, with coldness of the hands and feet; coldness of the feet, as high as the knees; when in bed, with heat and pain, fullness of the head, sleeplessness, anxious dreams, &c.; congestion to the head increasing to delirium; throbbing of the carotid and temporal arteries. It also produces a twisting, boring, acutely throbbing one-sided headache, commencing immediately after waking in the morning, increased by coughing and bending the head backwards.

4. *In Sleeplessness.*

It is spoken of as especially indicated against the sleepless state which often ensues after acute febrile or inflammatory diseases; we would propose it when want of sleep occurs in literary persons from want of exercise and constant coldness of the feet; also in the wakefulness of teething infants, as it has almost as specific an action on the gums and mouth as mercury, even when attended with fever; typical sleeplessness is said to arise at times from deep-seated gout, or syphilis, as we shall see subsequently that gold has a special relation to these two diseases; it may also be adapted to the wakefulness of hypochondriacal, hysterical and melancholic patients. It causes wakefulness and sleeplessness the whole night; disturbed sleep especially towards morning; frequent waking up in fright from sleep; loud whimpering in one's sleep; waking up from sleep of children with fever, redness of the face, quick and loud talking and slight delirium; frightful dreams with loud screaming; dreaming of dead men, quarrels, &c.; sleeplessness from coldness of the feet. There is abundant testimony from old school authorities that gold is apt to produce restlessness and sleeplessness.

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5. *In Secondary Syphilis.*

Here it was first proposed and used by old school physicians; hence we will first give their experience, and then examine into the homœopathicity of its action. In secondary syphilis it is said to have proved most successful in the hands of Chrestien, Niel and Legrand, but they and Gozzi only compare its anti-syphilitic powers to those of mercury, without rating them higher; Hermann places it between Antimony and Mercury in point of efficacy, while Vogt states that it is most useful in scrofulous, dyscratic or scorbutic subjects who have become affected with syphilis, and cannot bear the liquefacient action of mercury. From pretty abundant proofs it seems proven that in ordinary cases of primary disease in robust and healthy constitutions it is far inferior to mercury, curing more slowly and only mild cases; in most secondary and inveterate cases it is also said to be inferior as a rule, only helping when mercury has been given without benefit, or with absolute injury, or in bad constitutions; it is said to aggravate symptoms which it afterwards cures; thus, buboes generally burst and heal by suppuration; suppressed blenorrhagias set in again, and then gradually disappear; while sycoses and mucous tubercles of the skin generally disappeared very slowly or not at all. Riecke says that its anti-syphilitic powers cannot be doubted. Fresh cases are often cured by a few grains, while old ones require longer time and larger doses. Legrand says it cures secondary syphilis more readily than mercury, and that relapses are not so frequent. It is said to be particularly serviceable in syphilitic eruptions. Ricord says, however, that he has generally found gold useless in primary syphilis, while in the consecutive constitutional affections its effects are more uncertain; hence, notwithstanding the encomiums which have been passed upon the treatment of syphilis by gold, by its author [Chrestien] and those learned men who have imitated him, Ricord only employs it when he has no other resource.

We now proceed to examine in how far Gold is homœopathic to syphilis:

a) The muriate of gold is a corrosive or ulcerative remedy, but less energetic than corrosive mercury, hence it is homœopathic to ulcers; it may produce erosion, ulceration, and even perforation of the intestines, and is said to have produced ulcers upon the scrotum.

b) Although it is said by old school authorities to be particularly serviceable in syphilitic eruptions, we have already

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seen that it is apt to produce a pustular eruption; it is said to have produced an eruption of fine pimples, with pus-points, upon the face, neck and chest; also painful dark brownish red or coppery spots upon the nose, &c.

c) We have already seen that it is apt to produce pains in the back, limbs, bones, &c. It is said to have caused painfulness of the bones when lying upon them, viz.: of the head, nose, thighs, hips, &c.; bone-pains in the metacarpal bones of the great toe; rending pains in the zygoma; rending aching pains in the lower jaw; compressing rending pains in the wrist, metatarsal bones, worse at night; tightening pains in the cheek bones; intermitting dull aching pains in the lower jaw; grasping pains in the tuber ischii; aching in the periosteum of the humerus; small nodes on the right vertex and forehead, with boring pains, increased by pressure; painfulness of the bones of the nose and adjoining part of upper jaw. Hence it has been recommended by Noack in nocturnal bone-pains, and in inflammation and caries of bones; he also recommends it against the injurious effects of mercury, especially when complicated with syphilis; and there can be no doubt that there is much similarity between the action of gold and mercury, for it is apt to cause salivation, swelling of the tongue, cheeks and parotids; also pains in the bones and limbs, and absolute rheumatism, such as swelling of the wrist, &c.

d) Gold, like syphilis, is apt to attack the nose. It has caused soreness, swelling and redness of the nose and nostrils; ulcerous, yellowish and hard crusts in the nose; ulcered, obstructed and painful nostrils; painfulness of the bones of the nose and upper jaw; violent flowing catarrh, with discharge of yellowish green matter. Hence there can be no doubt of the homœopathicity of gold to syphilis.

While on the subject of syphilis, we feel impelled to make a few remarks, mainly culled from Graves' clinical lectures; we have seen that gold tends to produce a phlogistic state of the system and a pustular eruption, while Green has generally seen the pustular syphilitic eruption in persons of strong constitution, the vesicular and scaly occurring more frequently in the delicate.

The superficial ulceration of the throat, which Green considers truly syphilitic, frequently becomes changed by mercury into deep excavated ulcers of the tonsils.

Graves says it is a striking and remarkable fact, that the mercurial cachexy occurring in quicksilver miners, resembles the venereal in many respects; emaciation, night-sweats, pains in the bones, nodes, caries of the bones, cutaneous eruptions

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and ulcers, redness and ulceration of the throat, loss of appetite and debility, are common to both. (page 319).

The celebrated Fricke, of Hamburg, states that he has seen artificial ulcers formed three times, with corrosive sublimate, in females, and twice with lapis infernalis on males, resembling chancres of the third species, viz.: the true hunterian chancre, with an ash-colored, and in general hard base, which is deeper than the edges, the latter being sharply cut, indented, raised above the epidermis, everted, often of a dark red color and inflamed (pages 327 and 28); and these chancres made by art, required the same time for their cure as hunterian chancres of similar size. (p. 331.)

The application of solid caustic is apt to give rise to sympathetic bubo; if the sore is so large that the diameter of its surface equals a line, it is already too extensive for the application of the solid caustic, without incurring the risk of bubo. (p. 372).

6. *Gold-salivation.*

It is said to produce salivation even more frequently than perspiration or diuresis; and this salivation is said to be very different from the mercurial, for it is never very violent, no fetor of the mouth attends it, and it sets in but slowly and gradually; the saliva is less consistent than natural; it is tasteless, does not debilitate the constitution, is rather critical, and may be regarded as a premonition of the cure of the disease against which it was given. This is one side of the story; but according to Hahnemann it may cause swelling of both cheeks, the lips and nose; swelling of one cheek with drawing and rending in the upper and lower jaws, and pushing and picking in the teeth, which seem too long; inflammation of the lining of the alveolar processes; painfulness of the parotid glands, as if bruised; tension in the bones of the cheeks and ears; violent rending in the zygoma; pretty acute pain in the whole lower jaw; painfulness of the sub-maxillary glands; swelling of the gums, with aching soreness while eating; painful vesicles and aphthæ upon the gums; swelling of the gums and cheeks; looseness of the teeth; toothache from cold air; pain in the back teeth with painful swelling of the gums; sensation of lengthening of the teeth and swelling of the cheeks.

It is needless to dwell upon its homœopathicity to teething difficulties; we can can only express our surprise that it has never before been recommended or used in these most trouble-

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some affections; we have used it for nearly two years, often with very great benefit.

7. *In Coughs, Phthisis, and Arthritic Catarrh.*

Vering says, in consumption even small doses will cause cramps of the lungs, continued cough and hæmoptysis; but Wendt recommended it in tubercular phthisis, the farther development of which he says it often prevents. As it causes colic, diarrhœa, erosion and ulceration of the bowels, &c., it may prove homœopathic to the diarrhœa of consumptive patients. It is said to cause a tight, dry catarrh of the chest, worst early in the morning; accumulation of tough mucus adherent below the larynx, raised with difficulty by gagging and not loosened except by the greatest exertions; great accumulation of mucus deep in the lungs, raised easily and in quantities, followed by easy breathing and sense of wideness of the chest; cough from oppression of the chest and want of breath at night. This array of symptoms agrees very closely with those which occur in arthritic catarrh; this is marked by a peculiar dry wheezing cough, usually occurring in paroxysms, which generally end in more or less expectoration; it is almost peculiar to gouty constitutions, although it may occur before a formal attack of gout has taken place; it is very troublesome, and generally unmanageable, being but little amenable to treatment, and is seldom got rid of for any length of time, without the occurrence of a fit of gout in the extremities, when it increases or diminishes with increase or decline of the affection of the joints, unless it be during the summer months. Noack thinks that gold has an homœopathic relation to gout; and it is evident that it is important to find new remedies for arthritic catarrh, hence we suggest gold. It may also prove useful in syphilitic phthisis.

Gold also tends to produce flatulence, and Graves states that it is a curious fact, that every chronic derangement of the bronchial mucous membrane is accompanied by flatulence. This doubtless arises from the irritation of the bronchial mucous membrane spreading by continuity of tissue and rendering the tongue foul, the stomach weak, and the digestive function unnatural; still it is not impossible that the disease of the air tubes and the imperfect performance of respiration causes the natural secretion of air from the lungs to be diminished, in consequence of which an increased quantity of air is secreted from the intestinal mucous membrane by a vicarious action. Graves thinks that he has seen some well marked examples of this translation of the functions of secreting air from the pulmonary

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to the intestinal mucous membrane in cases of spasmodic asthma and hysteria. He has seen patients who, previously to an attack of asthma, had no signs of flatulence, and observed that as the disease progressed and the derangement of the respiratory function increased, the bowels became more and more distended with air. In hysteria also, where derangement of the respiratory function is plainly denoted by the heaving of the chest, sighing and dyspnœa, there is generally enormous and sudden inflation of the belly, &c. However this may be, gold is said to cause heaviness in the abdomen, with icy coldness of the hands and feet; painful accumulation of flatus at night; flatulent colic after the lightest and most moderate food, also after midnight, &c.

8. *Tuberous Nettlerash.*

The homœopathicity of gold to this annoying affection is more full and distinct than that of almost any other remedy; it causes itching, burning and pricking pains in the skin; wheat-like protuberances upon the legs and about the heels and knees, with violent itching, almost insupportable while walking; dirty yellow, small and large protuberances upon the legs and calves, like urticaria tuberosa, hard to the touch, burning violently, disappearing suddenly in a few hours, and less profuse when in a room, than when in the open air; small protuberances upon the legs, which from slight rubbing change into thick, hard knobs, &c.

Urticaria sometimes attacks the air-tubes and produces a most distressing cough; gold may also prove homœpathic to this, and also to obstinate coughs excited by a persistent tickling or itching in the trachea. Graves states that it is a curious fact that this sensation of tickling and itching is peculiar to the mucous membrane of the trachea, close to its bifurcation and opposite the hollow at the forepart of the neck, being never felt in any other part of the pulmonary mucous system, and suggests that many harassing night coughs and those excited by lying down may be brought on by mucus or serum trickling over that very sensitive part of the trachea where the tickling sensation is felt, the flow of the mucus to this part being favored by the recumbent position; he thinks this is particularly apt to be the case in those who scarcely cough half a dozen times in the course of the day, but the moment they lie down will be seized with violent and harassing cough which may last for several minutes and sometimes for hours with little intermission.

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9. *In Hernia.*

To many it might seem ridiculous to attempt the cure of Hernia by medical means; but of late years particular attention has been directed to this subject; the labors and advice of Dieffenbach are doubtless well known; the use of antimony and tobacco in the reduction of strangulated hernia is familiar to every old school physician, and full doses of Opium have lately been given with success, and with such perfect reliance, that the physician did not even attempt reduction by taxis. Gold is said to cause cutting shocks in both groins, forcing one to draw in the abdomen and draw up the feet (may prove useful in the colics of infants); drawing from the groins to the thighs; stiffness in the bend of the groins and in the loins, while moving the legs; sensation of weakness in the groins; pain in the groin, as if from a swollen gland; burning pain in the otherwise healthy inguinal ring; urging towards the inguinal ring as if a hernia would protrude; protrusion of a hernia with severe pinching pain, as if flatus passed into it, &c.

10. *In Double-vision and seeing only the upper half of things.*

Gold is said to produce both these effects, which are also said to occur in consequence of increased flow of blood to the head, which we have seen gold is apt to produce, also from the use of narcotics, especially Digitalis and Conium, both of which exert rather a depressing action on the circulation; they also occur in hypochondria and hysteria, and in nervous dyspepsia.

11. *In Scrofula.*

It seems homœopathic to scrofulous nasitis, as it causes swelling of the nose and redness about and under the nostrils. Kopp has effected cures with it in scrofulous swelling of the upper lip and nose; Jahn in scrofulous ophthalmia; Vogt says it cures mild cases, but in severe and obstinate ones, merely causes a marked improvement of the general health; a scrofulous steotoma of the head disappeared entirely under its use; in swelling and indurations of glands, neither cancerous nor scrofulous, also in indurations of the tongue, and in goitre, Wendt effected several cures; Serre has given it with success in roundish swellings of the testicles which have a tendency to break open outwardly, and discharge tuberculous or scrofulous matter.

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12. *In Nodous Gout, also when complicated with venereal and mercurial abuse.*

It will have been noticed that gold is recommended as homœopathic to almost all the dyscratic affections, viz.: against syphilis, scrofula, cancer, gout, &c.; it is evident that it cannot be strictly homœopathic to all these widely different affections; we will see in how far it is so to gout. It is said that apparent attacks of gout, especially after taking cold, are often excited by a sneaking syphilitic taint of the system, and afterwards often pass over into manifest syphilis; we have already proven the homœopathicity of gold to syphilis, and would merely repeat that it is said to have caused flat ulcers, three or four lines in circumference upon the scrotum, secreting a stinking ichorous pus, also swelling of the wrist, without pain, except when the hand is bent back or shut; hence it may prove homœopathic to this variety of gout. Arthritic subjects are said always to have a more or less evident hæmorrhoidal disposition, and the muriate of gold acts powerfully upon the hæmorrhoidal and menstrual flows; it causes painful swelling of the edge of the anus, painful stitches in the anus and rectum, warts and condylomata.—Vogt says that when gold is given against sycoses, they generally disappear very slowly, or not at all; while Brett recommends it as particularly useful, preferring it to every other local application, at the strength of six to ten grains to one ounce of lard, adding, however, that when only given internally, it is a very uncertain remedy. It is also said that when strongly flowing piles are present, that the gout is generally atonic, and seldom comes to an actual and manifest attack; they seem to exert a repressant action upon gout, and we have seen that gold acts powerfully on the hæmorrhoidal flow. Fully developed gout relieves a number of previously existing complaints, especially hypochondriacal affections, for manifest gout is incompatible with hypochrondria; hence we do not see how gold can exhibit a strictly homœopathic relation, both to gout and hypochondria. Gout is very apt to be excited by excessive enjoyment of physical love, and gold is very apt to predispose one that way. Gout always excites a great tendency to diseases of the urinary organs, especially to gravel and stone; hence arthritic patients frequently suffer with kidney pains, and are apt to be attacked with convulsions; this reminds one of Bright's disease, and gold is said to cause convulsions, also epileptic-like attacks, in which the patient falls down senseless and becomes blue in the face; it causes pains in

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the loins, frequent urging to urinate, turbid and sedimentous urine, &c. Those disposed to gout are said to sleep long in the morning. while gold causes obstinate sleeplessness after inflammatory affections; wakefulness and sleeplessness at night, restless sleep especially in the morning, frequent waking in fright out of sleep, day-sleepiness, slumber with weakness of the head while sitting by day, irrepressible sleepiness after dinner. So much for the pro's and con's on this subject.

13. *In Cancer.*

Westing saw good effects from it in open cancer of the womb, Hufeland, Hermann, and others only transient benefit; Niel gives several cases of malignant, gnawing, cancer-like ulcers, which became improved in their pus, the general strength of the patient increased, the wearing fever abated [this reminds one of the gold-fever] and cicatrization soon followed; Grotzner saw benefit in scirrhus of the womb, but none in open cancer; Hoffmann cured a case of scirrhus pylori with it; Duportal cured a cancerous ulcer that had destroyed the upper lip, attacked the soft part of the nose and left cheek, and rendered the maxillary bones carious. In the cancerous cachexia the albuminous element of the blood predominates, while we have seen that gold tends to produce an arterial congestive or inflammarory fever, in which the fibrinous element predominates, hence gold may act antagonistically to cancer.

Among other marked effects of gold, are great acuteness of sensibility, with over-sensitiveness to every pain; reminds one of spinal irritation.

Great sensitiveness to cold air, or great love of the free air, even in bad weather, as it agrees with the patient.

Caries of the mastoid process; offensive purulent discharge from the ears; hardness of hearing from enlargement of the tonsils, with difficult speech; roaring in the ears.

Disinclination to eat, especially meat; great desire for coffee. Dislike of meat is most common in plethoric, or pregnant persons in fevers of a putrid character, &c.; it sometimes precedes an attack of metrorrhagia; desire for meat is said to be most common in arthritic subjects, and in putrid angina.

In induration and prolapsus of the uterus.

In violent congestions to the chest and severe palpitations.

In such severe backache, that the patient can scarcely move a limb in the morning; it is peculiar to the gold-pains that they are most severe in the morning before rising.

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OLD SCHOOL HOMŒOPATHY.

BY JOHN C. PETERS, M. D.

1. In the American Journal of Medical Sciences, Vol. II. p. 243, in the Report of Drs. Coxe, Condit, and Meigs, a committee appointed by the Philadelphia Medical Society, to collect facts in relation to Small Pox and Vaccination, we read that "It has been already shown in Germany, that even medicinal plants are capable of withdrawing us from the influence of contagious diseases; thus, Belladonna, which in certain doses produces a scarlet efflorescence, or inflammation of the skin, is habitually resorted to by many practitioners in that country, to anticipate, as by a substituent and safe inoculation, the more dangerous or mortal assault of scarlet fever; a practice by which many lives have already been rescued from a premature termination. This homœopathic practice is but a result of the original proposition of Dr. Jenner." Here it is clearly and fully admitted that the Hahnemannian preventive treatment of scarlatina is equally rational and probably as successful as the Jennerian against small pox.

2. In Brathwaite's Retrospect, Part 10, p. 73, we find an article on the use of vegetable acids in acidity of the stomach, and learn that Dr. Tracy's experience with the vegetable acids, as correctives of acidity, has been considerable; he has prescribed them in a large number of cases, and nearly all with decided benefit. Dr. T. himself was subject to repeated and severe attacks of conjunctivitis, accompanied by acidity of the stomach, which he had attempted to correct by the early and free use of soda, but in vain; it had a very slight and temporary effect. He had for months abstained from the use of acids, under the impression that they were not suited to his state of health, but having received no benefit from soda, he was induced to take a glass of lemonade, and almost immediately experienced a very copious eructation of gas (may not the doctor have had an alkaline stomach?) with great alleviation. The remedy was again and again repeated, and the threatened ophthalmic attacks effectually prevented.

Dr. Tracy has found vegetable acids uniformly and entirely successful in removing the disposition to attacks of acidity of stomach in persons subject to them; and his impression is, that in all such cases they can be relied upon with more confidence than any other remedies. In cases of acidity from pregnancy, he has found the sub-acid fruits of great service, while those

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that were tart could not be borne, and mineral acids were decidedly injurious, while the whole range of alkalies and absorbents were of little or no avail." Is it possible that the tart fruits are too strong, i. e. too acid, while the sub-acid fruits contain a sufficiently weak or dilute acid to prove curative?

In the 11th Number of the same Journal, page 61, we find another article upon the same subject, and are informed by the editor, that "this may seem a very unscientific mode of procedure, but facts seem to corroborate the value of the practice in some cases." The editor seems rather reluctant to enlarge the boundaries of his science so as to include all the facts. He, like the New-York Academy of Medicine seems almost incapable of realizing, that the Art and Science of Medicine, is never stationary, nor defined by positive bounds, nor restricted within any known limits. However this may be, we learn that Dr. Chapman, of Philadelphia, has experienced relief from the same remedy. The late Professor Wistar informed Dr. Chapman that he had for a long time ineffectually endeavored to relieve an opulent merchant, who was very speedily cured by drinking copiously (what do the high dilutionists say to that?) of sour beer, such as had been utterly condemned by the brewers as spoiled and unsaleable. During nearly a whole winter Dr. Chapman had under his care, in consultation, a most distressing case which proved utterly intractable to the regular (does the Dr. use this word in the same sense as the N. Y. Academy?) remedies, which, the next summer, promptly disappeared by the patient subsisting on the sour pie-cherry. Nor is this the only instance which Dr. C. has heard of cures ascribed to tart and perhaps unripe fruit of several kinds, and one especially from Professor Hodge, to apples; he also attended a case with Dr. I. Rhea Barton which yielded immediately to wheaten mush and vinegar, largely and eagerly consumed.

3. The effects of Ergot in producing contractions of the uterus, and thus staying, for a time at least, inordinate discharges of blood from that organ when owing to a relaxed condition, are so well established that we are right in assuming that it is perhaps the most homœopathic remedy to amenorrhœa, when depending upon constriction of the uterus. Yet, many old school authorities concur in recommending it in amenorrhœa, although like Churchill (see Diseases of Females, p. 83,) they agree in asserting that they "would scarcely expect it to be useful in exciting the menstrual secretion, and that it is difficult (?) to determine on what [regular!] principle it does so." Still Churchill admits that "as to the fact, we have the evi-

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dence of Dewees, of Locock, of MM. Roche, Nanche, Pauly," &c. Churchill himself failed with it, but states that his trials have not been sufficiently numerous to decide the question of its utility; he, however, gave 5 grain doses 3 or 4 times a day, viz. precisely the same quantity which he uses in menorrhagia (see page 105), with great benefit, seldom or never failing to check the discharge without producing any unpleasant symptoms. Surely when one and the same remedy is used in such antagonistic diseases, the dose should be varied; if 5 grain doses repeated 3 or 4 times a day be sufficient to excite the antipathic effects of Ergot in menorrhagia, they surely will be more than sufficient to excite the like effects in amenorrhœa, and thus perpetuate the disease; while, if there had been an endeavor on the part of nature to produce a flow, that would be most effectually counteracted. Ashwell speaks still more unfavorably of the use of Ergot in amenorrhea, but that seems perfectly natural, when he tells us, that he uses 10 grain doses, several times a day. Pereira says that some few cases have been published tending to show that Ergot is useful in amenorrhœa; but it appears to him more calculated to cause than to relieve amenorrhœa; however, he quotes the testimony of Neal, and Sobernheim, that of Rondack, in favor of its use.

But while old school physicians are thus using Secale homœopathically, it is very singular that the homœopathists rarely or never recommend or use Ergot in amenorrhœa, while they frequently do both in menorrhagia, and the high dilutionists are more frequently guilty of this than the low. Here we have the singular spectacle of two classes of physicians condemning certain modes of treatment theoretically, which they are in the habit of relying upon practically.

But Ergot is more homœopathic to dysmenorrhœa than to amenorrhœa, and we are confident that we can also show from good old school authorities that it has proved useful in the former disease. Sure enough, Sobernheim (see Mat. Med. p. 51) says, that Chapman and Levrat Perotton have used it successfully; and Dunglison (see New Remedies p. 438) says, that the use of Ergot has been extended to amenorrhœa and dysmenorrhœa, and many cases have been published in confirmation of its being possessed of curative virtues against these complaints.

4. In the Illinois and Indiana Medical and Surgical Journal for January, 1847, page 385, we find an article on blindness caused by the use of Sulphate of Quinine, written by Dr. McLean, Professor of Materia Medica in the Rush Medical College. We

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are told that Quinine when freely administered produces a species of intoxication, tinnitus aurium, a sense of fullness in the head, cephalalgia, and other affections; and sometimes blindness, more or less lasting.

M. Trousseau relates the case of a tailor, who, for the relief of a periodical asthma, took 48 grains at one dose; in 4 hours he experienced ringing in the ears, dullness of the senses, and vertigo; and in 7 hours he was blind and deaf, his mind wandered, and he was unable to walk; these effects gave way spontaneously during the night. A young girl at the Hospital Cochin, in consequence of having taken freely of the Sulphate of Quinine, became affected with amaurosis, which continued at the end of three weeks notwithstanding appropriate (?) and energetic (!) means were employed for the restoration of her sight.

Rognetta says, it may cause deafness, blindness, hallucinations, hæmaturia, &c.

The blindness may be prolonged for months or even years.

Case 1*st*. Mr. P. of the town of Barry, Jackson Co., was in the year 1845 attacked with a low grade of remittent fever, the nature of which was such as to cause the attending physician to administer Quinine in large and frequent doses. About 16 grains were ordered every hour, until nearly one ounce was taken. Before the Quinine was discontinued, he became perfectly blind; which state, with a slow and gradual amendment, continued during the first year, and his sight is not yet perfectly restored.

Case 2*d*. Mrs. R. of the town of Concord, was a few years since reduced so low that her life was despaired of; as a last resort, large quantities of Quinine were given, and while taking it she became blind and continued so for several weeks; as she recovered her health, the blindness gave way, and her sight was finally restored.

Case 3*d*. P. M. Everett took 3 grain doses of Quinine every hour for three days; in a short time he became deaf, and soon after so blind that he could not see a burning candle when placed immediately before his eyes; after some weeks his sight became partially restored, but continues more or less imperfect, even at the present time. During the greater part of the first year, he could look steadily at the sun without seeing it, or even any painful sensation being produced. When he first began to see sufficiently to read, which was during the course of the second year, he could but perceive a small luminous spot upon the paper, about one inch in diameter, within which he could distinguish letters, but all without this was cloudiness and confu-

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sion. During this time the pupils were very much dilated, and he could see objects at a distance much better than those near by; his sight has improved ever since, and at the present time, although quite imperfect, is sufficiently good to enable him to read and write, although with some difficulty: the pupils are still considerably dilated, and it is with great difficulty that he can discern objects by twilight; the direct rays of the sun upon the head produce pain there, accompanied with a painful sensation deep in the orbit, and disordered vision; exercise easily produces fatigue, by which his sight is much impaired.

Case 4th. Dr. R. took 3 drachms of Quinine in 36 hours, in doses of 6 grains each, at the end of which time he became perfectly blind; his hearing also was somewhat blunted, although not as much as his sight; in two days his sight was again considerably restored.

Remarks by Professor McLean.

"We think it clear that the blindness in the foregoing cases was the effect of Quinine; for we see it in each, coming on suddenly during its administration in large quantities, and at a time when no other medicine was being given that would be likely to produce such results; here cause and effect appear to be closely connected, and are so plain as scarcely to admit of the possibility of a doubt." Dr. McL. also thinks that the proximate cause of the Quinine-blindness was mainly an affection(! of the retina or optic nerve, producing amaurosis! This supposition exhibits a decided proclivity on the part of the learned Doctor, towards astute and profound exercises of the reason, and he "records his facts and suppositions in the hope that they may be the means of causing some useful suggestions in relation to the physiological effect and administration of this medicine."

In connection with the foregoing, mentioning the case of a gentleman named Porter, who had been amaurotic for sixteen years in the left eye; for a periodical neuralgia he was ordered 32 grains of Quinine, to be taken in doses of 4 grains each, every two hours. Under its influence the neuralgia disappeared, and on the following day he could see objects quite distinctly with the amaurotic eye, much better than ever before, since it first became diseased, and he was much elated with the thought of soon regaining its sight. He, however, took no more Quinine, and in a few days the benefit produced to that eye was entirely lost.

In Lawrence's Treatise on the Eye, p. 499, we find a little

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chapter on amaurosis produced by Belladonna, Hyosciamus, Stramonium and Cherry Laurel, Succory Coffee, Bitter Cress, Bitter Almonds, Gentian, Quassia, Simaruba, Centaureum, Cynoglossum, Ammoniacum, Galbanum, and the various preparations of Lead.

We once witnessed an accidental cure of amaurosis at the Eye Infirmary by Lead. A patient blind in one eye, got slight conjunctivitis of the sound eye; naturally fearful of any trouble in his only remaining eye, he applied for assistance, and received a lead wash, a few drops of which were to be applied to the inflamed eye; the patient mistaking the directions, applied it also to his blind eye, and returned to the Eye Infirmary able to read a newspaper with it.

A LIBERAL PROFESSOR.

In the first number of the third volume of Dr. Fleischmann's Journal, I notice at the close of a long and valuable contribution on *Bryonia* by Dr. Zlatarovich, Professor of Pathology and Pharmacology in a distinguished allopathic college in Vienna, member of the Imperial Society of Physicians, &c. &c., the following liberal remarks by him:

"Finally, I wish to address myself to those who may open their eyes with astonishment, that a professor of the *ordinary* Materia Medica should by the above contribution have given a public testimonial in favor of the truth of the principle '*similia similibus*,' in the healing art. In this age of agitation, even science and natural philosophy are influenced by sectarianism, and too frequently do we see abuse heaped upon those who differ from each other, simply because they differ. However, let every body take care of his own conscience. For my own part I am of opinion, that a professor of the Materia Medica is called upon, above every body else, to investigate the powers of drugs and their effects. In fact I believe that by this 'proving' of Bryonia I have rendered a service, which will soon be gratefully acknowledged. I believe it for this reason: that I have thereby furnished to the disciples of the new school (*Homœopathy*) a valuable contribution for enabling them to unravel many doubts respecting the mode of action of Bryonia, and have totally uprooted the '*opinions*' of the old school on the curative powers of this plant.

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"God grant that the priests of the healing art may soon become convinced, that there is no other way for obtaining an accurate knowledge of the curative powers of a drug *than the way of experiment!* In anatomy and physiology this course has always been pursued. In pathology matters used to be taken easier, and the hobbies were now the *archeus*, then the *alkalies* and the *acids*, or the *anima* or the *pneuma*, then again the *yellow and black bile, the plegma*, &c., until in modern times it was determined to submit all the theories and hypotheses to the test of experience. Physical diagnostics and pathological anatomy bear evidence that in these branches too the spirit of investigation is ripe, and a prominent desire exists to leave the road of speculation, and to rely on observation and experience. But if, on the one hand, it is meritorious to obtain clear views on the various morbid changes, for instance in the lungs; to be able to distinguish red from gray hepatization, solitary tubercles from tuberculous infiltration, etc., it is as meritorious, on the other hand, to determine by physiological experiments what organs and systems, what functions, what secretions, &c., are particularly affected by a certain drug, and in what way its power manifests itself. Such experiments *only*—repeated and made with accuracy and observation—can give us a knowledge of the power of drugs; and *experiments only can furnish the proof what healing principle is the most valuable.*

"Nobody can doubt that cures may be effected in the most various ways; every body, acquainted with the medicine of the day, knows, that individuals treated according to the principles of *Rasori, Tomasini, Broussais*, and many others, have recovered. The only question is, what method of healing mostly deserves the credit '*citò, tutò et jucundè sanare.*'

"Let us never forget that we have a common object in view: to aid suffering humanity; that we should all, for the sake of the sick, endeavor to find out the shortest and surest road for reaching our aim. This road should not be obstructed by egotistical motives, preconceived opinions, vanity, or blind parrotism! Let us observe and try! let us search and examine! What we gain, belongs to science, to mankind."

A. C. Becker, M. D.

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THE PROVING OF THUJA.

BY CARL MAYRHÖFER, M. D., FROM THE ÖSTERREICHISCHE ZEITSCHRIFT.

(Continued from No. 10 of Examiner.)

From the 29th of October to the 6th of November, Z. increased his dose ten drops each day, so that commencing with 70 drops on the first day, he took 150 on the last.

The prover's diary contains nothing remarkable for these ten days, except that the excretions* were increased in quantity, and were less consistent; which remark will also apply to the previous days.

From the 7th to and including the 22d of November, he continued the Thuja in a similar ascending scale of doses (ten drops a day), and took on the last named day 300 drops of the tincture. (He omitted the dose on the 16th.) The results were as follows:

7th. Painful *throbbing in the base of the glans* (for four minutes); afterwards, pains (of what sort? M.) in the lower half of the spinal column and in the sacrum, continuing and aggravated by bending the body; also in both knees. These pains continued also during the following day, and were attended by great general weariness.

9th. Having taken much exercise this day the pains became less; on the 10th, however, became more violent, decreased by degrees on the following days, and finally ceased on the 16th, on which day he took no dose.

17th. These (undescribed pains! M.) returned again, and were especially violent in both hips, weaker in the sacral region and knees.

18th. They ceased in the sacral region, but continued in the hips and knees.

19th. An eruption upon an inflamed surface appeared on the left side of the chin.†

22d. Violent buzzing in the ears, lasting several hours.

From the 23d of November to the 5th of December, the

* Urine, fæces, and perspiration?—*Mayrhöfer.*

† Its form? It is indispensible, in describing objective symptoms, that their form and duration should be noted with the greatest accuracy. —*Mayrhöfer.*

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Thuja was omitted, and all the previously described symptoms vanished.

From the 6th to and including the 20th of December, he again continued the experiment, taking on the first day 310 drops, and daily increasing the dose by five, until he arrived at 380 drops on the last day. He observed no effects.

From the 22d of January to and including the 2d of February, he made a short experiment with dilutions (without saying which! M.) and likewise perceived no alteration in his sensations.

S.

Dr. Zwérina, thirty-six years old, perfectly healthy, and of a sanguino-choleric temperament, proved the Thuja as follows:

1845, January 23d. He began with forty drops of the tincture prepared according to Hahnemann's direction, which he took at nine o'clock in the forenoon, an hour after breakfast, and observed no other result than that during the following night he was obliged, contrary to his usual habit, to rise *three times for the purpose of urinating*. The urine passed was a straw-yellow and amounted to a full measure.

On the following day he took nothing, and observed no symptoms which he could ascribe with confidence to the drug.

25th. Thirty drops, taken early at about nine o'clock. At ½noon, slight *burning in the urethra*, leaving behind a voluptuous feeling, especially after urinating. The quantity of water passed was again increased during the night; it was clear and straw-yellow. Sensation of great fatigue in the groins. His appetite was small, and his customary morning evacuation did not take place.

26th. To quicken the action of the remedy, the impatient prover took fifty drops morning and evening. Immediately thereafter, *burning in the urethra and copious urine;* the customary daily evacuation absent. *Disquieting dreams, frequent urination*, and four pollutions, disturbed an unrefreshing night's rest. Sleep came on late, an unusual occurrence with him.

27th. These symptoms did not deter the prover from taking 100 drops this day, fasting. Thereupon he experienced headache in the region of the forehead and eyebrows, such as usually precedes a catarrh; *ill-humor*, lasting all day; want of appetite, with frequent eructations; repeated *shuddering*, beginning at the head; slight *burning in the region of the*

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kidneys, ceasing after an hour, and followed by still *more copious urine*, accompanied by *burning*. The feeling of fatigue in the region of the groins passed into a *drawing* pain extending into the glans penis, and the *inguinal glands* were perceptibly swollen. A *general feeling of malaise, with internal chills*, came on, and instead of his usual cheerfulness, *peevishness*. For three days he has had no stool.

28th. Notwithstanding this, he again took 100 drops early, fasting, "and now," says he, "for the first time, the drug fairly mastered the health that had so far defied it."

An hour after the dose, the *burning in the renal region* increased, and was accompanied by *drawing along the urethra up to the vesica;* the urine diminished in proportion as the burning in the ureters increased. The glans began *to grow moist* and to secrete *a thin mucus*. In the evening he had a slight chill, attended by *dryness of the throat, with painful deglutition*, vomiturition, and such a feeling of illness, that he was obliged to go to bed before the time. His interrupted sleep was full of *anxious dreams*, and he continued the fourth day costive.

He was now so well satisfied with the pathogenetic effects of Thuja that he dropped the experiment. By degrees his abnormal symptoms disappeared; first the headache, then the dryness of the throat, and lastly the renal affections; on the 1st of February, after a constipation of eight days, he had a copious, hard evacuation.

According to this proving, Thuja manifested its especial power in the uro-genital system, and it is much to be regretted that so promising an experiment should have been closed after the exhibition of only 350 drops.

T.

The following physiological proving of Thuja, by our associate, Dr. Holleczek, practising physician in Klagenfurt, has only reached us while these sheets are going through the press. It contains, for the most part, only subjective symptoms, and adds scarcely any new lines to the portrait of the Thuja sickness depicted by the experiments already detailed.

Dr. Holleczek has a strong constitution; had an intermittent fever at twelve years old, but was otherwise well until his twenty-second year. He then had a slight attack of pneumonia, and was perfectly restored in a few days by homœopathic treatment. He has had no other sickness. At the time of his first experiment he was twenty-five years old. The symptoms below, follow in chronological order.

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First Proving.

1838, September 2d. He drank at one draught a half ounce of the strong tincture of Thuja prepared according to Hahnemann's directions, having first well mixed it with eight ounces of water.

Violent pressing headache in the region of the vertex; sensation as though something were squeezed out at both ears; heat in the face (immediately); feeling of heat in the whole chest; stitches in the temporal region, in the elbow and heels.

Pressing pain in the occiput; head-pains as though the head were stuck through from one temple to the other; slight eructations (all day).

Stitches in the metacarpal bone of the little finger.

Stitches in the scrobiculus cordis; sticking beating in the middle of the right side of the chest; stitches in the cardiac region; pressure under the sternum; sticking in the pit of the throat.

Drowsiness: violent pressing pain in the occiput; feeling, when turning the head on one side, as though a piece of lead lay in the brain.

Stitches from the spine through the epigastric region, forward to the pit of the stomach; frequent sticking pains in the right shoulder-joint; repeatedly during the day, a cutting pain, perpendicularly through the middle of the chest from below, upward as far as the pit of the throat; sticking pains in the forehead; extremely violent sticking pain in the metatarsal bone of the middle toe of both feet; pressure on the right side near the scrobiculus cordis, as if from a foreign body, with frequent stitches, worst in the morning.

Itching on the inner surface of the prepuce; extremely violent pain in the middle toe of the right foot; several stitches in the interior of the right ear; painful, frequently repeated stitches in the right testicle; dreadful tearing pains, which darted like lightning hither and thither through the urethra, with simultaneous violent stitches in the anus (in the afternoon when seated).

Quivering twitching from the ear to the left corner of the mouth, sticking pains in the left shoulder joint; tearing pains in the metatarsal bones of the right foot; dull sticking pain in the metacarpal bone of the middle finger of the left hand; sticking in the great, fourth, and little toes of the left foot.

Pressure in the larynx; sensation of burning and constriction of the larynx; tearing pains in the under jaw, which began on both sides, in the region of the joint, ran forward together in a line to the chin, united, and instantaneously disappeared.

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Painless twitching of the middle finger of the right hand; very painful stitch through the upper part of the left breast from before backwards, which immediately disappeared, and left a feeling of twitching in the spot: tearing pains in the bones of the left fore-arm and wrist, stitches in the point of the third finger of the right hand; sticking in the sole of the right foot, from within outwards; feeling of dislocation in the middle of the spine, increased on the right side by violent bending of the body.

Second Proving.

September 4th. The same dose as on the 2d.

Pressing headache on the vertex and occiput, with the sensation as though there were lead in it, aggravated by moving the head and by a false step, with the feeling as though the brain were loosely moving about: when lying on the back, knocking in the chest under the sternum, extending to the sacrum: while lying on the right side, many stitches in the same side of the abdomen, which disappeared on pressure, and returned on walking in the open air; in the evening, when walking in the open air, feeling of fullness and pressure in the occiput; on moving the head sideways, vertigo.

Constant, painful pressures from within toward the nipples; painful pressure in the right abdominal region, which disappeared on making pressure there with the hand, but became sensible again (during the whole day) on taking a deep inspiration, or on forcibly expiring: constant tearing pain in the metatarsal bone of the middle right toe; stitches in both knees when walking.

Cough, with expectoration of mucus when eating; after eating, cough with raising of a tough mucus—sticking headache in the region of the vertex; painful tension in the occiput from one ear to the other.

Little thirst; urine with a penetrating odor.

Stitches in the right wrist joint; boring from without inwards in the region of the right iliac bone; sticking in the middle of the sole of the left foot, from within outwards; a quick drawing, boring pain through the fore-arm and the metacarpal bone of the index finger; painful tension of the hypogastric region with occasional sticking pains, aggravated by deep inspiration (in the forenoon with an empty stomach); painful stitches in the skin of the left elbow.

Pressing in the middle of the chest upwards into the neck, inducing difficult respiration; sticking pains in the region of

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the heart; constant pressure in the middle of the chest, with sticking pains during the attempt to inspire deeply: frequent creeping chills; pressing pains in the whole upper part of the chest, becoming much more violent by pressure; cutting pain from the spine to the pit of the stomach.

Sensation as though the right side of the scrotum had been bruised; cutting pain deep in the left side of the abdomen; sensation when nodding forwards as if the brain were pressed out at the vertex; sticking in the right thumb, tearing in the right tarsus and great toe; cutting in the left side of the upper lip; dull pain anteriorly in the lower third of the right thigh; sticking in the bones of the lower leg from the tarsus up to the knee; tearing in the scrobiculus; on bending the body to the right side, tearing in the right popliteal space.

Fine sticking in the third joint of the index finger, from within outwards; violent stitches in the anterior extremity of the urethra, without urinating; sticking in the external malleolus, in the hip-joint, in the metacarpal bone of the middle finger, on the inner edge of the foot, in the heel; dull sticking pain in the joint where the thumb and index finger are articulated with the metacarpus; dull sticking in the interior of the right ear.

Twitching of the muscles on the right fore-arm; feeling, when seated, as though the breast were compressed from before backwards, aggravated by stretching the body; painful stitches in the interior of the left chest; dull cutting under the left shoulder-blade; cutting pain on the left side near the scrobiculus.

Stitches in the left testicle (for eight days); when coughing, dull sticking pains in the right inguinal region; violent sticking in the region of the spleen, during a meal; very violent stitches in the toes, noon and evening, on bending the body to the left side (on the seventh day).

Sticking pain in the liver, when walking; sticking pains in the right elbow; sticking in the metacarpal bones of the left hand; oppression of the chest; necessity of frequent deep breathing; dull sticking pain in the left parietal bone; sticking pain in the brain from the neck up to the vertex; stitches through the brain, from below upward, especially when coughing; stitches in the left ala of the nose; vague stitches in the left lung; burning in the forepart of the urethra, without any flowing; drawing sticking pains in the liver; cutting pains in the rectum.

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Third Proving.

October 31st. *Eight drops of the tincture of Thuja* in a table-spoonful of water.

Sticking in the scrobiculus; sticking beating in the fossa navicularis of the urethra (coming on daily for two weeks, at irregular intervals, and frequently repeated in an hour); sticking in the region of the spleen at indeterminate times, but particularly during dinner and supper (at intervals of four days); an evacuation early every day, with urging, although only a small quantity of thin fœces was quickly passed; afterwards feeling of inactivity in the rectum.

Vertigo, coming on of a sudden after dinner (while looking up); *headache in the occiput;* pressing with *stupefaction* when moving the head to one side.

Corroding aching of the right half of the scrotum.

All the diameters of the chest seem to have become shorter: painful tension in the whole *chest* when inspiring deeply; sensation of want of pliability *of the thorax* and of insufficiency in the inspired air; at night short breath; necessity to assist by breathing deeply.

Violent cutting in the *point of the tongue* and on its under surface; cutting in the upper *eyelid*; quivering of the muscles of *the left thigh* just above the knee; violent pressing pains in the left elbow, as if in the bone.

Fourth Proving.

November 15th. *Fifteen drops of the tincture of Thuja* at a dose, in a table-spoonful of water.

Sticking in the middle of the *right side of the chest* near the sternum (in a quarter of an hour); stitches like lightning transversely through the chest.

Tearing pain in the *tendo Achillis* on the right side; strong extension *of the right knee* impossible on account of a sensitive, painful obstacle in the popliteal space; the same symptom in the left knee; cutting pains through the chest in different directions; stitches in the right *tendo Achillis.*

Twitching pains under the *heart;* tearing and sticking pain *in all the joints;* stitches through *the whole brain* from below upward.

Burning *when urinating;* burning and sticking in the fore part of the *urethra.*

Cutting in the *right iliac region;* tearing in the *right hip joint;* tearing in the *left little toe;* violent sticking on the

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outside of the left knee; violent sticking under the right knee; stitches in the sole and in the palm; itching in the rectum after stool; boring, as of a worm, in the rectum, from within outwards, after an evacuation.

Fifth Proving.

1840, January 6th. *Ten drops of the fourth dilution* (5 : 59), in an ounce of water.

Vertigo, when seated, returning as though in pushes every minute (after half an hour); sensation as though the brain were raised several times in succession; very painful stitch on the right side near the sternum on the fourth true rib, repeated, in only one spot; dull sticking pain in the left fore-arm, near the elbow; tearing pain in the right shin-bone from the knee down, and from the tarsus up to the knee (subsequently repeated); sticking pain in the right knee, coming from the popliteal space; sticking in the left elbow.

Excessive rumbling in the abdomen; dull sticking from the right ear and under the lobule outward; twitching in the muscles under the left scapula; very painful tearing in the right tibia downwards (the whole day); cutting from below upward on the right side near the sternum.

Frequent eructations; tearing in the left leg downward; pressure on the sternum not affecting the respiration; pressing feeling in the pelvic region on the right side near the linea alba, as if from a foreign body.

7th. Fine superficial sticking in the points of the fourth and little toe; continual, dull sticking pain in the left shoulder-joint; a tearing pain from the ischium through the posterior part of the right thigh, as far as the popliteal space; a cutting through the left half of the under lip, from below upward; twitching in the integument of the occiput, on the right side; violent ringing in both ears; in the evening, sticking in the left palm; tearing in the outer border of the right sole.

Sixth Proving.

January 8th. *Fifteen drops of the second dilution* (5 : 95).

Dull confusion of the occiput, ending in a pressing headache which lasted half an hour; sticking on the right side, near the middle portion of the sternum; several stitches coming from the interior of the chest; twitching in the right ear with sticking pains; both ears stopped; tearing in the leg;

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stitches in the brain, from the occipital foramen upwards; tearing in the right eyeball; sticking pain in the left elbow several times during the day; tearing in the right eyeball, coming from the brain; sticking on the left side, near the scrobiculus, from within outwards; sticking and ringing in the right ear; sticking pain in the right fore-arm near the elbow; tearing in the metacarpal bone of the little finger; frequent tearing in the great toe of the right foot; dull sticking near the middle portion of the sternum on the left side; tearing pain in the metacarpal bone of the index finger; dull sticking in the left frontal region; cutting in the right shoulder-joint; stitches in the right metacarpus and in the left eyeball; cutting from the point of the left scapula through the chest to the edge of the middle portion of the sternum; stitches in the fourth toe of the left foot, in the left sole, and in the right thigh.

9th. Early, after rising, ringing in the ears; sensation of heaviness in the occiput; cutting under the sternum, which embarrasses the respiration; cutting in the right side of the chest, extending from the sternum to the right elbow; very sparing stool, half fluid, with a sensation as if the rectum were very inactive; a feeling in the vertex as if a nail were driven in there; very violent cutting in both loins when walking; ringing in the ears, frequently during the day.

10th. Cutting in the urethra from the perinæum forward; very violent, dull sticking pain in the right testicle; tearing in the left knee; ringing in the ears; evacuation slight, not satisfactory; sticking pain in the pelvic region on the right side near the linea alba; stitching in the splenic region.

11th. Sticking pains in the left testicle, several times during the day; tearing in the right carpus; severe cutting pains in the urethra (perineal region); dull stitches in the rectum upwards; a stitch from the foramen magnum through the brain to the vertex; dull sticking pain near the lower part of the middle portion of the sternum, on the right side; tearing in the right leg; no evacuation; cutting in the epigastrium, from the spine outward; feeling, when laughing moderately, as though the thorax were strongly compressed, with shortness of breath; dull sticking in the popliteal space impeding the extension of the leg.

12th. Tearing in the right lower leg; sticking in the left knee, early in bed; several dull stitches near the scrobiculus on the left side; tearing in the metacarpal bones of the right hand; a sticking pain on the left side from the sacrum to the left testicle; tearing in the left lower leg.

13th. In the open air, tearing pains in the region of the

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heart, and from there into the left scapula; sticking in the left knee; tearing in the left lower leg; roaring in the ears.

14th. Tearing in both legs and in the right thigh.

15th. Tearing in the right thigh; ringing in the ears several times during the day.

16th. Tearing in the right foot.

Seventh (and last) Proving.

17th. Ten drops of the first dilution in an ounce of water produced no new symptom. The almost exclusively subjective symptoms which the prover noted from the 17th to the 20th were summarily as follows: *sticking in and on almost every part of the body*—on the vertex, through the brain, in the eyeball, in the sternum, under the nipples, in the ribs, through the chest, from the scapula through the heart, in the groins, in the maxillary bones, shoulder, elbow, and knee joints, in the ankle and wrist, in the os ilium, in the thigh, in the calf, in the arm and fore-arm, in the metacarpal and metatarsal bones, in the tendo Achillis, in the final joint of the thumb and great toe, at the root of the nails of the thumb and index finger.

Tearing in the concha, the eyeball, the scrobiculus cordis, the shoulder-blade, the shoulder and hip joints, the thigh, from the ischia to the knee, in the leg, in the arm and fore-arm; *cutting* in the perennial portion of the urethra; twitching in the flexor of the left thumb, in the right cheek, under the scapula; sensation of dislocation in the knee and hip joints (aggravated by walking in the open air); painful oppression under the sternum (increased by deep inspiration) and in the inguinal region; ringing in the ears for several hours; roaring in the ear (early in bed); increased urgency to urinate; feeling of compression in the testicle; sparing, papescent stool.

U.

Dr. Holleczek also caused three experiments to be made by his sister *Josepha*, a healthy, active girl, seventeen years old. Like those of her brother, they produced for the most part only subjective symptoms.

First Proving.

1840, January 6th. Ten drops of the 4th dilution of Thuja in an ounce of water.—During the same day, sensation as though the skin on the temples and forehead were shrunken

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and hard, continuing two hours; drowsiness; fine sticking in the inner malleolus of the right foot; sticking in the region of the spleen, twice in succession, with consequent soreness there; pressing and fine sticking under the sternum; sensation of weakness in both knees (disappearing in the right in ten minutes, in the left after an hour); sticking in the region of the fifth true rib on the right side; great lassitude and weakness in both arms, with frequent tearing in them; vertigo; superficial headache, as if the skin were rendered tense on all sides; frequent yawning; chills over the whole body; sticking in the left palm, the right axilla, and near the pit of the chin; headache in the forehead, pressing, the whole day; pressing in the eyes; chills in the evening in bed; several stitches in the right axilla and temple.

On the following day; repeated tearing in the forehead and sticking in different parts of the body (elbow, tibia, mammæ, chin, scrobiculus, scapula, shoulder-joints).

Second Proving.

January 8th. Fifteen drops of the second dilution.—The same day, *tearing* (in the small of the back, in the nape, over the temple, in the knee-joint, in the tarsi, and some of the finger-joints); *sticking* (in the ear, under-jaw, splenic region, hip-joint, iliac region, in the middle of the thigh and leg, in the tarsus, shoulder-joint, arm and fore-arm, carpus); both these feelings, tearing and sticking, most on the right side; ringing in the ears; heaviness and tension in the back; sensation of soreness in the scrobiculus cordis.

The symptoms developed on the succeeding days, from the 9th to the 16th, are little more than a repetition of those already given.—She had *stickings* and *tearings* sometimes in the same parts, sometimes in others (ear, ear-cartilage, alæ of the nose, near the sternum, in the epigastrium, between the shoulder blades), and sometimes in all the limbs (on the 9th, in the evening in bed). She also complained on the 9th of stoppage of both ears, and on the 10th of painful soreness in the middle of the back, and pain as if bruised in the right shinbone.

Third Proving.

January 17th. Ten drops of the first dilution in an ounce of water.

The sixty-six symptoms which the prover perceived and

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noted during this experiment, from the 17th to the 21st of January, consist mostly also of *sticking* and *tearing*, now in this and now in that part of the body—scarcely a spot was intact. The pain seems for the most part to have been transitory. I only find recorded on the 18th, a sticking in the left iliac region "lasting all day." On the 21st she had a tearing in the left fore arm, shooting from the elbow to the fingers so that they were suddenly flexed. On the 18th she had, beside sticking and tearing, "feeling as if bruised in the back and buzzing in the ears." There is only one objective symptom in addition to the sudden flexion of the fingers just mentioned; "increased secretion of urine" on the day of the dose.*

CHAPTER V.

Symptomatology and Characteristics of the Thuja-Sickness.

The process of determining the characteristic marks of a remedy, can, from its very nature, be nothing more than that of throwing into natural groups the scattered materials afforded us by the provings, and estimating scientifically the morbid elements thus obtained, in order in this way to obtain its therapeutic indications and raise the drug to the rank of a remedy.

In this difficult task three main points, in our opinion, must be kept in view.

1. The *where* of the morbid manifestations, that is, the organic substratum, the locality, the locus in quo of the sickness.

2. The *how*, that is, in what way and after what fashion

* The experiments which Dr. Fröhlich instituted with Thuja upon two rabbits, led, unfortunately, to no result. In order to avoid any possible disturbance from alcohol, he prepared the fresh juice of the arbor vitæ, and for a week several times moistened with it the left eye, the anus, and a bare spot on the skin of one of the rabbits, and administered to the other for the same length of time, at first one, and finally three coffee-spoonfuls of the juice a day. It is to be regretted that Fröhlich, who has already given us several beautiful drug-provings upon animals, was on this occasion, as he himself says, "obliged by divers circumstances to abstain from the prosecution of his experiments with Thuja." In the short period of this trial, there was neither an objective production of the Thuja-sickness, nor were the subjects of it mortally poisoned. M.

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the pathogenesis of the drug is developed in subjective and objective symptoms.

3. The discrimination of the drug-symptoms into subjective and objective, idiopathic and sympathetic, essential and accidental, constant and variable, &c., upon the solid foundation of the physiological proving, to the exclusion of all hypotheses and learned refinements.

To this end we will now examine the phenomena presented by the action of Thuja in anatomico-physiological order, in order to assist the memory as much as possible.

Nervous System.

The nerves, as the organs for communicating the sensations, are first of all affected by the disturbing forces of drugs, and it is through them that the enormous train of subjective symptoms, manifesting themselves by the different kinds of pains, is developed. Here lies the reason why the nervous symptoms of many drugs frequently so much resemble each other; and on this account it is that they have, as a general rule, but little therapeutic value.

It is only when such manifestations take place in the track of particular nerves and locate themselves in the parts supplied by them, and when there is something peculiar in the mode of their development, that they have any practical import or therapeutic utility.

The operation of Thuja upon the sensory functions of the cerebro-spinal system, is evidenced by the following symptoms: flying stitches through the brain, vertigo, drawing, sticking or boring, screwing, dull, stunning headache, drawing, tearing, sticking in the head, frontal eminences and zygomata, &c. As special nervous affections of the head, we have: *the feeling as though a convex button were pressed upon the head, especially in the neighborhood of the sutures, or a needle or a nail repeatedly thrust in;* hemicrania in the forehead, the pains extending by radiation into the brain. Belonging to the spinal marrow: drawing, tensive, sticking, tearing, creeping, itching, burning, laming, digging, boring pains in the nape, back, sacral region, nates and limbs.

Nor are the motor nerves unaffected by Thuja, as is plain from the frequently recurring, involuntary muscular twitchings. In the ganglionic system the *plexus cœliacus* and *hypogastricus* were the most affected, as appears from the abdominal symptoms of the drug.

We shall treat more fully of all these subjective or nervous

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symptoms when we come to speak of the particular organs affected.

Sleep and Dreaming.

Under this head, Thuja, like almost every other drug, gives rise to alternate effects; sleeplessness, sleep coming on late, lasting but a little while, restless, and interrupted by dreams; groaning in sleep; unrefreshing dozing with constant terror; uneasy, tormenting, horrible images in dreams, e. g. of the dead; voluptuous, lascivious dreams; quiet, refreshing, deep sleep, &c.

Therapeutic indications cannot be obtained from the symptoms of sleep and dreaming alone, as they are not independent pathological conditions, but only the reflex of organic affections. Thus, sleeplessness, unrefreshing dozing, or restless sleep with dreams, are true accompaniments of fever; tormenting and horrible dreams, with sudden starting and terror, of cerebral and pectoral affections; and lascivious dreams, ending with pollutions, point to an excessive action of the genital system.

The symptoms afforded by the sleep under the action of Thuja, according to their physiological value, are, for the most part, simply signs of febrile action; they frequently indicate the action of the drug upon the genital system, but seldom point to any irritation in the cerebral organs.

Mind and Temper.

Thuja exhibits no marked psychical relations. With some of the provers there was little or no disturbance in these functions, and the symptoms that were perceived are again only opposite alternations,* which divide themselves into exaltations and depressions.

The exaltations manifest themselves but seldom; we have

* The opposite symptoms developed in the psychical sphere by the action of many drugs, depend upon the universal law of dynamic oscillation, and are (and it is the same in health) but striking repetitions of the constant pendulum-swing of psychical life: from sorrow to joy, from grave to gay, from tears to smiles, from hope to fear, from love to hate, from pleasure to pain. But as through all the varying tints of the psychical life of the individual, the temperament and temper, as a sort of ground color still predominate, those exaltations and depressions, viewed as a whole, present a striking picture, and one which is of the highest import as a therapeutic indication in cases of mental disturbances.—MAYRHOFER.

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disposition to be angry, inclination for intellectual labor, great activity of the mind (with weakness of the body); the depressions, however, are numerous; as, melancholy; discouragement; anxiety; restlessness and lowness of spirits; ill-humor and disgust of life; difficulty in recollecting; difficulty in finding the proper words; slow speech, &c.

From these considerations we must draw the conclusion, that the principal action of the arbor vitæ upon the mind and temper is of *a depressing sort*, and that the signs of the *shackled soul* are the indications that ought to guide us in our selection of it as a remedy.

PERCEIVING FACULTIES.

Visual Organs.

The symptoms which attest the effects of the arbor vitæ upon the organs of sight may be divided into four classes.

1. Subjective: as, *sensation as if the eyes were pressed forward out of the head*, or as though the eyelids were swollen; *drawing, pressing*, sticking or *burning in the eyes;* biting, *burning in the eyelids, canthi* and caruncles; feeling of dryness in the eyes, tension in the interior of the orbits; digging pain in the posterior part of the eyeball, &c.

2. Objective: redness and inflammation of the white of the eye (with pressing and biting); dilatation and contraction of the pupils (alternate effects); watering of the eyes (especially in the open air); obstruction of the eyes with gum; *swelling of the upper lids; twitching of the eyelids;* digging twitching in the eyeball, &c.

3. Symptoms of functional disturbance: short-sightedness; *dimness of the sight; obscuration of the sight as though there were a veil before the eyes;* weak sight; swimming of surrounding objects before the eyes (Wz.); black, self-moving points before the eyes, whether open or shut; *glittering before the eyes, with hovering of numerous dark and bright points before them* (Zl.); *appearance of a bright disk with a dark centre* which follows the movements of the eyes (Dr. Huber); *hovering of clouds and streaks* before the eyes (Lackner).

4. Exanthematous appearances: *red itching eruptions between the eyebrows; suppurating tubercles on the borders of the eyelids, on the eyebrows*, or in the neighborhood of the eyes.

The general character of the sickness produced by Thuja,

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lies at the foundation of the subjective symptoms: suddenly coming and going, irregularly periodical, aggravated by rest, morning and evening, ameliorated in the open air and by movement, especially attacking the left side.

As the symptoms of the eyes never appear independently, but always accompanied by consentaneous affections either of the olfactory and respiratory apparatus, or of the urinary and genital organs, we cannot admit any direct and immediate relation between Thuja and the organs of vision.

In pathological conditions of the eyes, therefore, all the concomitant symptoms are to be considered, and the hints derived from the preceding history of the disease to be weighed, which indicate the choice of Thuja, and assist us in the decision.

Auditory Organs.

These organs, which in comparison with the other perceptive faculties, are much less often affected, do not escape the action of Thuja.

Subjective symptoms: hammering and tearing in the ear; violent tearing in the concha; penetrating and squeezing in the ear; pressing, obstruction, sticking in the auditory canal; ringing, roaring, and dull vibrations in the ears; thrusting stitches in the right side of the throat, reaching into the ear, with the feeling as though the air pressed through an opening (Eustachian tube) into the ear on opening and shutting the mouth; single, violent stitches in the auditory meatus; feeling of stoppage or as if there were water in the ear; creaking in the ear during empty deglutition, &c.

Objective results: suppurating tubercles; moist warts (Wachtel) in the neighborhood of the ears.

The remarks already made in relation to the eyes will equally apply to the ears. In diseases of these organs, the choice of Thuja must be determined by the character of the ear symptoms, by the accompanying affections, and by the history of the case.

Olfactory Organs.

The symptoms of the nose and its vicinity are again either

1. Subjective: pressure on the root of the nose; tension in the right ala; sensation of dryness in the nose; drawing between the mouth and nose; crawling in the nose; burning in the nose with sensibility of the septum; itching in the nostrils, &c.

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2. Objective: frequent sneezing; repeated epistaxis; discharge of blood by blowing; running catarrh; *catarrh suddenly ceasing and returning*, sometimes alone, sometimes accompanied with cough and febrile symptoms, swelling and hardness on the left ala; hard scabs in the nose; itching eruptions or tubercles behind the alæ; vesicles on the septum; a red streak from the nose over the forehead, &c.

These symptoms too must be judged of in connection with the other consentaneous affections, and can very seldom by themselves form therapeutic indications.

Gustatory Organs.

The operation of Thuja upon the organs of taste, to which head we refer all the parts constituting the oral cavity, is evidenced by a variety of symptoms, which may be divided into subjective, objective, and functional.

1. Drawing, tearing, sticking, twitching toothache on entering a warm room; drawing, tearing, sticking in the jaws; burning on the lips, on the tongue and palate; feeling of soreness on the palate and tongue; pressing on the velum palati; rough, scraping feeling on the tongue and in the throat; sore feeling on the point of the tongue; sensitiveness of the gum; soreness and dryness in the throat; violent pain in the masseters as though they were wrenched, &c.

2. White coating upon the tongue; sore tongue; burning vesicles on the tongue; painful, *swollen gums;* inflamed and swollen *tonsils; swelling of the salivary glands; increased secretion of saliva;* saliva mixed with blood; throwing up of a tough, thick mucus; sore palate; *burning, red, spots; elevated, itching spots on the lips; quivering of the lips;* creaking of the under jaw when chewing, &c.

3. Sweet, sour, metallic-tasting saliva; sweetish, insipid, sharp, bitter, rancid, resinous taste; taste blunted (food cannot be distinguished by the taste); thirstlessness; thirst; desire for cold drinks, &c.

The subjective symptoms have but little practical value, inasmuch as many other remedies develope them in the same way; the objective, however, are much more important, and highly valuable in a therapeutic point of view, especially when they are manifested in connection with other characteristic symptoms.

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SANGUINEOUS SYSTEM.

Fever.

Every medicinal agent in its perfect action excites fever, and this presents different peculiarities according to the different power of the drug.

The species of fever which is developed in those who have an exceeding susceptibility to the action of Thuja, or which follows in the train of massive doses of the drug, either appears unaccompanied or attended by a catarrhal affection of the olfactory or respiratory organs.

The independent fever, according to the preceding provings, manifests the following peculiarities:

1. It is a well marked *cold fever* (febris algida). Its symptoms all point to a preponderance of the cold stage. The chill commences generally from the spinal marrow, is especially felt in the limbs, more particularly in the feet, at times only on one side or only internally, and, in its highest development, is attended by trembling of the heart, momentary pulselessness and deadness of the fingers; *it either passes immediately over into the sweating stage*, or alternates several times with heat; nay, the extremities are often still cold after the body has become hot. The hot stage seldom attains much intensity, and is generally first perceived in the face while the rest of the body is still cold.

2. Regularly, it comes on morning and evening, more seldom in the course of the day; *thirst is generally altogether absent* or comes on with the hot stage, and is seldom of any account.

The general weakness and prostration is so remarkable that it by no means corresponds to the degree of the other symptoms.

3. In its course, it shows either a quotidian or tertian type, or an irregular perodicity. The fever that attends the affections of the mucous membranes has the peculiar property of being *as capricious and changeable* as the subjective symptoms of Thuja.

Respiratory Organs.

We come now to the phenomena which the *arbor vitæ* excites in the air passages, larynx, trachea and its ramifications, to which we also add the symptoms of the lungs and pleura.

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The very decided action of Thuja upon the mucous membrane of the nasal and buccal cavities, might have already led us to conclude that it would also produce pathological conditions in the lower air passages, and our provings have accordingly shown that it can especially attack the thoracic organs (though only exceptionally).

1. Sensitiveness of the larynx; scraping, sticking in the trachea; dryness and roughness in the fauces; oppression in the chest; pressing immediately under the breast-bone or on one side of the chest; drawing, tearing, sticking on one side of the chest; sensation as though the chest were compressed from without and the corresponding part of the lungs from within; internal sensation of soreness in the chest; pressing in the lower half of the chest; stitches in the left side of the chest, unaffected by inspiration and expiration; dull, interrupted stitches in the chest; violent sticking in the lower part of the lungs, which is aggravated by sneezing, deep breathing and coughing, &c.

2. Hoarseness; short, dry, straining, interrupted cough; troublesome night-cough; raising of thick, tough mucus, like lard; short, constricted, accelerated respiration; moaning and groaning in sleep.

We by no means mean to deny that Thuja possesses the power of affecting the respiratory organs, nor that it can excite in them a congestive or an irritative condition, but we must regard the affections of the lungs and pleura which follow its exhibition as individual exceptions and statistical singularities which are no essential attribute of its operation; in this respect we need only mention *Aconite*, *Bryonia*, *Rhus*, *Tart. Emet.*, to show that it is far surpassed by many other remedies.

On this account we can allow to the chest-symptoms of Thuja but a low and conditional therapeutical value.*

* I cannot entirely coincide in this opinion. The author points out that Thuja acts *first and most especially* upon the uro-genital organs. The intimate physiological and pathological relation between these and the respiratory organs would have made it very probable *a priori* that the latter would be partakers of the effects of Thuja. In effect, not only our own but Hahnemann's experiments show that the *mucous membrane of the air passages* (nose, trachea, and bronchi) plays by no means so subordinate and accidental a part in the physiology of the *arbor vitæ* as the author would have us believe. In many of the provings, and especially in those where the uro-genital organs were affected but slightly, or not at all, they form (according to my view) the starting point for a great part of the symptoms detailed. This was the case with *Gross*, *Böhn*, *Lackner*, *Landesmann*, *Liedbeck*, *Reissinger*, *Stirz*,

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Heart, Vessels, and Muscles.

The few symptoms of the heart produced by Thuja, such as palpitation, trembling of the heart, transitory pulselessness, pressure in the scrobiculus with difficult respiration, uneasiness and anxiety (*anxietas præcordialis*), are the attendants of fever, particularly of the cold stage. They point to a repletion of the central organ with blood, and to an impeded circulation. They do not appear, therefore, as direct effects of Thuja upon the heart, and have no special therapeutic value.

Besides the changes in the pulse, the maximum and minimum of which were observed to be over one hundred and under sixty in the minute, there are other symptoms which indicate the action of Thuja upon the venous system; as, swelling of the veins in the neck, temples and hands; turgescence of the hæmorrhoidal vessels; burning in the varices; pressing in the hypochondria.

A peculiar symptom of frequent recurrence is the *twitching* or *jumping* of isolated muscular parts in the legs, calves, toes, arms, hands, and fingers, more seldom in the trunk; also on the lips and chin. This symptom appears in a lower degree as a *subcutaneous vibration* or slight trembling of parts of muscles. The twitching is especially perceived *in the middle, in the body* of the muscles, appears almost exclusively during rest, in short, repeated attacks, and rapidly disappears on movement; *a sudden twitching of the upper part of the body* or of the feet comes on more violently.

We attach therapeutic value to the muscular twitchings of Thuja.

REPRODUCTIVE SYSTEM.

Digestive Organs.

All remedies when taken in sufficient quantity excite morbid affections in the primæ viæ with which they are first brought in contact; and even those which in themselves are innocuous may become injurious if administered in large doses.

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and *Wurmb;* nay, with some of them, for example, with *Maschauer*, with myself, and with that boldest and most persevering of provers, *Prof. Zlatarovich*, the effects upon the respiratory organs, in reference to their independence and therapeutic significance, seem to have carried off the palm from all the other symptoms.—Ed. Oest. Zeit.

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Hence it results that many similar phenomena take place in the digestive organs after the exhibition of different drugs, which has led our opponents to assert "that according to the homœopathic materia medica, every drug was good for every disease, and every disease indicated every drug." *

The symptoms of the organs of deglutition are: scraping feeling in the pharynx and throat; pressing when swallowing; feeling of constriction of the pharynx; accumulation of mucus in the throat and pharynx.

Stomach: eructations tasting of the drug; nausea; vomiturition; inflation of the stomach with flatulence; pressing and griping in the region of the stomach; heart-burn; cramp.

Bowels: rumbling and rolling, griping and cutting, with inflation of the abdomen; colicky pains; deceptive feeling as though something alive were moving in the abdomen; † flatulence.

The symptoms which indicate an affection of the liver or of its peritoneal envelope, are: pressing in the liver as if from a stone; sticking in the abdomen, rendering walking difficult, &c.

Stool: ineffectual urgency; diminished evacuation; constipation for several days; as an alternative effect, not of frequent occurrence, loose papescent stool or even diarrhœa; while at stool, *sticking pain in the rectum;* after stool, *burning and itching in the anus; biting, itching, and burning at the anus and in the sulcus* without stool; *swelling of the hæmorrhoidal vessels; feeling of swelling at the anus;* a less frequent alternative effect, feeling of emptiness there; *moisture of the anus; sweat on the anus; excretion of bloody slime from the anus, &c.*

The groups of the symptoms of Thuja affecting the anus and rectum are of importance in a therapeutic point of view, because the symptoms exist abundantly in the provings, come on regularly after every dose, and are an integral part of the peculiar condition which that drug excites in the urinary and sexual organs, in connection with which they must be regarded and judged.

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* This maxim applies perfectly *per inversionem* to the therapeutics of the old school: for a casuistic materia medica can with perfect propriety administer each remedy in all diseases, or treat each disease with all remedies.—MAYRHOFER.

† The sensation as though something alive were moving in the abdomen seems to arise from the stretching of the intestines by the accumulated flatulence.—MAYRHOFER.

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Urinary and Sexual Organs.

We come now to the organs toward which Thuja stands in the most intimate relation; the uro-genital apparatus and its connections.

(*a*) *Urinary Organs.*

In order to aid the memory we again divide the phenomena into subjective and objective.

In the first class we have: ***burning in the renal region; drawing along the ureter to the bladder; sensation of inflation and fullness in the vesica with urgency to urinate; frequent urgency to urinate; pressure on the neck of the bladder;*** painful ***stitches from the anus to the orifice of the urethra*** or in the reverse direction; ***stitches in the fossa navicularis; voluptuous itching or tickling in the urethra; cutting in the region of the cervix vesicæ*** during urination and at other times; ***burning toward the bulbus of the urethra; burning in the urethra and at the orifice during, after, and without urination; itching on the point of the urethra; itching without and also during urination through the whole urethra; drawing and cutting in the urethra and vesica;*** deceptive sensation as if a ***tenacious fluid were passing forward in the urethra,*** or as if there ***were still some drops of urine left after urination, &c.***

To the second class belong: ***frequent, copious emissions of limpid,*** straw-yellow urine; at times interrupted urine; scanty discharge of dark urine with inflammatory irritation of the urinary organs; red sediment in the urine; ***discharge of glutinous mucus from the male urethra;*** discharge of ***liquor prostaticus*** (Hempel); ***mucous discharge from the female urethra, &c.***

To these phenomena in the urinary apparatus, correspond the symptoms of the

Sexual Organs.

1. ***Subjective symptoms.***

(a) ***In the male organs: sticking and itching in the glans; single, flying stitches on the point of the glans; burning itching, sensation of soreness on the glans; great sensibility of the whole glans; painful stitches on the inner surface of the prepuce; tickling, itching, and biting on the glans and prepuce,*** alternating with ***flying stitches in the***

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anus; twitching pain in the penis; burning stitches in the penis as far as the testicles; drawing, sticking in the testicles and seminal cords; crawling and itching on the hairy parts of the genital parts and the inner side of the thigh; sticking in the perinæum; tension and drawing in the groins.

(b) *In the female organs: pressing and constriction of the genital parts;* tight pain in the genital parts and perinæum; *pain as if sore; itching in the pudenda; biting and burning in the vagina; sticking in the groins* (extending through the thigh into the knee).

2. *Objective symptoms.*

(a) *In the male organs: swelling of the prepuce; red spots on the glans and prepuce; erosions on the inner surface of the prepuce and on the furrow of the glans,* which become *moist* and purulent; *a red excrescence on the inner surface of the prepuce* (like a condyloma); *a granular, elevated spot on the external surface of the prepuce which suppurates, forms a scab, itches and burns; small elevations on the corona glandis, smooth, red excrescences on the point of attachment of the prepuce; on the glans; a flat, foul, burning ulcer with a red margin on the corona glandis; moistening of the glans; gonorrhœa of the glans; moist eruptions on the scrotum; profuse sweat of the genitals and perinæum; retraction of the testicles toward the inguinal ring; puffing and projection of the perineal raphé; suppurating tubercles on the perinæum; swelling of the inguinal glands, &c.*

(b) *In the female organs:* swelling of both labia; *leucorrhœa from one period to another,* mild, and leaving greenish yellow spots on the linen.

3. *Functional symptoms.*

(a) *In men,* pointing to an excitement of the sexual system: excessive sexual impulse; frequent erections; pollutions; seminal emission with sensation as if the urethra were too narrow, indicating a lowering of the sexual impulse; *indifference to the other sex; unfrequent desire for coition;* inability to perfect copulation.

(b) *In females: retardation and diminution of the catamenia.*

This formidable host of subjective and objective phenomena, to which Thuja gives rise in the uro-genital system, leaves us no room to doubt that it stands in a near and direct relation to these organs, and in this sense is a urinary and genital remedy.

As however the determination of the therapeutic utility of the recorded results of the provings depends upon the frequen-

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cy and constancy of their occurrence, as well as upon their agreement with the phenomena of natural diseases, we must subject these numerous symptoms to a scientific arrangement, in order to trace the conditions which indicate the choice of Thuja as a remedy.

The ruling kind of pain produced by Thuja in the urinary organs is *burning*. Its seat for the most part is the *fossa navicularis*, less frequently the *orifice of the urethra*, less frequently the region of the *prostate gland* and *cervix vesicæ*, and seldomest of all the ureters and kidneys. It is manifested especially *during and after urinating*, and without that is often replaced by *voluptuous itching*. The urine generally runs freely *without any delay*, but *urgency to urinate* soon comes on; the stream is seldom interrupted by cramp. By this means Thuja is distinguished from its closely allied drugs. *Cantharides*, *Sabina*, *Cannabis*, *Petroselinum*, and others hinder the urine more or less.

The feeling *as if some drops were still running forward in the urethra* is frequently developed after urination. In quality the urine remains about the same, in quantity it is almost always increased.

There is no special violence in the *irritative condition* which Thuja induces in the urinary organs, as is evident from the fact that the *mucous flow from the urethra* (as an inflammatory product) is mostly wanting or is very slight; in which respect it is far inferior to other remedies, for example hemp. On the other hand, Thuja more frequently excites *inflammation and blennorrhœa of the glans* than other remedies.

In relation to the sexual functions, we find alternating effects, pointing now to excitement and now to depression of the sexual appetite. On taking a general view, however, of all the provings, it becomes evident that the *diminution of the sexual impulse is the more constant, and therefore the reliable therapeutic effect;* and this is especially corroborated by the *deficient catamenia* which Thuja occasions, for deficiency of the menses and weakness of the sexual impulse are as constant companions as excessive menstruation and increased venereal desire.

In this relation Thuja is connected with *Cannabis*, and stands directly opposed to Sabina, which causes excitement in the sexual system, especially in the female.

The most important peculiarity of Thuja then, *is excitement of the cutaneous system, of the sexual parts* and their neighborhood.

Genital sweat, balanorrhœa, suppurating tubercles, swell-

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ings and excrescences on the skin, which must be regarded partly as crises, are speaking evidences of this tendency; and in this property Thuja yields to no other remedy.

The symptoms of the testicles and inguinal glands are consensual effects.

We have also the following characteristic marks of the operation of Thuja on the uro-genital system: *burning and itching in the urethra, especially in the fossa navicularis, urgency to urinate, with increased, uninterrupted urine, slight thickish mucous discharge from the urethra, balanorrhœa, cutaneous excrescences, diminution of the catamenia and of the sexual impulse, moderate leucorrhœa.*

Glandular System.

Copious symptoms testify the action of Thuja upon this portion of the organism.

The cervical and salivary glands, the inguinal, and those of the prepuce, swell and become painful; the salivary and sebaceous glands are excited to increased secretion. Irritation lies at the basis of all these symptoms. When we reflect upon the general effect of Thuja upon the totality of the cutaneous surfaces, we could scarcely expect that the glands which stand in organic and vital relations with them should escape its action; though we must regard the glandular affections produced by it rather as sympathetic than idiopathic.

Skin.

The physiological provings of Thuja have shown that it manifests its action by means of eruptions and excrescences on the cutaneous surface. We have already had occasion, when considering the symptomatology of the senses and genital system, to remark this peculiarity, and it now remains to submit to a closer examination the cutaneous symptoms which Thuja produces upon the trunk and limbs.

1. *Subjective: crawling*, itching, biting, burning, pricking and sticking in different spots on the skin; occasionally gurgling and running under the skin, as from single dribbling drops of blood. The most constant and most frequent kind of pain produced by Thuja upon the skin is *itching*, and in a higher degree, *burning*.

2. *Objective.* These are partly inflammations, partly eruptions, partly excrescences, which have been observed under the following forms:

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(*a*) ***Red smooth spots*** (maculæ) which appeared singly, or several at a time, for the most part upon the limbs (those upon the prepuce, glans and lips, were spoken of under these organs); which ***itch, burn*** after being scratched, and in a few hours or during the night disappear as quickly as they come.

(*b*) *Burning vesicles* (papulæ) which were only noticed upon the mucous membrane of the tongue, on the palate and glans.

(*c*) *Moist and suppurating erosions*, which likewise appeared only on the mucous membrane, glans, and prepuce.

(*d*) Tubercles (nodi), of different sizes, which appeared sometimes several together, as on the scalp, sometimes single, in the neighborhood of the parts of generation, on the limbs, on the face, &c., commonly surrounded by a *reddish or brownish base*, *itching* and rapidly passing *into suppuration* on the summit; the smaller appeared like an eruption, the larger resembled chicken pox (varicellæ).

(*e*) Warts (verrucæ), which assumed various shapes; either as *small red excrescences on the genitals*, or as the common *dry warts on the hands*, which are either conical or roundish; in their commencement show a smooth surface, but in the course of their growth become cracked, and resemble mulberries; or as *moist, sweating excrescences*, which were observed *at the anus, on the perinæum, in the furrow between the nates, and on one ear*. As indications of cutaneous excrescences, *fullness of the perineal raphé and of the anus* are to be remarked.

These cutaneous symptoms all appeared after a longer use of the Thuja, and on that account we must set them down as among its secondary effects.

The notable peculiarities of Thuja-warts and tubercles are:

1. Their broad conical shape.
2. Their situation in the superficial cutaneous tissues.
3. The splitting and cracking of the superficies in the larger and older warts.
4. The disposition to suppurate or to be moist, especially in the warty tubercles which make their appearance in the neighborhood of the sexual parts.
5. Their chronic course, which with warts may last many weeks and months.

Fibro-serous Membranes.

Under this head belong most of those symptoms which we have noticed as Thuja pains under the nervous system, and which have their seat in the muscular sheaths, in the aponeurotic expansions, perhaps even in the muscular tissue itself,

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and which resemble wandering rheumatic affections. We have already noticed the symptoms of the *mucous membranes* under the separate organs.

Osseous System.

The symptoms which indicate the operation of Thuja upon the osseous system or periosteum are but few. The *gnawing and boring pain* which is characteristic of affections of the bones, seldom appears in the provings. But a sure indication of a periosteal affection is the frequent, painful feeling in the articular extremities of the hollow bones, aggravated by movement, and frequently accompanied by swelling of the painful spot.

General.

The following general characteristics of the Thuja-sickness we derive from the statistics of the provings, and from the discussion of the symptomatology of the *arbor vitæ:* they are identical with the general therapeutic indications.

1. Thuja enjoys a very extended circle of operations; almost every system, province, and organ of the whole body is more or less affected by it; but it stands in the most intimate relation:

(*a*) To the *uro-genital system;* and

(*b*) To the *cutaneous system* in all its ramifications.

In this relation, the arbor-vitæ is a *urinary, sexual, and cutaneous remedy.* In the uro-genital system, the *urinary apparatus is idiopathically* affected, the *sexual organs sympathetically.*

Of the *cutaneous tissues, the fibro-serous and mucous membranes* bear the stamp of *primary effects; the external skin, of the secondary.*

2. The general character of the pathological condition, which Thuja sets up in the attacked parts, is that of *irritation.*

This *irritation*, which may even increase to inflammation, causes in the secreting organs (mucous membranes, urinary apparatus and glands) an *increased and altered* secretion. In the external skin the irritation is concentrated in single spots, and manifests: *inflammation, suppuration, formation of warts, and excrescences.*

3. The affections of Thuja present the following peculiarities:

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(*a*) They attack *only a single organ*, limb, joint, or spot *at a time; and these local affections usually cease when morbid symptoms arise in a different province.*

(*b*) They come on for the most part in *abrupt paroxysms, begin suddenly*, and *end as though they were snapped off.*

(*c*) They make their appearance *especially during rest*, and either diminish or disappear by movement; nay, the pains which appear in circumscribed spots *often instantaneously disappear* on touching the affected spot, and return immediately on quitting the contact. They come on consequently for the most part *in the evening in bed*, and *in the morning* on waking; they are aggravated, too, by *passing from a cold into a warm temperature*, and are diminished by the opposite. The pains in the joints only are aggravated by movement, and violent affections or febrile symptoms remain the same whether in rest or motion.

(*d*) They more frequently *affect the left side of the body*, though they do not on that account neglect the right.

4. The most constant kinds of pain which Thuja excites in its most extensive sphere of operation in the different organic structures, are: *drawing and tension in the limbs and joints, burning in the urinary organs, itching and crawling on the skin.*

5. The course of the Thuja-sickness is *partly acute, partly chronic.* The symptoms of the *primæ viæ* go off in a short time, but those of the *secundæ viæ* run a very irregular course, and are characterized by *great mutability and caprice.* They return after intervals of *hours, days, weeks*, continue *sometimes shorter and sometimes longer*, and appear *now in this and now in that* part of the body. The *cutaneous excrescences* finally, as the *concluding products of* Thuja, *are as slow* in disappearing as they are in coming, *and remain for months.*

6. The true attendants of a Thuja-fever are *strongly marked, predominant cold*, and *gloomy, depressed state of mind.*

To *express the physiological character of the arbor vitæ in the shortest manner*, it is, "*Exaltation of the cutaneous system, with disposition to dermatic excrescences.*"

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CHAPTER VI.

Therapeutics of Thuja.

Physiological drug-provings are so many questions propounded to the living organism; the pathogenetic phenomena thereby developed are the answers returned, and also the material for the foundation of therapeutics; and the accuracy of the therapeutics is determined by the ***usus in morbis.***

By the physiological proving of a remedy health is interrogated concerning disease; by the pathological proving sickness is interrogated concerning health; and from the agreeing answers of these two trials of nature, results as a whole the science of pharmacodynamics.

By the physiological method, the powers of the drug are discovered; by the pathological, its therapeutic powers are confirmed; these two inseparable parts are related to each other as flower and fruit, as assertion and proof; and confirmed therapeutic indications are the highest flower and fruit of the physio-pathological materia medica. The physiology of a drug without their therapeutics is dead knowledge; its therapeutics without its physiology is blind opinion; sure knowledge is only reached when we obtain the physio-pathology of a remedy blended into one by means of a great general therapeutic principle.

The general therapeutic indications which we have developed by the characteristics of Thuja, have their significance in all the disorders that come under its province, and the particular indications are derived from the physiological effects of the remedy upon the separate systems, provinces and organs.

Before we consider more intimately, and illustrate by cases, the therapeutic indications of the *arbor vitæ* (which are identical with its characteristics) in connection with those special forms of disease which lead us to its employment, let us for a moment look at the indications laid down by Hahnemann; he expresses himself thus:

"The Homœopathic physician will know how to value the clearly observed artificial elements of disease produced by this uncommonly powerful drug as a great addition to our previous stock of remedies, and will not neglect to make therapeutic use of it in some of the most serious diseases of man, for which, until now, no remedy had been discovered. It will appear, for example, from these symptoms that Thuja is a specific for that

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horrible affection arising from impure cohabitation, condylomata, when it is complicated with no other miasm, and experience shows that it is the only useful remedy for it; it also for the same reason most certainly cures that severe form of gonorrhœa arising from impure connection, provided always it be not complicated with any other miasm."—(*Rein. Arz.* 2 *Aufl.* B. 5. §. 122.)

With how much justice Hahnemann decided upon the remedial power of Thuja from its provings, let the cures performed by it testify; for blennorrhœas of the sexual organs which have arisen from contagion, and the sycotic condition that so frequently attends them, are especially the therapeutic field in which the *arbor vitæ* has gained its most plenteous as well as its most beautiful laurels.

A.

Diseases of the Urinary and Sexual Organs.

(a) *Blennorrhœas.*

The condition which Thuja excites in the urinary organs, are characterized as irritation of the mucous membrane, with increased and altered secretion.

The special therapeutic indications which insure the selection of Thuja are: contagion from coitus; burning, itching pain in the urethra, generally when urinating, and immediately after, less often without this cause, and which is seated in the fossa navicularis or near the cervix vesicæ; increased, but little altered urine; purulent mucous discharge from the urethra or glans, from the urethra or vagina, sensibility of the glans and penis; swelling of the inguinal glands; tendency to chronicity and to lymphatic vascular excrescences.

Hahnemann states that Thuja is indicated by the following symptoms (*Chron. Krank.* B. 1): "Thickish, purulent discharge from the commencement, urination little painful, body of the penis somewhat hard and swollen, or painful on the dorsum and beset with enlarged glands." This agrees with our physiological therapeutic indications.

1. A gonorrhœa of six weeks standing had already been treated with Cubebs, Camphor, Tinctura Kalina, and Aqua Laurocerasi, and had for a short time been subdued. The discharge was copious, rather yellow than white, the urinary secretion natural, tickling in the urethra when urinating, at times cutting in the groin.

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Two doses of *Cann.* 2d (one drop), which Dr. Hartlaub administered, with an interval of eight days, produced no impression.

On taking *Thuja* 30 (ten pellets) the discharge became less and white and the pains disappeared. As however some cutting on urination was still perceived at the end of seventeen days, the patient again took *Thuja* 30 (five pellets). The discharge at the end of three weeks was white, and only amounted to a couple of drops a day. Hartlaub again administered Thuja (in what dose is not mentioned), and ten days later, when the nocturnal erections were somewhat painful and the discharge continued but in a less degree, *Capsic.* 9 (ten pellets). After fourteen days the patient was well and had no relapse.*—(*Annalen der Homœop. Klinik.* B. 3, § 214, 215.)

The second case of gonorrhœa cured with Thuja by Hartlaub is as follows.

A strong young man who had often had gonorrhœa, had suffered from it now for five weeks and had already taken much cubebs. The disease had come on from the commencement with great pain and hæmaturia. The discharge was still very copious and watery, urine natural. When urinating, he felt violent burning, now in the anterior now in the posterior part of the urethra, the inguinal glands were swollen and somewhat painful.

All these troublesome symptoms disappeared within eighteen days after a dose of *Thuja* 30 (five pellets), and there only remained a very moderate discharge, which so far disappeared after two similar doses, a fortnight apart, that the urethra was only slightly obstructed on waking in the morning. One dose *Cann.* 6 (one drop) caused this also to vanish within a short period.†

3. A man of scrofulous constitution, age 24, contracted a gonorrhœa after a suspicious coitus, and according to his story it first appeared fourteen days afterwards. Before he applied to Dr. Hartlaub he had consulted a quack, and received from him an almond emulsion with camphor, which he had taken for several days. At first he had only discharge from the

* "Perhaps," adds Hartlaub, "I might have saved Thuja, had I waited longer." We rather think that this cure of seventy-eight days might have been somewhat shortened by more frequent doses of Thuja. —*Mayrhofer.*

† Hartlaub observes that *Cannabis* is more useful in acute and *Thuja* in chronic gonorrhœa, which if taken *cum grano salis*, agrees with our own experience.—*Mayrhofer.*

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urethra without any pain; after using the camphor, however, the discharge increased and the pains appeared.

Discharge greenish-yellow. When urinating he felt violent burning in the glans, which remained some time after. When not urinating he had frequently during the day itching pain along the whole urethra, and continual itching on the glans. At night he was driven out of bed by painful erections. Urine reddish, with whitish sediment, bowels sluggish, the right inguinal gland swollen and painful. After the bowels had been regulated by a dose of *Nux Vom.*, no other change in the disease supervening, he took, three days after, *Thuja* 20. In five days the itching on the glans and the painful erections had altogether disappeared; the burning on urination and the gonorrhœa were less, the urine was clearer, but still deposited a sediment. Seven days after the improvement ceased, and for a hasty urgency to urinate, which often appeared, especially when standing still after moving, a dose of *Puls.* 12 was given; in two days after the urgency to urinate disappeared, as did the painful swelling of the inguinal glands, the discharge and burning on urinating were still less, and this last changed into a slight sticking and cutting in the glans. For these symptoms Hartlaub, after a fortnight, gave *Cann.* 2. The pains ceased, but the discharge was unchanged, and was only wholly cured after a second dose of *Thuja.**—*Annal. der Homœop. Klinik.* B. 1. § 188, 189.

4. Dr. Argenti relates the following case (*Archiv für Homœop. Heilk.* B. 18. H. 3. § 84): A. D., twenty-four years old, contracted a venereal gonorrhœa. He was advised to take Balsam Copaiba, the more the better; which he faithfully did. After some days violent pressing pains in the testicle and spermatic cord (it is not said of which side) came on, with hard swelling of the testicle, and his nights were sleepless through the pains. After two doses a day of *Pulsatilla*,† the trouble in the testicle disappeared after four days, but in a few days returned, without any perceptible cause, in all its violence. *Puls.* was now of no service, the pains became still more severe; but *Arnica*, taken four times in two days, cured the disorder in the testicle entirely and permanently. The gonorrhœa was first removed by Thuja after a fortnight.‡

* We think that Thuja was the homœopathically indicated remedy in this case, and are of the opinion that a few doses of that drug alone would have sufficed to remove the disease.—*Mayrhofer.*

† The size of the dose is nowhere mentioned in the history of this case.—*Mayrhofer.*

‡ Will these four cases stand the test of critical investigation as

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(b.) *Diseases of the Prostate Gland.*

The affections of the prostate are so often a stumbling block in the way both of the patient and the physician, that we must receive with gratitude a remedy which promises to be useful in lesions of that organ with gonorrhœa.

Our provings have plainly indicated affections of the urethra in its prostatic portion, and if no decided disease of the gland was developed, still we may, at least, infer that that organ was not entirely unaffected. Perhaps experiments of longer duration might develop clearer results than pains in the neck of the bladder and discharge of prostatic fluid (*Hempel*), if they were carried so far as seriously to endanger the health.

We must content ourselves, therefore, with directing the attention of our readers to the fact that Thuja, which corresponds to the chronic and irregular course of a gonorrhœa, may also prove serviceable in lesions of the prostate gland—(*See Editor's note, ante.*)

Unfortunately our homœopathic literature, thus far, contains but few communications on the treatment of the prostate.

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scientific cures? I doubt it much. The remedial power of Thuja in common (primary, acute, independent) urethral gonorrhœas, is, according to my experience, exceedingly problematical. And our physiological provings give us a sufficient explanation on this subject. This remedy should be more serviceable in gonorrhœa of the glans and prepuce. It affords us, however, certain aid in those secondary (consecutive) sympathetic, chronic, *gonorrhœal discharges* which, as Hahneman teaches, are derived from (what according to Ricord's able researches is still somewhat apocryphal) condylomatous contagion (a), are accompanied by condylomata (Ricord's mucous tubercles); or which, as Mayrhofer correctly points out (b), are followed by a lesion of the prostate gland (irritation, congestion, inflammation), or, on the other hand, have been excited and maintained by such a lesion. In relation to this last, my learned friend Dr. Böhm informs me, that an extensive experience has taught him that we can count with probability upon a sympathetic affection of the prostate, in all gonorrhœas of regular course, in individuals of a good constitution, which have lasted longer than six or eight weeks, and that the cause of a good half of all chronic gonorrhœas may be sought either in simple hypertropy, in hyperæmia or infiltration of the prostate, especially of its middle lobe and excretory ducts. It is in such cases as these that Thuja proves especially useful, nay, surpasses every other remedy. He can produce more than twenty cases from his own practice, which, though of long standing and treated with the most varied remedies, have yet yielded immediately and perfectly to Thuja alone. Nay, so firm is his conviction of the remedial power of this drug upon the prostate, that he administers it even in suppurations of the gland, and when he has not effected a cure he has often by its means obtained a considerable miti gation of the urinary troubles.—*Ed. Oester. Zeit.*

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Dr. Attomyr (*Archiv für Hom. Heilk.* B. 18, H. 3. §. 46) states that he has employed Thuja in gonorrhœas with predominant prostatic affection, and has been well satisfied with the result so far as the prostate was concerned. He thus cured in six weeks a considerable and very painful affection of the prostate induced by bad conduct during a gonorrhœa, in the course of which the once corpulent patient had become greatly reduced.

Dr. Hartlaub rapidly cured a painful sensibility when uriating, the remains of a prostatic inflammation, by a single dose of *Thuja* 18. The patient, a young man, suffered from chronic gonorrhœa. The inflammation itself had been cured by *Puls.*—(*Prakt. Mit. &c.* 1837-38.)

(c.) *Condylomata.*

The power of Thuja to produce, besides gonorrhœal affections, cutaneous excrescences on the parts of generation and on other parts of the body, in the form of tubercles and warts, as secondary products, induced Hahnemann to regard it as a specific against the condylomata so frequently attending gonorrhœa. It has also been considered as a powerful remedy in obstinate sycosis, not only by homœopathic physicians, but frequently by those of the old school, sometimes secretly, sometimes openly, but ever without mention of the source from which they derive it.

The special therapeutic indications which point to the employment of Thuja in sycosis, according to the result of the physiological provings and of clinical experience, are the following: gonorrhœa, past or still present, or leucorrhœa, condylomata on a broad base, cracked, mulberry-shaped moist surface, itching and burning in the excrescences, alternate amelioration and aggravation of the affection.

To these positive indications we may add one of a negative character, namely, that mercurial preparations* or caustic, occasionally used against condylomata, remain ineffectual, by which latter means they are driven from their original seat and make their appearance on unusual parts of the body.

Dr. Trinks has written a short treatise on sycosis and its cure (*Annalen der Hom. Klinik.* B. 1. § 185).

"This (miasmatic) disease is quite frequent in Dresden, and I have had occasion to observe it in various complications and

* Condylomata attendant upon chancres disappear under the use of mercury; those which accompany gonorrhœa do not diminish under that remedy.—*Louvrier's Syphilidologie.*

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extent. Like syphilis, it commonly first appears upon those parts that have received the contagion; in man, upon the glans, the folds of the prepuce, the orifice of the urethra; in the other sex, on the labia minora and majora, on the clitoris, &c. If no impediment is put in the way of their growth, they very soon notably increase in circumference and in number upon the original spot; if, on the other hand, they are destroyed by external applications (caustic, amputations, &c.) the disease disappears from that place in order to break out afresh in another. It then appears in the neighborhood of the anus,* in the axillæ, in the fauces, on the lips, the external surface of the iris; and in women, on the nipple."†

"Their form is likewise various. I have seen them on the penis in the form of many-pointed warts, of cockscombs or cauliflowers, and the same in the fauces. They rest upon a broad base on the lips and breast, on the anus and in the furrow. As to their consistence they are generally soft, seldom hard and thorny (when they present the warty appearance). The soft excrescences for the most part distil a stinking moisture; they seldom discharge blood."‡

"I have frequently seen this disease uncomplicated, as small wartlike excrescences upon the glans and prepuce, which gradually increased at the base; all that was necessary for a perfect cure was six weeks, and *one* or at most *two* doses of Thuja."

"Condylomata frequently came, too, complicated with gonorrhœa, the stains of which upon the linen were greenish-yellow, and which was attended with burning pain in the *fossa navicularis* during and after urination. For these cases also, Thuja was a specific; the gonorrhœa commonly disappeared first, then the condylomata."

"More frequently still, I have seen condylomata complicated with primary syphilis; with chancres on the glans, on the

* Condylomata frequently affect the anus, perinæum and thighs, by natural growth in extension.—*Mayrhofer.*

† According to *Ricord*, who distinguishes the broad condylomata (*condylomata lata, papules muqueuses*) from the pointed, peduncuated excrescences (*condylomata acuminata*) which he calls "*Vegetations*;" these growths may also appear in the external auditory meatus, on the nose, tongue, cheeks and tonsils, in the larynx, on the navel and vagina, on the neck of the uterus and between the toes.—*Mayrhofer.*

‡ Condylomata on the nose and commissures of the lips display deep furrows and tend to scab over. Those on the tongue resemble aphthæ, appear singly or in small numbers, and look like little gray, granular prominences, which seem to be covered with false membrane. They frequently return after many years (10 to 15) and not unfrequently withstand every sort of treatment. (See *Ricord's* treatise on *Syphilis*, edited by Dr. Turk, and also *Ritter's* Chronic Gonorrhœa).—*Mayrhofer.*

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frœnulum and inner surface of the prepuce, accompanied by simultaneous inflammatory swelling of the prepuce and inguinal glands."

"The cure of this complication is not difficult, if the patient have not taken large doses of the mercurial preparations. Where they had not done so, I began the treatment with a small dose of *Merc. solub.*, allowing it to operate as long as it produced any improvement. In some cases, the syphilis was thoroughly eradicated by this dose alone; but in the majority, a second and even a third were necessary. Then I followed quickly with the arbor vitæ. But if mercury had been previously exhibited in large doses both externally and internally, the difficulty of the cure was much increased. I was then obliged to give first a dose of *Calc. sulph.* or *Acid. nit.* to destroy the excessive effects of the mercury. During the operation of this remedy, the two coexisting diseases frequently took on their original forms."

"Quicksilver given in suitable preparation and dose now completed the cure of the syphilis, and the sycosis soon followed on the exhibition of its proper remedy."

"The exhibition of Thuja is often alone sufficient thoroughly to eradicate sycosis; in many cases I have found its external application unnecessary, especially to soft condylomata. But wartlike excrescences with horny points on their surface require the external use of equal parts of alcohol and Thuja juice, and also the subsequent internal administration of nitric acid."

We add in this immediate connection the communication of a follower of the old school upon this same disease, because observations made upon the same subject by men of opposite views, are stringent proof of the truth of those matters wherein they agree.

On the internal and external use of *Tinct. Thujæ* in cases of *condylomata*, by Dr. Warnatz (*Monatschrift für Med. &c.* 1838, Br. H. 2).

"Every practising physician must have experienced the intractability and the liability to return, when surgically treated by excision, of condylomata, those lymphatic vascular excrescences in the *rete vasculosum* of the skin, lying near the mucous membrane of the rectum and genital organs, which appear originally as symptoms of secondary syphilis.* The

* It is still a question whether condylomata are forms of primary or secondary syphilis, or whether they may not be both. The thing becomes much simpler to those physicians who recognize the distinction between the gonorrhœal and chancrous sickness.—*Mayrhofer.*

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author resided in a district where among a part of the country people secondary syphilis is not unfrequent, and appears pretty often in the shape of condylomata about the anus and genitals. Among these again, those with broad and dry surfaces were disproportionately more frequent than those with pointed, sore and secreting ones. Such patients often continue to bear the disease for a long time without its apparently exerting any very great influence on their general health, until excoriation, pains, and the extension of the excresences oblige them to seek the aid of a physician. Then the most minute investigation frequently detects not the slightest trace of syphilis except the condylomata, which in women, however, is commonly accompanied by a suspicious vaginal blennorrhœa, and and it is often exceedingly doubtful (especially after a severe mercurial treatment) whether we are to regard the original disease as still present in the cutaneous excrescence or whether it has set up in this shape a new form of disease. We certainly saw many cases cured under the employment of the best known remedies, as under Dzondi's treatment, under the Louvrier-Rust inunction, under red precipitate (without cauterization of the condylomata). The well known external applications, either purely caustic or such as tend to produce an alteration in the morbid process, were also used, as *Lapis infern.*, *Lap. caust.*, *Cupr. sulph.*, *Liquor hyd. nit.*, *Sol. tart. emet.*, *Acet. saturni.*, *Sabina*, Plenck's solution of *Sublimate, Camphor and Alcohol.* In many cases, however, the reaction thus excited was too painful and even not without danger; sometimes they could not be employed from domestic and matrimonial considerations; sometimes the knife was finally necessarily resorted to and then the disease returned, especially, according to W.'s observation, in young and plump individuals."*

"It is very possible, however, that in many cases new and repeated syphilitic infections may have taken place which have been concealed from the physician so long as they were new. Unfortunately, in relation to the moral conduct of such patients, "*Quilibet præsumitur malus*" must be the physician's guiding maxim."

"Two years since the author was especially annoyed by a patient so afflicted with condylomata that none of the usual

* Condylomata, the result of gonorrhœa, defy the therapeutic triad of the old school, *Mercury*, *Caustic* and the *Knife*.—Nay, Dease has remarked that they did not disappear though the patients were so long salivated that they died of marasmus, thus verifying Hildebrandt's remark, "*Sunt medici qui morbos construunt et aegros destruunt.*"—*Mayrhofer.*

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remedies were of the least avail. On account of the original syphilitic infection, the patient had already been through a course of inunction, but without any result as to the condylomata. W. then recollected that Hufeland, in his "*Journal für Pract. Heilk.*," recommended the external application of Thuja to condylomata, and he resolved to try its effect."*

"For four weeks in succession, the warts upon the *scrotum and perinæum* were painted three times a day with the alcoholic tincture of Thuja; the cure which followed is perfect to this day, and no other syphilitic symptom whatever has appeared. W. employed the same remedy in the same way and with similar results with several patients, and finally resolved to try what effects might be expected from the internal use of the remedy. He administered it internally in several cases of broad condylomata twice, from eight to sixteen drops, and at the same time employed it externally with astonishing success. In several slight cases, a perfect cure followed from the internal exhibition alone. The author relates the following case:

"N. N., a stout country girl 29 years old, as the result of an impure coitus, had suffered for over a year with *syphilis univ.* (showing itself chiefly in the cutaneous system,) and had undergone such a profusion of doctors and doctors' drugs that her pecuniary means, at best but scanty, were pretty much exhausted. On examination he found small chancres (mucous follicles of the vagina in a state of ulceration), a tolerably copious leucorrhoea, with discolored, offensive secretion, and very extensive *condylomata lata.* The anus and posterior portions of the *labia pudenda* were covered with a broad, cauliflower-like excrescence, consisting of broad, slightly reddened, but otherwise almost dry condylomata, so that the anus had precisely the appearance of the external genitals with long, elevated *labia externa.* Besides these, there were, neither in the throat nor any where else, any traces of syplilis to be seen. She was received into the Charity Hospital in Camenz, in Upper Lusatia. The physicians of the establishment, Dr. Röderer, and the author's father, Warnatz, employed various

* Hufeland could only have recommended Thuja for condylomata upon Hahnemann's authority, for he as the first prover of Thuja recognized its specific virtue in sycosis, and employed it for that affection. Our opponents have, ever since the first promulgation of homœopathy, been in the habit of helping themselves to homœopathic dainties and nicknacks. Their pretended ignorance, evasion, or concealment of the homœopathic source we must decidedly condemn, as a violation of the right of property which Homœopathy is in duty bound to maintain. *Cuique suum.—Mayrhofer.*

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mercurials, and even inunction, without any effect upon the condylomata. The ulceration of the vaginal mucous membrane and the blennorrhoea had indeed almost disappeared, but the condylomata were unaltered."

"Thuja had already been employed externally on the recommendation of the author, but without result. He now advised the internal exhibition of the tincture of Thuja without delay in a dose rising from eight to sixteen drops twice a day. The external use of it upon the condylomata was continued. The case was tedious but the result was striking. After pursuing this course for three months a perfect cure was attained, not only of the condylomata but also of the vaginal blennorrhoea."

"Altogether W. has treated 16 cases, fourteen of the broad and two of the pointed condylomata. These latter remained uncured, but rapidly disappeared on exhibiting *Liquor hyd. nitr.* externally, and *Sublimate* internally. Eleven of the fourteen cases of broad condylomata were perfectly cured. Of the remaining three cases, one still retained small warty fragments, which the author excised, and in the two others no change was perceived; it ought to be remarked, however, that one of these patients had been cured by Thuja a year before, but when the disease appeared anew no cure was obtained."*

"In eight cases the remedy was applied exclusively internally; in eight both externally and internally. Internally the dose was from six to sixteen drops of the pure drug taken twice a day; externally, it was painted on three times a day with a fine brush, until, by and by, burning, excoriation and slight secretion from the condylomata came on. If they were sore and excoriated at the commencement, the application of the remedy occasioned a pretty severe burning pain. Finally, it is not possible, by the closest attention, to observe the *farrago symptomatum* which the Homœopaths pretend to have noticed as effects of this drug.† Patients who took the remedy internally perceived a feeling of burning and warmth in the mouth, throat, and on the tongue, extending into the precordial region, but this soon passed off.

* It is very probable that Sabina, externally and internally applied, would have effected a cure in this case.—*Mayrhofer.*

† The apparent confusion of symptoms in the Hahnemannian system is the greatest stumbling-block to the physicians of the old school. They find it much more convenient to reject the good with the bad than to subject themselves to the trouble of studying the character of a remedy from the physiological proving, or of making experiments with drugs upon their own bodies. As to this case, the few drops of Thuja exhibited produced few primary symptoms, because their powers were exhausted in combating a disease to which the drug was perfectly appropriate.—*Mayrhofer.*

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No special operation on the digestive organs or bowels was observed; but in several cases nocturnal cutaneous excitement and increased urination seem to have been produced."*

"A slight itching was the only remarkable feeling in the condyolmata, which is, however, rather to be ascribed to the perinæal sweat."†

The patients did not complain at the commencement of the treatment when the Thuja was applied to the dry condylomata; after several days' application, when the skin had become thin and excoriation had commenced, they only felt a little burning. At the same time the warts reddened somewhat, and showed some, though little secretion, which appeared to be the especial agent of cure by the outward application of Thuja. The author, however, has never seen those violent effects from the external use of the drug which Dr. Fricke of Hamburg has observed, in whose practice, though using it in a diluted form, it caused such remarkable irritation that he was obliged to lay it aside. Fricke saw considerable swelling and excoriation of the whole neighborhood where it was applied, follow in every case. Diluted, the remedy produced no results, and only in one case was he able to effect a tedious cure. (*Casper's Wochenchrift*, 1844, N. 24.) The experience of Dr. Köhler of Warsaw is somewhat opposite in character. He never witnessed inflammation, excoriation, or even unfavorable influences or relapses‡ after the employment of the drug. The same was the experience of Dr. Leo of Warsaw. He constantly associated the internal administration of mercury§ however, with the external use of Thuja. (*Fleker's Annalen*, &c. 1835. H. 3.) The author does not know of any

* These observations agree perfectly with our provings.—*Mayrhofer.*

† The sweat on the genitals belongs equally to the operation of Thuja, as our provings testify, and itching and tickling in the condylomata under the use of Thuja have already been observed by Hahnemann.—*Mayrhofer.*

‡ Diversity of effect depends upon the relative irritability of the individual patients. Thus the tincture of Thuja will produce no unpleasant consequences in a torpid patient, while in one who has a well marked susceptibility to this drug, even dilutions will produce violent reaction. The *quantum* of the drug must be taken into consideration in relation to the individual no less than the *quale*. If Dr. Warnatz is of the opinion that Homœopathy consists in small doses (a notion with which homœopathizing allœopaths would fain quiet themselves and others) I beg him to know that Hahnemann himself has directed the application of the Thuja tincture to condylomata in the oldest and most inveterate cases (*Chron. Krank. Heil. der Sycosis*).—*Mayrhofer.*

§ In order to keep up the art of hodge-podge, and to secure the certainty of a doubt as to which remedy effected the good!—*Mayrhofer*

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other observations that have been made public.* The author does not permit himself to form any opinion upon the pharmacodynamic character of Thuja; since for this, still more extended experiments are necessary, which are to be expected from the heads of great clinical institutions.† He has communicated the little experience he has had, without prepossession and without any sympathy for Homœopathy,‡ but simply because he conceives it to be the duty of every physician to contribute, according to his ability, to that common good of all, the extension and advancement of science.

1. *Uncomplicated Sycosis.*

Dr. Trinks relates the following case of primary sycosis:

1. A young man was exposed to contagion by a coïtus and eight days after, comblike, horny excrescences appeared upon the inner surface of the prepuce. Trinks diagnosed these excrescences to be condylomata, but the patient, not having confidence in this opinion, consulted another (distinguished) physician of Dresden, who diagnosed Trinks to be an ignoramus (allœopathic professional courtesy! M.), and quieted the patient with the assurance that the excrescences were the result of too violent rubbing and erosion of the prepuce (sub coïtu) and that they would soon spontaneously disappear. Thus comforted, the patient departed on a journey, giving no thought to his ailment; but on returning home, at the end of six weeks, he

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* Because the author had neglected to acquaint himself with the literature of Homœopathy of which many of the physicians of the old school are still ignorant. All those physicians who neglect the study of Homœopathy richly deserve the reproach of *onesidedness*, and so long as candidates for a degree are not examined on the learning of the new school, so long will our public examinations supply us with only onesided priests of Æsculapius.—*Mayrhofer.*

† We cherish like hope with the author. But unfortunately, Homœopathy commands as yet no syphilitic clinique, and to all appearance will wait long before she attains so desirable an object.—*Mayrhofer.*

‡ This protest against Homœopathy is a sufficient proof of the prejudice of the author. He who cures condylomata with Thuja is a Homœopath, because his treatment is founded on the principle "*similia similibus*," and in truth, he takes part in Homœopathy. Before the world, indeed, he may be an avowed or a secret Homœopath, or even a Homœopathic smuggler, according as he is honorable enough to acknowledge or weak enough to be silent respecting his faith, or so destitute of principle as to plough with another's heifer and read by another's candle without acknowledging his obligations to the owner. Homœopathy, however, by this time should be well accustomed to the treatment of her rationalist opponents, slapping her in the face with one hand and picking her pocket with the other.—*Mayrhofer.*

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found to his horror that the excrescences had considerably increased both in number and in size.

The formerly incredulous physician now declared them to be condylomata. But the patient declined his treatment and sought aid of Dr. Trinks. The horny condition of the excrescences led him to the external and internal use of Thuja, which worked a perfect cure within six weeks.—(*Annal. der hom. Klin.* 1, § 187.)

Tietze (surgeon) communicates the following cases (*Op. cit.* § 369, 370):

2. A man 30 years old, blond, lean, of middle height, had suffered several years from sycosis. He was treated with mercurial remedies, whereupon the condylomata vanished, it is true, but soon came to light again. Driven in again by the local application of quicksilver, the excrescences soon returned. Thus passed several years, the patient keeping constantly by him a pot of mercurial ointment in order to daub over them wherever they broke out next. When he consulted Tietze he complained of vertigo, eructations after eating, grumbling in the abdomen, burning in the urethra, especially morning and noon. There were several warts on the *corona glandis* which became moist during the increase of the moon, and discharged a purulent fluid. He had also cough with discharge of yellow mucus, severe thirst, and twitching of his limbs in sleep, perspired much, and complained of fatigue in his legs. On the 10th July, 1828, he took a dose of *Thuja* 30: this was repeated at the end of a fortnight, and on August 10th he had three pellets moistened with *Acid. nit.* 24.

In the beginning of September the condylomata had disappeared, and at the end of the month, even the marks on the skin where they had been. The chest trouble was gone. He married, became the father of a sound, hearty child, and experienced nothing more of his tedious complaint.

3. A strong young man had had for a long time two warts upon the prepuce nearly as large as peas, which, however, occasioned him no inconvenience. Dr. Rummel gave him on the 18th of February four doses of Thuja 30. Six days after, no change being perceptible in the condylomata, a considerable swelling made its appearance in the cheek, threatening to end in suppuration. The patient took one dose of *Mercury* 15, whereupon the abcess in the mouth broke and the swelling disappeared. Freed from this interpolated disease, the patient again took advice in respect to the warts, and received two pellets moistened with *Thuja* 30, with the direction to dissolve them in a glass of water and to take a table-spoonful a day.

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Ten days after, the patient came in consternation to his physician, with the story that the whole glans was covered with pus. Rummel recommended him to put dry lint between the glans and prepuce, and to do nothing else.

After an interval of two days the genital organs were found entirely freed from warts. No trace of a scar could be discovered and he continued perfectly cured of sycotic affections.—(*Allg. hom. Zeit.* B. 5, § 102.)

4. A young man, two years before, had contracted a gonorrhœa, and when this was finally suppressed, it was succeeded by condylomata about the anus, which he at first neglected and afterwards bunglingly treated on his own responsibility. When he applied to Dr. Schindler, in January, 1833, the whole perinæum as far as the scrotum and around the anus for a breadth of two inches was beset with large moist condylomata. He complained of violent burning and biting and could scarcely walk. No improvement resulted from a dose of *Thuja* 30. *Acid. nit.* 30, somewhat diminished the burning.

From February 24th to March 16th the patient took every eight days a dose of *Thuja* 30. The warts ceased to be moist, appeared to become smaller, and he could walk better. *Nitric acid* 30, one dose every eight days. The improvement progressed visibly; several small warts disappeared, the large ones became flatter, the burning and biting entirely ceased.

April 28th. The patient again had four doses of *Thuja* 30 to be taken at intervals of eight days; the most of the condylomata disappeared except the larger ones: one pair only was left of those on each side of the anus.

Another four doses of *Thuja* produced no further improvement, and four doses of *Phos. ac.* remained similarly without effect. Dr. Schindler gave now a dose of *Sulph.* against any possible psoric complication; the disease, however, on the 19th of August was at the point where it had been at the end of April. The patient now took every morning a drop of the pure *Thuja* and also applied lint moistened with *Thuja* externally.

August 27th. Every trace of condylomata had disappeared, the skin was smooth, and the patient perfectly cured.—(*Allg. hom. Zeit.* B. 4, § 276.)

Dr. Rummel gives the two following cases of sycosis (*Archiv für, &c.* B. 8, H. 1, § 58, 59):

5. In the first case urethral gonorrhœa was also present, and the whole scrotum was beset with hard, only partly moist tubercles. A cure followed the exhibition of one dose of *Merc.* and two doses of *Thuja* (strength not stated) and the external use of the juice.

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6. A young man applied to Dr. Rummel by letter, requesting him to remove an ulcer upon his penis consequent upon contagion; from the description, Rummel concluded that it was a chancre, and prescribed *Merc.* 12. No improvement following after a fortnight, and the cure still lingering after *Acid. nit.* 12, he insisted upon seeing the patient. Autopsy showed it to be sycosis. Two condylomata were secreting an offensive purulent mucus, and the patient stated that he had perceived a painful erosion (but decidedly no chancre vesicle) the very next day after the copulation. There was besides in the left axilla a dry, brown elevation, such as Hahnemann has described. On the 24th of December the patient took *Thuja* 30, on which the condylomata perfectly disappeared in three weeks. The brown, herpetic elevation in the axilla, however, remained unaltered, and first vanished after a dose of *Acid. nit.* 18. The exhibition of *Thuja* eradicates condylomata with brown spots under the arms.—(*Allg. hom. Zeit.* B. 1, § 96.)

7. Dr. Lobethal cured an officer of cuirassiers of an entire circle of condylomata around the anus by the use of *Thuja* 1 (drop doses) alternated with *Acid. nit.* 3 and the external application of the tincture, in some months after the patient had received no benefit from small doses of the same remedy administered by another homœopathic physician.

Dr. Mohnike relates an interesting case of obstinate sycosis cured by Thuja. (*Hufeland's Journ.* March, 1843. *Extracted into the Oest. Med. Wochenschrift*, 1843, No. 21.)

8. In the autumn of 1839 there applied to Dr. Mohnike a young merchant, who some two years before had contracted a violent urethral blennorrhœa from an impure cohabitation. He had never previously had syphilis, and this gonorrhœa, even after a few weeks' use of copaiba, had disappeared. But scarcely two months had elapsed before the warts and excrescences were gradually developed, from which he had now suffered, for nearly two years, and against which no remedy seemed to make head. The patient was thus led to believe that his case was incurable, and had made up his mind, as a last resort, to try the water-cure at Græfenberg, provided Dr. Mohnike's treatment was ineffectual. The examination of the patient developed the following facts; the inner surface of the prepuce and the portion of the penis behind the glans were, as it were, sowed over with numerous pointed condylomata. These excrescences of the mucous membrane lay prostrate on the spot whence they had sprouted, but when Dr. Mohnike raised their heads with the forceps, the thin pedicle appeared of nearly a line in length. The exudation of the offensive clammy moist-

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ure peculiar to condylomata could only be detected in a very slight degree. The patient had never felt pain or itching in the glans and foreskin. He had had no cohabitation since the appearance of the condylomata. The perinæum was occupied in its whole extent between the scrotum and anus by a large *condylomata latum*. It was certainly half an inch high, and extended on both sides of the raphé. It exuded much, and was covered with a greasy purulent moisture. The patient complained that he could often scarcely endure the torture when walking, and that the inner and upper part of the thigh was often sore and inflamed from the acridity of the discharged fluid.

A similar but smaller broad condyloma than that in the perinæum was found on the inner surface of the left thigh. The orifice of the anus, where the skin meets the mucous membrane of the rectum, was surrounded by three large *condylomata lata*, which simulated hæmorrhoidal protuberances. They exuded much, and constantly occasioned a very painful troublesome itching, but intolerable pain when he had a hard stool. Finally, behind the anus and on the coccyx there was an excrescence resembling the others in size and condition. He had never experienced pains in the bones, and the most careful examination of the oral and faucial cavity could detect there no indications of secondary syphilis. He had already taken Zittmann's decoctio n and Dzondi's corrosive sublimate pills. Besides this, the most varied sorts of caustic had been locally applied to the warts, and even excision and the ligature had been tried. But external and internal treatment were equally unavailing.

Mohnike almost despaired of obtaining a perfect cure. He prescribed internally Berg's formula of *Stib. sulph. nig.* with *Hyd. præc. rub.*, which has often proved serviceable in confirmed lues, especially where the skin and mucous membranes are affected. The patient was ordered to lie abed the greater part of the day, and to promote the cutaneous transpiration by frequent drafts of an infusion of *Spec. Lignor.*, with a spare diet. In addition, Dr. Mohnike used Plenk's solution of sublimate, with which he cautiously touched the warts on the glans and prepuce once a day for a week. The broad condylomata, except those at the anal orifice, he covered with lint, saturated with the same solution. All to no purpose. He now threw aside all caustic applications and waited to see if internal treatment alone would not effect the cure, but with similar result. He then resorted to the use of *tincture of Thuja*, and soon had reason to be amazed at the rapid, scarcely hoped for ac-

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tion of the new remedy,* for already on the third day after the whole condylomata had been several times daily painted with the tincture, they presented an entirely altered appearance; they shrivelled, fell in, and sensibly diminished in circumference. On the fifth day of the treatment all the pointed warts upon the glans and inner surface of the prepuce had disappeared. The smallest remains of the broad perinæal condylomata were visible on the ninth day. The tincture occasioned but little pain, and the sound skin at the base of the warts was neither inflamed nor irritated. The excrescences all disappeared by absorption, and without ulceration or gangrene.

2. *Sycosis with Rhagades.*

A case of this kind is related by Dr. Genzke of Parchim. —(*Allg. hom. Zeit.* B. 22, § 22.)

1. A young physician had contracted by contagion a gonorrhœa, which disappeared under the use of Balsam of Copaiba. One year after, violent burning came on in the anus, which became intolerable when walking or at stool, and an offensive moisture distilled which soiled the linen. Examination showed a shining mulberry condyloma, with a broad base close to the anal opening; and on both sides of the anus, in the natural folds of the skin, two deep fissures (rhagades), which, as well as the condyloma, secreted an exceedingly foul fluid. A colored yellowish brown ring two inches broad surrounded the anus. Dr. Genzke prescribed the first dilution of *Thuja*, with directions to take one or two drops a day in the morning, fasting, and to paint the wart and fissures with the tincture. In fourteen days the burning had almost completely disappeared, the condyloma was visibly wrinkled and had lost its polish, the rhagades were smaller, the foul secretion had become less and inodorous, and in short, all the local symptoms progressively diminished. The patient, however, a novice in Homœopathy, mistrusting the small doses, took larger ones than were directed, and experienced *pressing aching in the forehead, restless unrefreshing sleep, and a well-marked balinitis.* The glans was in its entire circumference swollen, inflamed,

* We must class Dr. Mohnike too among the homœopathic freebooters, because he does not state the source whence he obtained his new wisdom. If the remedy was good enough to effect in a few days a cure where the so-styled rational treatment had proved, for years, inefficient, it surely was good enough to have been openly acknowledged as a homœopathic remedy.—*Mayrhofer.*

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covered with small pimples, and discharged a tolerably copious purulent secretion.* The Thuja was omitted, and four weeks after the beginning of the treatment the whole train of symptoms, both of the disease and of the remedy, had vanished.

3. *Sycosis co-existent with Syphilis.*

Dr. Schrön gives us an instructive case of Sycosis and Syphilis combined.—(*Allg. hom. Zeit.* B. 5, § 147.)

1. A girl sixteen years old had leucorrhœa and bean-shaped warts, especially about the anus. Schrön (then an allœopath) subjected her to a course of sublimate pills, and in the meanwhile removed the warts by the knife. She was afterwards treated by another allœopath likewise with mercury; but the warts and leucorrhœa never entirely yielded. In January, 1833, she again applied to Schrön. She had on each side of the nose along the cheeks two chancres of the size of a ducat, which extended into the nostrils and presented elevated red margins and a tallowy bottom.† There lay about the anus collection of cockscomb-like warts which discharged, and occasioned such a burning that she could not lie in bed at night. The leucorrhœa reddened the thigh. Schrön gave *Merc. viv.* 3 (½ grain), alternating it with *Thuja* 3 (1 drop) every eight days, and applied the undiluted tincture externally upon the condylomata. In six weeks the chancres healed entirely, and, in twelve, warts and leucorrhœa had both disappeared. The burning in the condylomata first diminished, then they ceased to discharge, and finally they shrivelled into mummies and vanished.

2. A peasant girl 30 years old had in September, 1844, a soldier on furlough for a lover, and a fortnight after his departure she felt violent burning in the anus and a corrosive leucorrhœa set in. Soon after she remarked little tubercles about the anus which were painful to the touch and when at stool. She consulted a country midwife, who examined her and said she had piles. She went with this opinion to a barber-surgeon who treated her for the piles. But the tubercles becoming constantly larger and more abundant, moist excrescences appearing also upon the genital parts, and an ulcer coming on the right thigh, she consulted an obstetric practitioner, who examined her and prescribed (Nov. 18) fifteen grains of *Merc.*

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* *Balanorrhœa* is an effect of Thuja beyond a doubt, as I can substantiate from my own experience.—*Mayrhofer.*

† Were these chancres the consequence of the original infection, or had a new contagion taken place in the mean time?—*Mayrhofer.*

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solub. Hahnem., made into thirty pills with extract of liquorice, of which she was to take every evening.

The ulcer, indeed, healed under the use of the pills, but the excrescences continued to spread. In 1845 (March) the patient came to me. Examination showed a countless number of condylomata. Round the anus was a ring of broad, soft, cracked, moist condylomata. The whole perinæum was crowded with a host of warts, which had become confluent, and so formed one great *condyloma latum.* Between the *labia externa* and the thighs a double row of condylomata ran up on both sides to the *mons veneris.* The *labia majora* were inflamed, much swollen, and covered internally and externally with warts of all sizes. Finally, there were solitary condylomata down the inner side of the thigh almost to its middle. It was, in truth, a disgusting sight, for the number of warts must have been over a hundred. The vaginal blennorrhœa corroded the thigh. She felt burning in the condylomata; the catamenia had ceased during the disease.

I gave twenty drops of *Thuja* 2 in six ounces of water, with directions to take a table-spoonful three times a day. On the 7th of April the patient returned with the news that she was much improved. The burning was much diminished; the condylomata discharged less and looked shrivelled and perishing; the swelling of the labia and the leucorrhœa were less. On the 13th the patient had another vial of *Thuja* 2, upon which the amelioration proceeded and the menses appeared. I now gave her the tincture, one drop three times a day internally, and directed her to moisten the condylomata with it morning and evening. By the end of May over half of them were gone, and as the cure seemed to be at a stand I gave her *Acid. nit.* for a week (a few drops in six ounces of water, one spoonful morning and evening).

The *arbor vitæ* operated with renewed energy after the administration of the nitric acid, which last produced but little alteration in the disease. The solitary warts vanished completely in June, and the complex ones were reduced in size one-half. All the other troubles were much lessened.

In July the girl fell from the thatch of the cottage upon which she was spreading hemp to dry, and injured herself so severely that she was necessarily treated for the consequences of the fall for a month after. In August I made an experiment with the tincture of *Sabina*, and had the condylomata painted with it daily, in order to see if in this neglected condition the savine would not hasten the cure. This was not the case. I was obliged to have recourse again to *Thuja*, under the perse-

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vering use of which all the morbid symptoms ceased, and the condylomata disappeared, except a small spot on each side of the anus, toward the perinæum, where the colony formerly existed.

In October the patient took no more Thuja, and I cannot say whether these last traces of the condylomata finally disappeared or not; we may, however, judging from the rapidity of the cure up to that time, almost certainly conclude that they did.

I may also remark that the patient, who entirely despaired of a cure in the commencement, exhilarated by her progress, may have taken the doses stronger than they were directed; in the second month of the treatment she exhibited, as signs of the operation of Thuja, single *large vesicles* upon the thighs and arms, which were surmounted *by a red areola* and passed *into suppuration.*

4. *Sycosis after the cure of Syphilis.*

Dr. Portalius relates a case in which condylomata succeeded to the cure of syphilis.—(*Arch. für hom. Heilk.* B. 19, H. 3, § 80 et seq.)

1. Mr. M. had two large genuine syphilitic ulcers on the prepuce. No signs of sycotic affection were to be perceived on a daily examination. Both chancres healed in eight days (from the 13th to the 22d January), during which time the patient took daily one dose of *Merc. nig.* 12. Kept strict diet and lay abed (two absolutely indispensable conditions, if syphilitic affections are to be rapidly and permanently cured). Five days after the perfect healing of both chancres, condylomata sprouted luxuriantly upon the *frænulum præputii*, which were cured by Thuja. (It is not stated what dose was given nor in what time the cure was effected.—*Mayrhofer.*)

Tietze relates an analogous case.

2. A stout girl had suffered from a very copious leucorrhœa since her delivery a year before; it was accompanied by violent itching on the genitals. On inspection the *labia majora* were found considerably swollen, and numerous ulcers with pale, tallowy bottoms, from the size of a lentil to that of a groschen, covered not only the external organs of generation but also stretched deep into the vagina. Their syphilitic character was undeniable. She took daily *Merc. nig.* 12. After a fortnight a considerable improvement appeared, and the patient took from the 10th of August to the 18th September, six doses of Sulphur 30, which not only removed the leucorrhœa, but perfectly healed the remains of the ulcers.

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Fourteen days after, however, such a profusion of condylomata had appeared that the whole presented a most shocking sight. Even on the right corner of the mouth there was a wart. She took externally *Thuja* (tincture) and internally *Thuja* 30, every day. The treatment was interrupted by many accidents, but resulted in a perfect cure at the end of three months.

5. *Masked Sycosis.*

1. An illustrious personage, seventy years of age, had frequently suffered for many years from a cough, which since 1836 increased in autumn to an inflammatory catarrhal fever, and yet no pulmonary lesion could be detected. In that year he broke two ribs by a fall; the accident was followed by a very violent pneumonia which ceased after purulent and offensive sputa. During the two following years he was not seriously sick; he had at times, as he had had before, attacks of headache in the forehead, sour eructations, and diarrhœa, which however were soon cured. In July and August, 1839, cephalic congestions with violent vertigo often distressed him, and to these were soon added pressure in the forehead and in the right eye, with inflammation of the eyelids, watering and protrusion of the eye. By appropriate remedies the affection was indeed diminished, but the under lid still remained inflamed. On the 9th of October, 1840, the patient (a distinguished military officer) sat on horseback five hours in the sun; in the evening he was attacked with violent fever accompanied by intolerable pain in the forehead over the right eye. This latter was much inflamed and protruded somewhat from the orbit. The fever soon disappeared; the trouble in the eye too was somewhat lulled, but there still remained inflammation of the lower lid, watering of the eye, and a swelling at the external canthus back in the orbit, which was not painful nor did it interfere with vision.

Toward the end of October, the patient went on a journey and only returned after an absence of six weeks. During this time, there had arisen in the eye a vegetation of the size of a bean, which, commencing in the internal canthus, extended along the under lid. The tumor already existing in the external canthus had enlarged, and the eye was considerably protruded from its socket. Occasional headache in the forehead and violent congestions were also present. The domestic physician of the illustrious patient, Dr. Hartung, considered the case as a critical one, for it was his opinion that a

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fungus had formed in the orbit, the development of which he dreaded.

The homœopathic treatment now commenced had no special issue; the general strength was preserved by the various remedies employed, but the growth of the fungus could not be stopped. The tumor over the external canthus had now a purplish color, and both it and that in the internal canthus had increased, and there appeared between the ball of the eye and the under eyelid a fungous, elastic, pale red, painless, spurious growth, which pressed the ball out of the normal axis of vision. The pupil was directed upwards and outwards, and the free motion of the eye impeded, but the power of vision as yet unimpaired.

An oculist, called into consultation on the 6th of January, 1841, confirmed the diagnosis of the ordinary physician, and gave a very unfavorable prognosis, declaring "that there was nothing to be done in the case, and that no method whatever could effect a cure." At Hartung's solicitation that he would at least recommend something, he prescribed corrosive sublimate (a quarter of a grain daily), at the same time remarking "that it would do no good, but he knew nothing better." Dr. Hartung acquiesced in the prescription, but from caution administered only one-twelfth of a grain (whether only once or oftener is not stated), but was immediately obliged to give an antidote on account of the violent cephalic congestions that came on.

On the 26th January, 1841, Hartung describes the state of the disease as follows—(*Allg. hom. Zeit.* B. 20, § 145 et seq.)

A hard grayish blue tumor filled almost the whole orbit and displaced the ball of the eye outwards; on the under lid it was clearly fungous, it was painful under strong pressure, and bled easily; the ball was pushed against the external canthus and immovable. The patient perceived various pains in the fungus, sticking, tearing, burning and itching. The eye itself gave him no pain, but the visual power was so affected that every object opposite the external canthus appeared black. The eyelids were also stretched and swollen, black and blue, and immovable. The conjunctiva, especially that of the lids, the *plica semilunaris*, and the *caruncula lachrymalis* were loosened, of a dirty red, and covered by a thick tissue of varicose vessels.

In the morning the crevice between the lids was filled with a white, viscous, purulent mucus; the eye watered in the daytime; in the evening it was hot, dry and painful. In

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other respects the patient was free from febrile symptoms, and his strength and the vital functions of the organism were as favorable as could be desired.*

The case now fell wholly to the charge of Dr. Hartung, as the patient emphatically declared "that he would have no treatment but the homœopathic." Dr. Hartung employed at first, *Ars.*, *Psorin* and *Herpetin* (all three of the 30th dilution), but without result. The bleedings ceased after *Carb. anim.* 30, and the fungus ceased to grow, but no amelioration followed. Hartung now gave one drop of *Thuja* 30 in three ounces of distilled water, a table-spoonful three times a day. On the first day appeared some reminiscences of the previous morbid condition, as, aching on the right side of the forehead, nocturnal cough, slight diarrhœa, renal pains and itching on the inside of the thigh with a miliary eruption.† These symptoms diminished on the second day and vanished on the third. The local symptoms were, itching in the inner canthus of the diseased eye, and secretion of a creamy fluid about the whole circumference of the fungus. This result induced Hartung to apply Thuja also externally. He caused the fungus to be moistened every two hours with warm water (four ounces) containing six drops of the tincture. On the fourth day after the exhibition of Thuja, the pain in the eye had ceased, the secretion of the milky fluid had increased, and the fungus was notably diminished especially at the upper orbital border. The amelioration steadily proceeded under the employment of Thuja through the fifth, six and seventh days, and, to the astonishment of all who had seen the disease earlier, the fungus in the internal canthus and under eyelid disappeared. On the

* The communications of the consulting physicians do not agree in relation to the special diagnosis. The ordinary, in his account (*loc. at.*) speaks constantly of a *fungous excrescence*. Another physician, who was called in consultation, says "that he had satisfied himself, by the presence of all the commonly reputed characteristics of that disease, of the existence of a scirrhous metamorphosis," and a third physician calls the affection, "*Ophthalmiam syphiliticam ex schirro orbitæ syphilitico oriundam.*"

Since we too have a right to express an opinion on the subject we take the liberty of saying, that we consider the spurious growth in question as a sycotic excrescence, and upon the following grounds: 1, because the pathognomonic signs of the disease point that way with the greatest probability (notwithstanding that the veil that conceals the previous history of the case is not removed); 2, because the *mercury* administered produced no amelioration; and 3, because *Thuja did* prove the specific—according to the allowed rule of probabilities, "*ex juvantibus et non jus vantibus judicum sumendum est.*"—*Mayrhofer.*

† Do not these symptoms still more indicate *Thuja?—Mayrhofer.*

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evening of the 8th and the morning of the 9th days, the patient had a dose of *Carb. anim.* 30. The fungus was also painted every morning for eight days with the twelfth dilution of *Carb. anim.*, and the Thuja baths were continued.

These two remedies (Thuja and animal charcoal) were now employed, externally and internally, in eight day alternations.*

The result was so beyond all expectation successful, that within six weeks the fungus, progressively diminishing, disappeared, the eye regained its normal power of vision, the ball returned into its socket possessed of its former mobility, and in short, a complete cure was effected.

Dr. Bärtl relates a similar case of a fungous excrescence cured by Thuja, which he had occasion to observe when physican to the Syphilitic Hospital at Palermo.

2. "A man was attacked with a panaritium upon the thumb after having been cured of a balanitis by mercury. The inflammation terminated in suppuration, the abscess was opened, and a simple bandage recommended with lukewarm ablutions. The wound not only did not heal, but became redder and more sensitive, and burning pains came on in it.

"The remedies theretofore used, *Puls.* and *Sulph.*, produced no result; the pains increased, especially at night, and a red, fungous, cauliflower excrescence began to show itself from the wound; it felt hardish at the base, was very sensitive to the touch, and bled slightly.

"Under the idea that it might be an excrescence depending upon caries, I examined with a probe, but found the bone covered and sound.

"Touching with *Lapis infern.* was of no service; after twenty-four hours, the fungus was again there, and increased even more luxuriantly than before; the same result followed with burnt alum." This fruitless treatment, the previous disease, the form of the spurious growth, and also its accompanying symptoms, finally led Dr. Bärtl to the well-grounded conjecture that the fungus arose from a sycotic source, and induced him to employ *Thuja*, internally at first, afterwards externally also. The result was, that within a short time "*violent inflammatory irritation and suppuration was excited in the morbid growth*," by means of which the fungus, then of the size of a

* We cannot gather with certainty from Hartung's account whether the drugs *Thuja* and *Carb. anim.* were given separately in eight day alternations, or whether the external use of Thuja was continued also during the week of the charcoal, so that the fungus was only once painted with the Carb. in the morning and then frequently through the day with the Thuja, which is most probable.—*Mayrhofer.*

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hazelnut, melted away, and the man was discharged perfectly cured.*

Dr. Bärtl takes occasion to make the following remarks on the use of Thuja: I have found Thuja a very effective remedy in many forms of disease founded on pure sycosis. I have especially cured with it, condylomata which appeared on the inner surface of the prepuce or on the glans in the form of cauliflower, after urethral gonorrhœa or balanorrhœa, were pale red, itched, and bled easily on being touched. I employed it in high dilutions and repeated doses until signs of increased pain (in sensitive persons) and partial decay of the excrescence appeared, which commonly manifested itself by gray or blackish points on the surface; I then caused the whole growth to be painted once a day with the tincture. The condylomata dissolved in a short time by the *suppurating process* and a perfect cure resulted.

6. *Chancre Warts.*

There are chancres which instead of eating into the depth of the tissues, increase upward, and are cured either not at all or with great difficulty by mercury, which shows their sycotic character.

Dr. Attomyr gives us two cases of this sort.

1. A man 31 years old had had a small, flat, tallowy ulcer for three days on the inner surface of the prepuce. He took three doses of *Merc. sol. Hahn.* 4 to be taken every other day. The suppuration became greater, the ulcer larger, and showed now a red bottom. He had four similar doses to be taken in the same way. The chancre now rose above the surface of the prepuce—it continued to rise more and more after two doses of *Acid. nit.* 3, taken every other day, but rapidly healed after three doses of *Thuja* taken at intervals of two days. The whole treatment lasted 27 days.—(*Archiv für homœop. Heilk. B.* 18, H. 3, § 141.

2. A perfectly healthy young man contracted a chancre on the inner surface of the prepuce as the consequence of an

* Dr. Ritter, in his essay on the essential difference between Chancre and Gonorrhœa (p. 224), relates a case in which a violent inflammation of the testicle (*Epididymitis gonorrhoica*) supervened on suppressed gonorrhœa in the case of an officer; the inflammation left the testicle hard and swollen. Nine months after inflammation and suppuration came on with increase of the pains, and a fungous excrescence grew from the testicles which soon reached the size of a goose-egg. All the remedies administered were of no avail, and the fungus was removed by ligature.—*Mayrhofer.*

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impure connection. It disappeared on the use of external and internal remedies, but, from time to time, little aphthous ulcers appeared upon the glans and foreskin, which vanished spontaneously after from five to eight days.

At first three such erosions appeared on the spot where the chancre had been; then by degrees came six more which were half on the furrow of the glans, half on the prepuce. A new ulcer constantly appeared near the still visible spot left by one just healed. Once a spontaneous ulcer appeared upon the external surface of the prepuce, and healed likewise of itself after it had been covered with a loose crust.

These symptoms induced the patient to submit himself to a rigid mercurial after-treatment, but notwithstanding this, the occasional ulcers did not cease to appear. Three years after he exposed himself to a second contagion and was treated by Attomyr. In the beginning five very flat, confluent ulcers were to be distinguished. A week later there were ten chancres, which appeared, remarkably enough, upon the identical spots where the spontaneous eruptions had been. In the fifth week of the treatment, a chancre appeared on the external surface of the prepuce, which became covered as before with a slight loose crust. The whole eleven became raised instead of becoming deeper, and suppurated so profusely for full seven weeks that the patient wasted.

At first Attomyr prescribed one drop *Merc. sol. Hahn.* 4 each day, and because of the upward growth of the chancres, one dose of *Acid. nit.* 4 daily, for three weeks. As the suppuration did not diminish, however, though the ulcers looked very clean, the patient had *Thuja* 3 one drop, at first twice a day, then once a day, and finally every other day; the ulcers now healed perfectly. The whole treatment lasted nine weeks. —(*Archiv für hom. Heilk.* B. 29, H. 2, § 162 et seq.)

B.

Verrucae, Warts.

Thuja creates warts in those constitutions which are disposed to cutaneous excrescences, and must, therefore, under the proper conditions, possess the power of curing them. The therapeutic indications and conditions in this relation are: broad base, conical form, superficial seat in the skin, cracked, mulberry-like surface, simultaneous presence of other symptoms indicating Thuja. Warts, which appear after chronic gonorrhœa, in the most diverse parts of the body, yield without a struggle under the curative power of Thuja.

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1. Dr. Frank of Osterode, who, fourteen years ago, had been troubled with many warts on both hands, which were rubbed with antimonial soap, has had for some years on the left nostril a broad-seated, somewhat movable excrescence, which he often caused to bleed by pulling, upon which an unpedicled wart was developed which reached the size of a large pea. Frank rubbed this a couple of times daily with the tincture of Thuja.

After some days the wart became black, and developed many furrows on its surface. Frank now removed with a knife the chapped surface and left the excrescence alone. This increased again, which Frank had noticed when he first applied the Thuja; but the surface remained smooth, shining, horny and uncracked.

He now again applied the Thuja externally in the manner already stated, and on the very next day the same change took place in the form and color of the excrescence as on the first occasion. He now proceeded less rapidly, moistened the wart several days with Thuja, and then again ceased for a while. The wart became smaller, and in four weeks (including the pauses) the process of destruction was complete and the wart gone.

Dr. Huber* of Linz has observed two cases in which warts have been cured by Thuja.

2. A boy 14 years old, of scrophulous habits, had numerous (30 to 40) warts on his hands, and especially upon the back of his hands. Their size was various, from that of a millet seed to that of a pea. The surface of the smaller was smooth and almost translucent; of the larger roughly marked and cauliflower-like. Their consistence was not hard.

The boy had Thuja 1 on the sixth of October, 1844, with directions to take five drops every evening, and at the same time to wash the warts daily with the tincture of Thuja somewhat diluted. Although he used the remedy with great irregularity, yet on the 17th of November not the slightest trace of a wart was to be seen; the place where they had been, even, was not to be detected by any change in the skin. But during the treatment symptoms arose which we must set down to the account of Thuja: a very severe, twitching, sticking toothache, which came on several days in bed, in the evening, and disappeared every time in a quarter of an hour after a dose of *Cham.* 1; also a dark-red tubercle on the edge of the upper eyelid close to the internal canthus of the right

* Dr. Huber communicates these two cases as *provings*. They are however *cures* with excessive action of the remedy, which had been administered in large doses, with an eye to the proving.—*Mayrhofer.*

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eye. On the 13th of October it was soft, became harder by degrees, on the 18th attained the size of a sweet pea, after some days passed into suppuration, spontaneously separated, discharged much pus, and healed without the aid of art.

3. A girl fourteen years old, with dark hair and eyes, and who had not yet menstruated, had numerous warts on her right hand (20 to 25) which were partly horny like corns, partly less hard and rough upon the surface, partly smooth and small. She had besides on the back of the right forearm near the wrist, a pale-red herpes of the size of a copper Kreuzer, covered with little epidermic scales. She had Thuja internally and externally, at the same time and in the same way as the boy. When she had taken over thirty drops of *Thuja* 1, without experiencing any effect, she omitted the internal employment of the remedy, but used it externally for five weeks. The result was not so gratifying as in the case of the boy. Half of the warts, indeed, disappeared, and those that were left became flatter and less prominent, but they did not entirely disappear.* The cure took place in a twofold manner; in the case of three horny warts the subcutaneous reticular tissue became inflamed, an abscess formed, and on its bursting the skin and wart departed together. The small, smooth and soft warts became by degrees flatter, and entirely disappeared by desquamation of the two concentric cutaneous strata, without leaving a trace of their existence.

Dr. Huber afterwards made a second experiment of a week with the same girl, using internally the first dilution and the tincture. On taking five and eight drops of the tincture on the two last days, the most striking symptom was a tearing *digging pain in the nape*, aggravated by moving the head; in its greatest violence it became furious, and she shrank from pursuing the experiment. This confirmed Dr. Huber in the idea that the pain in the neck which had troubled him during his proving, was truly caused by the drug.

We have no account of any further changes in the warts, nor of the condition of the tetter upon the arm.

4. Dr. Blödau gave *Thuja* 30 against warts in great numbers, succeeded by violent aggravation. A week after he gave a pellet moistened with *Thuja* 30, and four weeks afterwards the warts had all fallen off.—(*Archiv für hom. Heilk.* B. 14, H. 2, § 107.)

Dr. Gross relates a remarkable case of warts, with an

* Doubtless the horny warts would likewise have entirely disappeared under the continued external and internal use of Thuja. Five weeks were not sufficient to complete the cure.—*Mayrhofer.*

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accompanying herpetic eruption. (*Archiv, &c.* B. 15, H. 3, S. 37 et seq).

5. A young man of about thirty years old, gave the following account of himself in writing: "I am laboring under an herpetic eruption, which spreads over my whole face. It shows itself, especially after being heated, as red spots, which then throw off white scales, and is accompanied by sticking, burning, and itching. Sometimes the eyelids are entirely covered with it. I have, besides, weakness of the stomach, with acidity and eructation, inflation of the abdomen with flatulence, constipation, with burning itching at the anus, palpitation of the heart, and occasionally pains in the back. When a child I had an eruption on my head, and at fourteen and twenty-one, on my face. At seventeen I perceived little elevations of the skin of my hands, similar to warts, which increased from year to year in size and number. At twenty-five I used some external remedy for them, after which they disappeared. After ten or twelve days, however, reappeared in this facial herpes, of which, to this day, I cannot get rid. I have already taken tea, for purifying the blood, sulphur, graphite, and mercury, but without success. After six weeks' treatment in Carlsbad the tetters disappeared for several months, but have now for a long time been reinstated."

Dr. Gross sent the patient eight doses of *Ars.* 30, with directions to take one every fourth day. After taking these powders, the patient wrote that there was no change in his condition, except that several warts had made their appearance on his hands, but the tetter had not gone. Gross now made choice of *Thuja* (dilution not stated), of which he sent six doses to be taken at intervals of four days. The warts and tetter disappeared together in consequence.

C.

Swellings and Excrescences on the Eyelids.

The general physiological character of Thuja is to create dermatic growth and excrescences, by stimulating the cutaneous system; these may exist upon any part of the body. It also excites pains, irritation, and swelling of the eyelids, suppurating tubercles on the eyelids and brows. Those morbid affections of the eyelids which in ophthalmic medicine are named from their varying forms *Hordeolum*, *Milium*, *Chalazium*, *Verruca*, and *Condyloma*, become proper objects for the action of Thuja, when their special symptoms, or the fundament-

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al sickness of which they are local manifestations, indicate its exhibition.

1. Dr. Bleifuss of Ochsenfurth treated a young lady who had scattered *Hordeola* upon the eyelids.* The conjunctiva was sympathetically affected, and her digestion was disturbed. She sought aid from every quarter, but in vain. *Iodium* even produced no effect, and she began to think of extirpation. Dr. Bleifuss accidentally (! M.) read the symptoms of Thuja recorded by Hahnemann, applied the tincture externally, and beheld, with astonishment, a rapid decrease of the disease. He now exhibited it internally (ten drops several times a day) and effected a perfect cure.

From that time Dr. Bleifuss learned to value Thuja, and subsequently wrought with it other wonderful cures.

"Let us pick," says he, "the grains of wheat out of this homœopathic chaff! they are of excellent service to our therapeutics, as I have frequently had occasion to be convinced.†

D.

Pains in the Limbs.

The arthritic pains which Thuja excites, especially in the limbs, are among the most frequent and most constant of the symptoms during the provings; they never entirely failed to appear in the most unsusceptible and least productive provers.

The special curative indications are, drawing, tensive, tearing, twitching pains, appearing suddenly, confined to one spot or limb, or wandering, aggravation in rest and warmth, amelioration by movement and in the open air, and in feverish con-

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* They appear to have been *Milia* or *Chalazia*.—MAYRHOFER.

† We thank our allœopathic colleague for the honorable frankness with which he has announced the source of his new knowledge; he has thus nobly distinguished himself from those physicians of the old school, who, as we have had frequent occasion to remark, secretly appropriate the useful grain from the homœopathic field and openly denounce its whole produce as chaff, or who, dressed in borrowed feathers, go cackling about as though themselves had laid the egg. The daily spread of homœopathic dilettantism among allœopathic physicians is indeed a most striking indication, on the one hand, of the pharmacological poverty of the old school, and on the other of the therapeutic wealth of the new; for what says the proverb? "The robber is in need, but the robbed has plenty." But we must most solemnly protest against any amalgamation of the physiological pharmacodynamics of the new school with the casuistic pathological materia medica of the old.—MAYRHOFER.

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ditions, predominant cold with numbness (deadness) of the affected limbs and desponding frame of mind.

Homœopathic literature is still very poor in vouchers for the therapeutic virtues of Thuja in corresponding arthritic affections.

Dr. Mschk relates a single case (*Annal. der hom. Klin.* B. I. S. 216).

A woman came crying and weeping to him, and begged him to cure her of the violent pain from which she had sufferred for a fortnight. The pain was tearing, and extended from the right shoulder to the points of the fingers. She also felt twitching in the muscles, now here, now there, from the top of the shoulder to the middle of the arm: the forearm and index finger were, as it were, dead, the other fingers numb. The pain was most severe on letting the arm hang down; in warmth, especially in bed at night, the tearing and twitching were aggravated, but were better in the cold and on motion. Perspiration produced an amelioration. Chills, with yawning, came on after midnight, and sleep appeared late, and was disturbed by horrible dreams. The patient frequently had tenesmus. She had an evacuation with difficulty every two or three days only, and it was sometimes mixed with blood. To these symptoms were added nocturnal thirst with sensation of cold in the arms, palpitation, and depressed spirits.

The patient had a dose of Thuja 27, with directions to return; which she did not do. Her physician accidentally met her, and she excused herself for her neglect by saying, that soon after taking the dose, her pains entirely disappeared, and the other troubles so far vanished that she only felt some weakness in the arm and fingers.

E.

Intermittent Fever.

We have seen that Thuja, in its perfect effects, develops a fever characterized by the predominance of the cold stage, to which sweat immediately succeeds (*Febris algida imperfecta*), coming on mostly in the evening, seldom in the morning, commonly without thirst, seldom attended with severe thirst, and manifesting a quotidian or tertian type.

Dr. Herrmann states in his treatise on the homœopathic treatment of intermittents (*Annal. der hom. Klin.* B. 2, S. 398) that in the year 1830, when, by the command of the Emperor Nicholas, he made some homœopathic experiments in a division

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of the Garde-Central Hospital at Tulzyn in Podolia, the intermittents (which are very prevalent there, as an endemic, and commonly exhibit a very capricious character) during one season of hot and dry weather assumed a very similar type. Thus, the attacks began with cold shiverings, with external and internal chill, in some cases with thirst, were immediately followed, without the intervention of a hot stage, by general perspiration.

In intermittents thus constituted, Thuja (the dose is not stated) effected a rapid cure; but somewhat later, after rain had set in, this remedy proved no longer serviceable.

These are the only cases which we have in relation to the employment of Thuja in intermittent fevers, and, judging from the physiological provings, it can but seldom be a specific in that disease.

Besides the cases already enumerated, Thuja promises to be useful in the following affections:

1. In left-sided hemicrania of the fifth pair, especially of the frontal branch, and in cerebral nervous affections, with the sensation as though a nail were driven in, or a convex button pressed upon a particular spot on the head (*clavus hystericus*).

2. In stiffness of the neck, with the feeling as though the muscles were too short, especially if there be present any other symptoms which point to Thuja.

3. In *Varicellæ acuminatæ*, *verrucosæ*, during the period of suppuration.

4. In muscular twitchings of a rheumatic origin, especially in the limbs, which come on suddenly when at rest, and cease on motion.

5. In amblyopia with mists and flakes before the eyes, when it is attended by symptoms which indicate Thuja.*

Those physicians who, with Lobethal and others, consider condylomata as constantly and without exception a result of secondary syphilis, and do not allow that they ever appear independently, must, consequently, consider Thuja as one of the remedies for syphilis.

It cannot indeed be denied that the symptoms which Thuja develops in the sexual, glandular, and cutaneous systems present similarities to the phenomena of secondary syphilis; but this drug has not produced in a single prover ulcerative sick-

* May not Thuja be also specially indicated in chronic catarrh, in ozæna after precipitate cures of gonorrhœa and condylomata, and in obstinate bronchial catarrhs?—Ed. Oest. Zeit.

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ness, and peculiar sores, as mercury excites them. We cannot, then, attribute to Thuja any special therapeutic power in primary syphilis, and homœopathic literature has as yet no cases to show of chancre cured by its means.

F.

Cures in case of Animals.

Homœopathy proves itself as true, not only in the cure of men, but also in that of animals; and she receives great commendation both from cattle doctors and cattle owners, for the three virtues of *simplicity*, *effectiveness*, and *cheapness*.

Physiological provings of Thuja on animals, are as yet wholly wanting; still this admirable remedy, from its property of exciting warts and cutaneous excrescences, has been used in analogous diseases in veterinary medicine.

1. *Horses.*

The tincture of the *arbor vitæ* has been used by veterinary physicians with the best results in grease, which is related to sycosis in this, that if the disease be neglected, warty excrescences form in the fetlock, which bleed easily, and, like condylomata, secrete an offensive fluid (*Dr Elwert, Hygea, B.* 19. S. 415).

Thuja has also testified its power in the cure of warts in horses, which arise in various spots, especially in the neighborhood of the ears, eyes, and nose; if these excrescences exhibit a rough, split, cauliflower-like surface, and, like condylomata, bleed easily, are moist and suppurating.

Oberamtmann Kleeman cured a horse, within three weeks, of warts, which he had had for several years on the head and chaps, with a few doses of Thuja 2 and 15 (*Archiv für Hom. Heilk.* B. 14, H. 2, S. 108).

2. *Cattle.*

Warty excrescences often appear in great numbers, and of various sizes, upon the udders of cows.

Thuja has been exhibited in cases of these warts with success, when it was indicated by their character.

According to Dr. Schindler, Thuja perfectly cured five very similar cases of warts in cows, whose udders were entirely covered with the excrescences (*Archiv für Hom. Heilk.* B. 14, H. 2, S. 108).

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3. *Dogs.*

Dogs are not unfrequently affected with mulberry-like, moist, easily bleeding warts, which sometimes cover the whole naked inner surface of the ears, in the form of a cauliflower, or arise in the cavity of the mouth, and greatly resemble condylomata.

Dr. Wachtel observed the following case: a little, two months' old, male pup (wolf-dog) got, without any known cause, near the anterior border of the tongue, a fleshy excrescence of the size and shape of a hemp-seed, which, in eight weeks increased to the size and form of a mulberry. On the inner surface of the mouth also, fleshy cauliflower-like excrescences were visible, thickly sowed on both sides. He was sprightly, and well, but took food and drink with difficulty.

From the striking similarity of these excrescences to condylomata, Wachtel attempted to cure them with Thuja, and caused the whole of the warts to be painted twice a day with the tincture.

During the first eight days no change could be perceived in the excrescences, except that they grew no more. On the twelfth day, little cracks showed themselves on their surfaces, which occasionally bled. From the sixteenth day on, small pieces separated by degrees, dried, and fell off. At the end of four weeks, his mouth was clean and every trace of an excrescence was gone.

CHAPTER VII.

Essay toward a theory of the operation of Thuja.

Dr. Huber is the only one of the provers of Thuja who has communicated his views on this subject. They are ***verbatim*** as follows.

"The head, muscles of the nape, and the genitals were the points upon which the force of Thuja was especially expended in me. It seems equally to affect the systemic solids and fluids. It seems to create in the blood a peculiar condition whereby it, through increased innervation, acquires the disposition to excite the vitality of the reticular tissue (especially the subcutaneous and intermuscular) in the form of increased warmth, congestion, and swelling (*inflammatio*), and to form there, products which appear in the provings partly as excrescences (tubercles) and partly as suppurating exsudations. Among the solids, it is the sensitive portion of the nervous system,

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the activity of which is increased by Thuja. The *plexus cæliacus and hypogastricus* of the ganglionic system receive the first impression, which by means of the sympathetic is reflected on one hand, upon the *trigeminus*, and on the other, upon the sensitive nerves of the spinal marrow, especially upon those of the neck and sexual organs (*nervus pudendus communis*). But since these nerves are for the most part distributed to and ramify in the subcutaneous and intermuscular reticular tissue, their increased activity can only be considered as heightening the vitality of that portion of the organism. The sanguineous condition produced by Thuja seems to bear the same proportion to the increased nervous influence as the disposition does to the noxious cause (*causa occasionalis*). If then Thuja possesses the power not only of changing the blood but also of increasing the vitality of the nervous and reticular systems, why should it not be endowed with the faculty of curing excrescences of various kinds, such as warts, condylomata, and other spurious growths* which are plainly founded upon conditions such as those we have stated. The fundamental operation of Thuja therefore *appears to depend upon a peculiar condition of the blood, and on an excitement of the vitality of the sensitive, nervous, and reticular systems.*"

We may be allowed to remark that a theory, founded upon the results of a single proving must necessarily be one-sided. It is only by means of an association of provers that the whole sphere of operation of a remedy, in all its breadth and depth, can be developed, and the theory of the operation of drugs must stand upon a statistical foundation. The single prover develops only isolated portions of the full operative sphere of the remedy.

The effects upon the sanguineous and nervous systems together, are exhibited by every drug in common with Thuja, and you may have as many "conditions of the blood" as you have drugs; for every intoxication passes into the blood.

Our own view of the matter is this, that *the general physiological effect of Thuja is irritation of, and increase of, vitality in the system of the tissues;* causing, in *fibro-serous* membranes, *wandering arthritic* pains; in *mucous* membranes (uro-genital apparatus and air passages. *Ed.*), increased and altered secretion, and upon the *external skin*, warty excrescences. The *trigeminus*, the *plexus cervicalis* and *pu-*

* Thuja cures warts, condylomata, and such spurious growths, for the simple reason that it actuallycreates *similar* excrescences.—MAYRHOFER.

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dendo-hæmorrhoidalis are especially attacked; hence the most important specific symptoms of Thuja are developed in those provinces and organs which are supplied by these nerves and their ramifications.

CHAPTER VIII.

Dose, Duration of Action, Allied Remedies, and Antidote.

Dose.

On this subject Hahnemann has recommended the 30th dilution as the highest dynamic potence, and the undiluted tincture as the lowest material dose, so that here we have the most refined dynamism and the grossest materialism standing in conjunction. The employment of the high potencies is declared to be sufficient in simple cases of recent origin, and that of the mother tincture to be necessary in severe ones of long standing (though only in external applications). In this extensive therapeutic scale we have, on the one hand, the proof that Hahnemann had departed from his decreed normal dose of the decillionth (of which fact many examples are to be found in the second edition of the *Materia Medica Pura*), and on the other, the information for those opponents of Homœopathy who in some incomprehensible manner, place its essence in the smallness of the doses instead of in the principle of similarity, that cures performed with the tincture of a specific remedy, are still homœopathically wrought.

We repeat here what we have heretofore said in relation to posology (*Hygea* B. 19, S. 215): "The relation between irritability, and the size of the dose, is different in different individuals, and in different diseases, and the sliding scale of doses must go parallel with this varying standard."

The individualization of the *quale* and *quantum* of a drug must be reciprocally regulated, and the practicing physician must be permitted the discretion of ascending or descending the therapeutic ladder, according to the exigency of the special case in hand.

For the practical man, the sole effective cure of disease lies neither in the seventh heaven of the high potencies,* nor in the

* Without wishing to dispute the possible efficaciousness of the so called high potencies, I wish merely to suggest the following doubts:

1. The high potencies appear to possess virtue, only when they are freshly prepared.

2. Their preservation must be watched over with the greatest cau-

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lowest hell of the mother tinctures, but the maxim, "*medium tenuere beati*," has its full value here also.

According to our own experience, the first dilution of Thuja, (10. 90.) corresponds to the larger part of patients and diseases; still there are subjects who manifest so much sensibility to the action of Thuja, that they tolerate only high and infrequent doses, while with torpid individuals and in neglected cases, the external and internal employment of the tincture is frequently necessary for a considerable length of time.

Duration of Action.

The course of Thuja sickness like that of all other drug diseases, is partly of an acute and partly of a chronic sort.

Many of the symptoms, especially those of the *primæ viæ*, which come on immediately after the dose, disappear again in a short time. The nervous affections and pains of Thuja extend over a longer period, on account of their frequently recurring at irregular intervals of hours, days, and weeks, and the objective products run a chronic course, sometimes of weeks and months, as the proving have shown. In this relation we must rank Thuja rather among the chronic remedies.

As to the repetition of the dose, we may here also rely upon the maxim that, regularly, in acute diseases stronger and more frequent doses are required, (repeated in from two to three hours,) and that in chronic cases, higher and less frequent doses will answer, (at intervals of one, two, or three days.) Torpid subjects bear strong and repeated doses while erethic constitutions need but little medication.

Allied Remedies.

The nearest neighbors of Thuja in reference to the urinary organs are, *Cannabis*, *Petroselinum*, *Copaiba-balsam*, *Cantharides*, *Pulsatilla*, and *Mercury*. *Hemp* is useful in acute gonorrhœas, with a thin, very copious discharge, and very painful urination. *Parsley* is only serviceable in slight cases, with constant urgency to urinate, and *Copaiba*, corresponds to blen-

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tion and fear of depotentizing (two very uncertain particulars both for doctor and patient).

3. The high potencies carry the materia medica into the metaphysical region of the world of shadows and of spirits, a most dangerous circumstance not only in reference to our opponents, who believe nothing without proof from physics, but also in reference to the science itself, which has a solid foundation.—MAYRHOFER.

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norrhœas, whose chronic course is attended by torpidity of the mucous membrane. *Cantharides* are indicated in cases of decided inflammation of the urinary organs and hæmaturia. *Pulsatilla* is indicated in gonorrhœas characterized by the passage of urine in drops, or by affections of the testicles. These remedies are effective and curative, especially in irritations of the urinary apparatus, arising from rheumatic, mechanical, and chemical causes. Our choice falls upon *Mercury*, when gonorrhœa is combined with chancre.

Farther removed we have *Acid. nit. Alum. Capsic. Cubebs. Nat. mur. Petrol. Sab. Sepia. Sulph.*, which are especially indicated in those gonorrhœas which have become chronic or complicated with dyscrasic and drug diseases, and must be selected according to the peculiarities of the accompanying symptoms.

In blennorrhœas, however, arising from contagion and accompanied by condylomata, *Thuja* is, and remains the master remedy, as *Mercury* is in urethral chancres. In sycotic conditions, *Sabina* and *Lycopodium*, come next to Thuja; Sabina frequently effects the cure of condylomata alone, often completes it after Thuja, and these two remedies seem even to take higher rank than Thuja, in cases of solitary, dry, whitish and pedunculated condylomata. For the employment of *Acid nit.*, which Hahnemann recommends in alternation with Thuja, in condylomata of long standing, two grounds may be stated: 1, its physiological relation to the urinary organs, and 2, its antidotal power to Mercury in gonorrhœas and condylomata, which have been treated and maltreated with Mercury in allœopathic doses. Nitric acid is also, according to our experience, a very valuable remedy in urethral strictures, which are manifested by spasmodic urination, and vesical blennorrhœa. In the common warts which appear upon the hand, the nearest allied remedies are *Rhus* and *Dulcamara*. Further removed, *Caust.* in those which are inflamed and painful, *Lycop.* in those which are pedunculated, and *Calc.* and *Sulph.* in those which are accompanied by chronic eruptions.

Antidote.

Hahnemann gives *Camph.* as the antidote to Thuja, which, with *Coffee*, stand, though not in antidotal yet in palliative relation to the most of the vegetable remedies.

We know of no cases of poisoning by Thuja, and none happened in the course of our provings, although some of the provers went great lengths, among whom Prof. Zlatarovich,

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stands distinguished as the boldest Thujaphagite. They would be mitigated by drinking warm milk or mild oil.

To isolated manifestations of the Thuja sickness, several remedies are antidotal. *Cham.* removes the nocturnal twitching toothache; *Cocc.* appears to be serviceable in the acute fever of Thuja,* and *Merc.* to alleviate the affections which appear at night.

The best antidote, however, is the administration of higher and less frequent doses of the remedy, when it has excited excessive effects in constitutions susceptible to the action of the drug.

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* See Zlatarovich's proving of Thuja upon an adult female.

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APPENDIX.

Are Gonorrhœa and Chancre results of the same disease?

Since the discovery of syphilis, more than three hundred years ago, two thousand works have been written by physicians on these sin-born scourges of the human race, and it might be thought that in this superabundant wealth of the literature of syphilis all important questions in relation to the subject treated of, would have been exhausted. But it is not so. Not only is the veil which covers the origin of the disease still unremoved, but the very weighty question whether gonorrhœa and chancre are identical or different morbid processes, is as yet unsettled.

A few physicians and authors, as *Bell*, *Autenrieth*, *Ritter*, *Haase*, and others, distinguished gonorrhœa from chancre as independent forms of disease, which were, however, capable of existing together; but the greater number of the Æsculapian priesthood consider them as only two varieties of the same disorder, syphilis. This floating controversy was blown anew into a flame by Hahnemann's categorical assertion, that syphilis and sycosis are two entirely different miasmatic diseases, and that spirit of contradiction which leads the old school, in order to affirm its own existence, to deny every thing that Hahnemann has said, fell also with grim violence upon this tenet of the therapeutic reformer.

The old school, as the universally generalizing system, holds to the view that the blennorrhagic process of gonorrhœa and the ulcerative process of chancre are only modifications of one and the same fundamental disease, syphilis; while the new school, as the individualizing method, cannot agree to the identification of the two maladies.

The advocates of the identity theory found their belief upon the following grounds:

1. Gonorrhœa and chancre are communicated by means of a fixed contagium.

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2. They both frequently appear in the same subject and at the same time.

3. According to Hunter and Harrison's experiments in inoculation, the gonorrhœal discharge excites chancre, and chancrous pus produces gonorrhœa.

4. Gonorrhœa and chancre differ only because of the different organization of the tissue attacked. If the contagion falls upon the mucous membrane of the urethra, *blennorhœa, virulenta* (*synhilitica*) appears, but if it fall upon the sexual parts, it is succeeded by *ulceratio syphilitica.*

5. Gonorrhœa is the milder, chancre the more virulent form of syphilis.

6. Constitutional symptoms may follow simple gonorrhœa as well as chancre.

7. Among several persons who have received the contagion from one and the same individual, some will have gonorrhœa, and some chancre.

The defenders of the essential distinction between gonorrhœa and chancre rely upon historic, nosographic, and therapeutic grounds.

1. On the first appearance of syphilis in Italy, in 1494, contagious gonorrhœa (*blennorrhœa virulenta*) was still entirely unknown. The writers on syphilis during the first decennia do not describe the urethral discharge; even Vigo, who had spent ten years on his work upon syphilis, was not then acquainted with gonorrhœa. *Blennorrhœa urethræ virulenta* was first observed and described by the physician *Antonius Musa Brassavolus*, thirty-nine years after the eruption of chancre, and his pupil *Gabriel Fallopius* affirms, in his work (*De morbo Gal Patavii*, 1563), that the urethral discharge was a more recent disease than syphilis, and had been entirely unknown before it was observed and described by his master.

2. Hahnemann states (Chron. Krank. 2 Auf. B. 1, S. 104) that sycosis, under which appellation he includes not only condylomata with and without gonorrhœa, but also the contagious, virulent urethral discharge without the so-called excrescences, has only raged from time to time, and was extensively disseminated as an epidemic, especially during the French war from 1809 to 1814; since which, however, it has continued to manifest itself less and less frequently.

3. Hunter and Harrison's trivial experiments have not only not been confirmed on a more careful repetition, but have been wholly refuted by the numerous and standard experiments of Ricord in inoculating with pus from gonorrhœa and from chancre. No chancre pustule is excited by inoculation with

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gonorrhœal pus neither on the external skin nor on the mucous membrane; while chancre causes chancre both upon the external skin and mucous membrane. Inoculation was so performed upon a patient who had both gonorrhœal and primary chancre, that one thigh received the gonorrhœal virus and the other the chancrous; the last only developed a chancre pustule, the other did not. (*See Ricord.*)

4. If chancrous matter could develop gonorrhœa, and gonorrhœal virus, chancre, gonorrhœa and chancre should almost always appear together, for in *blennorrhœa virulenta* the glans and prepuce (the common situations of chancre in man) must necessarily be fouled with the discharge, and in the same manner the pus from a chancre must inevitably be brought in contact with the mucous membrane, especially in women. Besides, from pretended observations that gonorrhœa has caused chancre by infection, and chancre in another subject gonorrhœa, we cannot exclude the possibility of deception: because urethral chancre may be easily mistaken for gonorrhœa, and give rise to false observations, while in fact the chancre has only given rise to its like.

5. Chancre and gonorrhœa depend upon pathological conditions which are altogether diverse. Chancre is an ulcerative process, healing with loss of substance; gonorrhœa is a blennorrhagic process, healing without destruction or loss of organic matter.

6. Both the acute and chronic sequelæ of gonorrhœa and chancre are different—The suppression of acute gonorrhœa excites again acute forms; as, *Epididymitis*, *Cystitis gonorrhoica*, *Ophthalmia blennorrhoica*, and, according to Ritter, *Synocha cum Deliriis furibundis*. But on the premature destruction of the primary chancre the symptoms of secondary syphilis make their appearance.

7. Syphilis affects exclusively the human race, while sycosis under various forms appears likewise in animals.

8. The most effectual though not sole specific against chancre is mercury, while in gonorrhœa it is far surpassed in efficiency by other remedies, which fact does not agree with Hufeland's view (*Enchiridion Aufl.* 5. S. 495), who lays it down that the gonorrhœal and chancrous virus are products of the one syphilitic contagion, but that the blennorrhagic infection is the milder of the two; for we cannot understand how a remedy, which is powerful enough to subdue the more deadly virus, should be too weak for the milder form of the same poison. That distinguished authority upon syphilis, Louvrier, states as follows, in his monograph on that disease (page 51),

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"Mercurial remedies, in whatever form they may be administered, are useless and injurious in simple gonorrhœa; useless, because gonorrhœa is (general) no venereal disease and experience has shown that that disease, when combined with gonorrhœa, has been cured with mercury, but that the gonorrhœa still continued after the cure; injurious, because by the administration of mercury increased disease of the affected parts, in the form of renewed inflammation and interruption of the gonorrhœal discharge, is not unfrequently produced."

"As to condylomata, which have appeared after gonorrhœa, the patient may be salivated into marasmus, and there they will remain unchanged; but should they have succeeded to chancre, they readily vanish under the ordinary mercurial treatment. This is a truth, of which every physician, experienced in the treatment of this disease, is well aware, and which I have a hundred times found confirmed in my practice. We should therefore minutely inquire whether gonorrhœa or chancre has been the predecessor of the condylomata."*

9. The chronic sequelæ of gonorrhœa are essentially different from the symptoms of secondary syphilis.

Ritter describes them under the name of lingering gonorrhœa, and divides it into three degrees or stages.

First Stage.

This is characterized by itching on the hairy portions of the genitals, which, by degrees, becomes intolerable, is most violent in the evening and night, is increased by warmth and covering, and irresistibly compels the patient to scratch. As the itching diminishes, an itching and sticking comes on in isolated circumscribed spots on the genitals, and after scratching numerous moist points appear about the roots of the hair, which change in from twelve to twenty-four hours into dark brown or black scabs and easily fall off. This scene is re-enacted almost every day. Similar points even appear on the border of the navel with itching, later they make their appearance also on the perinæum and on the thighs, in the neighborhood of the sexual organs. In the female sex, the pain of the tormenting itching is greater and the discharge of lymph more considerable. The hairs themselves are not painful either

* This categorical opinion of Louvrier leaves no room for doubt but that two different diseases may lie at the foundation of condylomata.—MAYRHOFER.

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upon the head or upon the genitals, and the alopecia peculiar to chancre never follows.

At the same time or later pear-shaped warts appear on the female patients, which occasionally itch, and when excised immediately return. Men most commonly do not exhibit these warts; but yellowish-white shining grains of the size of fine barley appear upon the scrotum, which do not itch, but disappear again unnoticed.

After some weeks or months an elastic tubercle appears upon the inner side of the inner lip exactly over the labial artery, under which the artery pulsates briskly every evening. Sometimes a spot appears on the under lip which looks inflamed, burns somewhat, and shows the bluish white epithelium in some cracks; this scales off in three or four days, and is immediately replaced by another. This symptom is frequently repeated at intervals of weeks or months, always in the same way. The urethra, so far as the eye can reach, is affected with whitish spots, which are but little painful, have here and there a depression, feel somewhat callous, and show the mucous membrane still unaffected. Similar spots appear in the female sex in various parts of the internal sexual organs.

Second Stage.

After a certain time, pressing in one or more of the articular extremities of different bones comes on in the evening, until the patient goes to sleep, which may be absent again for days, weeks, and months. The bones most frequently attacked are the sternal extremities of the clavicles, the end of the radius, the ribs, and the tibia. The periosteum is inflamed, and the painful spots are swollen; but the pains never appear in the middle of the hollow bones. Copious, deep-seated, hardish tubercles are perceptible to the touch on the inner surface of the lips and cheeks, and afterward in the soft palate. A particularly painful spot appears from time to time in the concha of one of the ears, or a slight inflammation is developed in the external ear. Permanent little erosions of a whitish blue tint form upon the lips or cheeks, sometimes on the tongue and palate, and the epidermis repeatedly scales off from various spots on the scalp. Cracks and fissures (*Rhagades*) arise in the soles of the feet, oftener in the palms of the hands, which are for the most part dry, less frequently moist, and a transverse crack of an inch in length frequently forms in the neck opposite the atlantic articulation, which discharges, and commonly closes spontaneously. Isolated, dark red, inflammatory

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spots, of the size of a pea, hard to the touch, come to light upon the breast, back, shoulders, arms, and thighs, and occasionally in the conchæ; they suppurate at the point, and leave behind elevated dark-red nodosities upon the skin which only disappear after months. Small reddish-brown spots appear likewise upon the elbow-joint, remain a few days, then suddenly disappear, and frequently return in the course of the disease. During this time the spots already alluded to in the urethra become gradually larger, their callosity increases, the depressions enlarge by the circumference, and erosions appear, which however result in very slight loss of substance. In fact, pus or offensive fluid is not secreted from these points; they are most frequently dry, or covered with a moisture which rather resembles healthy mucus than a morbid secretion.

These superficial erosions have been improperly called primary gonorrhœal ulcers. Sensibility is rather diminished than increased in these affected spots; urination is neither difficult nor painful; only toward evening or after coitus a very unpleasant pressing manifests itself in the urethra. At the same time or later than these mostly chronic erosions in the urethra, similar, entirely painless erosions are observed upon the lips and cheeks, seldom in the nostrils, the color of which borders rather upon blue than white. These may last a long while without sensibly increasing in size, and they never corrode deeply with any material loss of substance.

A periodical itching of the scalp, obliging the patient to scratch, is also often perceived, and a thick moisture exudes and forms little crusts, which after a few days fall off. The herpetic eruptions which are added, though not always, to the already described symptoms, are more considerable and more troublesome; they may appear on various parts of the body, but principally affect the dorsa of the hands. This herpes surpasses all the other symptoms of this disease in obstinacy, and in spite of every remedy has been observed in a patient for thirty years. It is almost always dry, seldom causes violent itching, frequently removes the epidermis and never forms scales.

The general health is still but little affected, all the vital functions are normally performed, and the glandular system is not perceptibly sympathetically affected.

The chronic gonorrhœa now under consideration never appears without erosions in the urethra, and the urethral callosities, strictures, caruncles and fistulas, which frequently arise as sequelæ of chronic, neglected or maltreated gonorrhœa, only so far belong to the lingering gonorrhœa as they are ac-

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companied by its other symptoms. The eyes and lungs are occasionally affected in the subsequent course of the disease. The symptoms of the eyes are commonly like those of a chronic rheumatic ophthalmia, and the affection of the lungs resembles a neglected catarrh. Sometimes the knee swells and becomes stiff and painful.* All these symptoms may continue for years, and creep on with a scarcely observable progress for the worse until the disease in a few cases reaches its highest development.

Third Stage.

This is distinguished by the formation of spurious products, preceded in the commencement by pains which indicate a mechanical compression in the abdomen. These spurious growths are tallowy concretions, whitish or yellowish in color, sometimes of a harder, sometimes of a softer jelly-like consistence, are enveloped in membranes, and when they lie superficially, sometimes pass into suppuration. They are sometimes situated externally on the neck or chest, sometimes internally, where they may appear in any of the intestines, e. g., in the omentum and mesentery, in the liver and pancreas, in the lungs and kidneys, &c., and in the female sex frequently in the ovaries. Occasionally only isolated or a few large growths are found in the abdomen or in the neighborhood of the clavicles.

The grouped parasites which are frequently arranged like a rosary, are from the size of a pea, to that of an egg, when they resemble a potato tubercle. The solitary ones may attain an enormous size. In the female sex, a round elastic swelling sometimes appears in the uteriner egion, which finally bursts (by a violent commotion) and discharges its purulent contents through the vagina, but fills again by degrees, and again, at the proper time, discharges.† The menstrual function is irregularly performed, and a mild, moderate leucorrhœa appears from time to time.

With the appearance of the tallowy concretions (Steatomata), the patient becomes ill-humored and indifferent to every thing which had formerly given him pleasure; he seeks solitude; his face assumes a hectic appearance; his sleep departs,

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* This elastic swelling of the knee is called by the English "*white swelling.*" Many physicians consider this articular rheumatism as a consequence of the administration of balsam of copaiba for gonorrhœa, but Cumano (*Syphilid.* B. 5, S. 461) considers it as a metastasis entirely analogous to a gonorrhœal ophthalmia.—MAYRHOFER.

† I have known a similar case myself.—MAYRHOFER.

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and lingering fever, dreadful prostration, and death, close the scene. Less frequently the disease simulates the form of an *angina pectoris*. The patient at first feels oppression of the chest, then attacks of pain when walking, and cramps in the chest at midnight, which end with syncope. All the functions fall into disorder, and he dies in one of the nocturnal asthmatic attacks, and the autopsy shows the spurious growth already described.

Such are the essential characteristic marks attributed by Ritter to the chronic gonorrhœa, which he made the object of his especial researches for five and thirty years. They led him to the painful conclusion that this disease, considered identical with syphilis, was incurable, and that its course, though long and lingering, was not to be stayed.* (See Ritter's exposition of the apparent similarity, and essential difference, between chancre and gonorrhœa, Leipz. 1819.)

We annex to this lengthened description of Ritter's, the short and comprehensive account of Hahnemann.

Sycosis, which lately, especially during the French war, from 1809 to 1814, was widely spread, but has since showed itself continually on the decrease, was almost always fruitlessly and injuriously treated, by the internal use of mercury (because it was thought to be identical with the venereal chancre); the excrescences on the genital parts, on the contrary, which commonly, though not always, appear several days, or perhaps some and even many weeks, after contagion received by coitus, under a discharge of a sort of gonorrhœa from the urethra, seldom dry and warty, more frequently soft, fungous, and distilling a peculiar, sweetish moisture almost as offensive as herring pickle, bleeding easily, having the shape of a cocks-comb or cauliflower, in man upon the glans, or on or under the prepuce, but in woman occupying the neighborhood of the

* We give this descriptive portrait of gonorrhœa, with the remark that the copious symptoms are brought together from the observation of many different cases, and that in individual patients only individual parts of the description will be applicable—according to the proverb, "*non omnia adsunt in omnibus.*" Single cases of the form of disease here described with such accuracy, have undoubtedly occurred to every practitioner, and we recommend to the further examination and impartial investigation of our colleagues, this, in our opinion, most important matter. We ourselves, in fault of sufficiently extensive experience, can form no decided opinion whether the chronic disease, described by Ritter, is the natural and necessary consequence of an uncured gonorrhœa, or a variety of blennorrhœa, caused by a vitiated state of the blood, or, still further, a combination of sycosis and hydrargyrosis, consequent upon mercurial treatment.—MAYRHOFER.

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pudenda, and even the pudenda themselves in great number, have been, until now, destroyed by allœopathic physicians, by the most violent external treatment, by cauterizing, burning, excising, or the ligature. The natural consequence of this was, that they generally returned, or if they suffered themselves to be thus annihilated, the sycotic affection being deprived of the vicarious local symptom of the internal evil, now appeared after another and worse manner, in secondary affections. Thus, neither by the external destruction of the excrescences, nor by the internal use of a remedy not indicated, mercury, was the miasm in the least diminished in its control over the whole organism. Besides the undermining of the general health by means of the noxious use of mercury, generally administered in the largest doses, and in the most virulent preparations, similar excrescences break out on other parts of the body, either whitish fungous, sensitive, flat elevations in the cavity of the mouth, on the tongue, palate, and lips, or large, elevated, brown, dry tubercles in the axillæ, external neck, scalp, etc.,—or, otherwise, other bodily sufferings come on, of which I will only mention, the contraction of the flexor tendons, especially of the fingers. (*Chron. Krank.* 2 *Aufl.* Bk. I. S. 104, 105.)

We add now, to complete the triad, Autenreith's communication on scrofulous gonorrhœa (*Tubingen Blätter* B. I. H. 2, S. 187, *et seq.*), which confirms Ritter's observations on the spurious growths standing in causal connection with gonorrhœa.

Autenrieth describes with accuracy the spurious organizations referred to, without its having been possible for him to have known of Ritter's experience, and his remarks upon the sequelæ of gonorrhœa agree with Ritter's description.

"Gonorrhœa has the peculiar property of producing only *one* local disease at a time; if this cease, immediately another local affection appears in another place. In men, sarcocele often appears, in women, degeneration of the ovaries. Gonorrhœa is nearer allied to lepra than to syphilis. The peculiar superficial ulcers of gonorrhœa, with a cancerous appearance, secrete only a watery fluid; and the gonorrhœal poison is in itself incurable, and can only be excreted by nature as long as it is a local disease.*

We have thus extracted and brought together the points of

* Compare, on this subject, the ideas of *Eisenmann*, *Schönlein*, *Timon* and *Jahn* in the *Versuch. fürdie prakt. Heilk.* (*Eisen.* 1835, S. 84–107.) "*Bemerkungen über die Tripperseuche*" of the latter—*Ed. Œst. Zeit.*

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agreement and difference between gonorrhœa and chancre from competent authorities, without expressing a decided opinion upon the question ourselves, in consequence of a deficiency in our private experience. As things stand at present, however, we, by no means, hold the controversy as ripe for judgment, but are convinced that this weighty question will only then receive its scientific solution, to the relief of suffering humanity, through the individualizing therapeutics of Homœopathy, in connection with the revelations of pathological anatomy, when opportunity shall be afforded to emancipated Homœopathy to make decisive investigations on the subject by the aid of syphilitic cliniques.

In reference to the treatment of gonorrhœa, we can neither admit the absolute incurableness of the malady with Autenrieth and Ritter (allœopathically), nor its absolute curability with Hahnemann (homœopathically).

In choosing a specific remedy, two considerations must be borne in mind; 1, the most accurate estimation of the entire symptoms of the disease; 2, the minutest examination of the history of the disease in reference to the origin of the affection, its previous treatment, and the at present existing dyscrasic complications.

Thuja is the chief remedy in sycotic cases, in alternation with nitric acid, where mercurial treatment has been resorted to. Obstinate tetters indicate *Nat. mur.* and *Lycop;* if itch have preceded, *Sulph.* and *Hepar.;* disgust of life points to *Aur.;* scrotal herpes to *Rhus.* and *Arsen.* A radical cure, in fine, is only to be obtained from a so-called antipsoric treatment, conducted with the closest individualization of the malady of the patient and of the remedies prescribed.

REMARKS ON THE TREATMENT OF CUTANEOUS DISEASES, PARTICULARLY THE ITCH, BY EXTERNAL APPLICATIONS, SUGGESTED BY THEORY AND EXPERIENCE TO

FRANZ PUFFER, M. D.

(Concluded from No. IX.)

Let us now turn to our task. It has been shown that when living acari are applied to the skin of men apparently in health, after a few days the itch has in several cases broken out. Similar experiments are related by Dr. Köhler. (*Berl.*

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Cent. Zeit. 1836, *No.* 9), and Albin Gras (*Journal des Conn. Med.* Dec. 1836). Pariset placed acari upon the skin of two insane girls, and the itch appeared upon one of them. A similar result was obtained by Hebra, in his experiments instituted upon himself and others in the General Imperial Hospital. On the other hand, the attempts to communicate the itch by inoculation with fresh lymph or serum from the vesicles, have proved ineffectual, according to the experiments of Autenrieth (1810), Monrouval (1820), Lugol and his pupils, Rayer and Hebra.

Further, according to the numerous experiments of Rayer, Vezin and Hebra, the eruption on the skin disappears of itself by degrees, and loses its contagious properties on the destruction of the animalcule, which, as we shall soon see, is accomplished in a couple of days by means of frictions.

That a physiological experiment may be of service to the cause of science, its bearing must not be extended beyond its own sharply defined boundaries. Thus it is evident from the experiments just referred to, that in the itch a *seminium vivum* of an animal character is indicated, whereby it may be communicated to other individuals; that the *fresh* serum of the itch vesicle is not the agent of the contagion, and that the acarus must be regarded not only as the essential vehicle of the infection to others, but also of the continuance of the disease in the same individual, since it is only on the destruction of the insect that the cutaneous psoric eruption disappears. But it does not appear from the foregoing experiments that the itch can be communicated in no other way than simply and solely by the acarus. Dr. Krammer of Aschersleben, is of opinion that ninety per cent. of the cases of itch arise from want of cleanliness, and ten per cent. from contagion. He endeavors to prove this by his course of treatment, which is founded upon this view. It consists in washing and scrubbing the psoric patients with soap. (*Allg. Zeit. für Milit.* 1844, *No.* 23.) So Wichmann thinks that the itch cannot easily arise in the absence of uncleanliness. The fixed contagions of other diseases, as of syphilis, the plague, &c., are propagated neither as living organisms of inferior animals, nor in the ordinary way by inoculation. The experiments in inoculation with the fresh lymph from psoric vesicles do not prove that the *dried lymph* may not possibly communicate the disease *after a longer contact.* Isolated experiments instituted by Dr. Schubert, with vaccine from patients with the itch, establish the correctness of this position; for he has often in this way succeeded

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in producing the itch by inoculation, after a lapse of half a year.* (*Berliner Medic. Central-Zeitung*, 1837, S. 42.

The circumstance, too, that the itch is frequently propagated by old bits of clothing, long since laid by, and by bed linen soiled by patients with the itch (in which way travelling workmen are frequently infected), seems to favor this theory of its communication; it is otherwise exceedingly mysterious, how the insect and its brood could support life so long, as, according to the experiments of Lewis, they only lived two days after their removal from the body, according to Raspail only six days, and according to Heyland, at farthest only three weeks. Vezin's assertion that the insects, after being reduced by long fasting to mere wrinkled sacks, revive on being brought into contact with the human skin, is refuted by these observations. The Englishman, *Monfet*, two hundred years ago, was well acquainted with the short duration of the life of the acarus, when removed from the skin. He says; *syrones, humore aqueo in pustula absumpto vel exsiccato brevi omnes interiunt. Neque syrones iste sunt de pediculorm genere, nam illi extra cutem vivunt, hi vero non.* (*Wichmann, Aetiologie der Kratze, Han.* 1791, 2 *Ausg. S.* 8.)

The question of the origin of the acarus, and whence came the first one, has hitherto occupied the attention of the sup-

* Vezin and Hebra, both dispute the accuracy of this observation. Schubert's experiments are still unrepeated, and for this sort of a priori skepticism, it would be easy to deny all the injurious results of suppressed itch. That, however, is more convenient than scientific. Schubert relates a metastasis of itch, caused by the use of tobacco washes, which announced itself within a couple of days by asthma, vertigo, loss of appetite, nausea, trembling, &c. This case too, encounters Vezin's criticism. (See his treatment of the itch on the modified English plan.) "What reply shall I receive," says he "if I pronounce this a case of tobacco poisoning?" We are not much at a loss for an answer. A glance at the primary symptoms of tobacco leaves us in no doubt, that with the exception of one or two symptoms, there is throughout no characteristic of a tobacco poisoning. But we have often seen the same symptoms in other cases of itch suddenly suppressed where, not tobacco, but lead, chalk, zinc, or even sulphur rubbed in with grease, had been employed. But if we were to consider the endermically exhibited tobacco, as not entirely inactive in the group of symptoms, still the rectitude of the view just developed is confirmed by the therapeutic operation of a solution of tartar emetic with which the whole body of the patient was immediately washed. He rapidily recovered when the pustular eruption caused by the antimony, had extended over the cutaneous surface. Tartar emetic, as far as I know, has never been considered as an antidote to tobacco; but the eruption caused by it is not altogether unlike that of scabies.

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porters of the animalcule theory but little. Murray (*De vermibus in lepra obviis*) endeavors to explain the appearance of the insect, by the supposition that a certain deterioration of the juices always precedes the eruption of the itch, which, when it reaches a certain height, invites cheese or meal mites to make their nests in the skin, just as flies instinctively seek stinking meat for theirs. Linnæus asserts that he had hitherto discovered no other difference between the insect of meal, of the itch, and of phtisis, than the place of their abode. Hebra leaves the whole subject to the naturalists. According to him the transportation of the animalcule, from one spot to another in the same individual, and from one individual to another, takes place by the scratching open of the burrows of the insect, whereby it is taken up by the finger-nails and carried to other points, where it forms new burrows. An extremely ingenious but entirely hypothetical idea, which no positive observation has as yet confirmed. Neither does it explain why the finger-nails, circulating over the whole itching surface of the body, should, nevertheless, only deposit their animated cargo, between the fingers and the joints of the fore-arm; for it is almost exclusively in these localities that the insects have as yet been discovered.

Aubé occupied himself likewise with the problem, how does the itch animalcule excite the itch? From the fact that nurses, and physicians in attendance upon the itch, are seldom infected with it, and that on inquiring of patients how they contracted the disease, ninety-five in a hundred attribute it to having slept with some one who had it, he concluded that the acarus was a nocturnal animal, concealing itself under the epidermis in the daytime, but travelling about by night, and piercing the skin in various spots. This theory explained very satisfactorily to him the infrequency of contagion by day,* the small number of burrows remarked in the skin although the vesicles may be very numerous, and the violent itching which only (?) takes place in the evening; † an explanation, in our opinion, entirely inadmissible, even if Albin Gras's experiments did not absolutely forbid Aubé's conclusion that, the acarus is a noctambulant animal.‡

From this fact, and from the observation that in extensively

* I call to mind six cases in my isolated experience in the itch, where the contagion was most certainly communicated by day, and not by sleeping with an infected person, but by a very superficial contact. A priest contracted it by touching the hands of children in school.

† *Aubé, Considérations générals sur la gale et l'insecte qui la produit.*

‡ Transactions of the *Academie des sciences;* session of 1 Aug. 1830.

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diffused itch but few animalcules can be discovered, and further, that microscopic investigation displays but a single egg in the abdomen of the female insect, we cannot but conclude with Albin Gras that the acarus produces the itch, not by any mechanical irritation of the cutaneous surface, analogous to the effect of the louse, but through *a specific vital operation of a special virus. But all contagious matter (in the itch a contagium vivum) necessarily supposes a creative substratum, thus, the acarus the original itch affection.* The internal antecedent in organic propagation by means of *contagia* is here, as every where else, a *qualitus occulta*, which it will never be given the eye of mortality to perceive.

If now, in addition to this, we take into consideration that the power must be conceded to the human organism of throwing out from within upon the cutaneous surface, morbid products (such as phlyctenæ, vesicles, pustules, ecthymata), which, as Hebra himself remarks, have frequently led to an erroneous diagnosis in consequence of their deceptive similarity to the itch, but which must be taken as evidences of the presence of the acarus, as a disease plainly caused by the insect only in case its peculiar burrows are discovered; if we consider these things, still more probability is added to the opinion that the itch developing itself from the whole organism, produces also the specific animal as a vehicle of the contagious virus. The objection may here be raised that the acari are found most plentifully in recently developed itch; but analogy drawn from other diseases shows us how rapidly cause and effect follow each other, so that it becomes difficult to discriminate their respective periods. Singularly enough, not only the older dermatologists (Bonomo, Wichmann), but the more modern leaders in these researches (Galé, Vegin, Hebra), believe that the animal excites the eruption; while, no doubt, they would unanimously declare their reasonable suspicions of the soundness of his logic who should argue that cheese and meal were also the products of the animalcule. So also it might be maintained that the animalcule was proper to cheese—the animalcule which makes its appearance in that substance only after it has undergone a certain depravation, and in flour, not in a sound, but vitiated condition. It is only sickly plants that exhibit lice, and their rapid propagation on *branches of the same stock* symbolizes the whole secret of the spread of itch.

If, then, in our reflections upon the etiological peculiarities of the itch, we are guided by inductive reasoning, we shall find an internal and external circumstance analogous to the origin of all contagious maladies. The internal presents itself as

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that indwelling disposition in the great majority of mankind to suffer from various sorts of psoric eruptions.*—Under the influence of favorable external circumstances, of filth, improper nourishment, corroding grief, deprivation of pure air, &c., *an animalized product of disease appears, which, itself a product, becomes to other organisms a producer.* Thus the secretion of chancre, the result of a diseased condition, will reproduce itself. The same may be said of all the fixed and volatile contagia.

The itch is not, for that matter, the only malady in whose secretions and excretions parasites are formed. Thus, intestinal worms appear in the mucus of the digestive canal, the louse in *tinea favosa*,† abundant vermin in many cases of abdominal typhus (phthiriasis) with entanglement and agglutination of the hairs similar to that of *plica Polonica.* Thus, the *Filaria medinensis* appears in the subcutaneous veticular tissue ‡—*Most* found infusoria in the saliva, in fresh milk, in recent excrement; *Czermak* and *Berres* in semen.

If therefore we regard the origin of itch, in analogy with other diseases, as the product of two factors, the conflict of internal and external condition, much light is thrown upon many an otherwise mysterious phenomenon. It will thus appear, for example, why the experiments instituted by transplanting the vermin have never resulted satisfactorily. Thus Dr. Riecken, physician in ordinary to the king of Belgium,§ remarks that the endeavors of the French physicians to produce the itch by a transportation of the vermin constantly failed, and while several experiments of Albin Gras, Raspail, and Hayland had perfectly succeeded, those of Köhler yielded incomplete results. Hebra, also, in some cases placed the acarus upon the healthy skin of others without any result. According to the principle laid down, this fact will find its unconstrained interpretation in this, that the animalcule can as little find a con-

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* Evan Hufeland speaks of a *Constitutio psorico-impetiginosa* which is favored by predominant venosity, and by dyscrasic conditions of an abdominal origin. (See his *Allg. Aetiol. der Hautkrank*, in his Journal, B 21. S. 4.)

† The higher degrees of *tinea capitis*, says Naumann (*Handbuch der Med. Klin.* 3 B. 2 *Abthiel.*, S. 17), are doubtless contagious. They have been noticed to be communicated by a common use of brushes, combs, caps, nay, even by the transfer of vermin from one head to another. Experimental inoculations did not succeed.

‡ *Rokitansky, Handb. der pathol. Anatomie*, B. 2, S. 9.

§ Sur la gale et son traitement d'après la methode Anglaise par le Docteur Herrmann Vezin. Lu à la société des sciences médicales et naturelles de Bruxelles dans la séance de 3 Dec. 1838.

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genial atmosphere or appropriate nourishment in a cutaneous apparatus unaffected by psora as the silk-worm in the leaves of a cabbage or a horse-chestnut.

We may likewise be convinced of the necessity of the presence of this latent disposition, to be attacked by psora, by the fact that frequently no disease is communicated, nothwithstanding the existence of the external essentials. Neumann relates three cases, in which the mother of a psoric infant, and an attendant for a year upon itch patients, remained free from infection though they took not the slightest precautions, and the same of a Jew, with a psoric family, who slept in the same bed with his wife, she being exceedingly troubled with the itch.*

Another fact, only to be satisfactorily explained by the necessary pre-existence in the living organism, of a rooted internal disposition to be attacked by the itch, is *the great variety and dissimilarity of psoric eruptions in different individuals, though all arising from the same source.* Thus in the family to which I have just referred, there were three daughters and their mother, affected with the itch; in one, sixteen years old, who was lame, the whole surface of the skin was covered with pustules and excoriations, in a profusion such as I have never seen in any other patient, either in my private practice or in the hospital; another, three years of age, suffering from scrofulous ulceration of the bones, was similarly affected, but in a much less degree, while the mother, otherwise healthy, was very slightly affected with violently itching papulæ, almost exclusively upon the fingers. In relation to the numerous variations, in extent and intensity, in which the itch is constantly presenting itself to our observation, my experience (not by any means isolated), leads me to believe that the tone of vitality and the latent disposition of the organism, are the two conditions which regulate the success, the direction, and the extent of this psoric process.

The continued existence of the acarus and its offspring, under the human skin, is therefore, as we believe we have shown, the result of a psora, at least somewhat developed, the tendency to which, as Hahnemann asserts, is inborn in the great majority of mankind.† Nor let us, on account of this disposition to psoric diseases, lament with Hebra that we have

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* Neumann's Specielle Pathol. und Therap. B. 2, S. 263.

† The ultimate internal cause of the itch-disposition has received various names from various physicians. Hahnemann chose for it, the appellation used by the Grecks and Romans, "(latent) psora."

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skins, but let us rather rejoice, that in our external covering we have, on the one hand, a defence against the dangerous forces and injurious influences of the external world, and on the other, *a port of discharge for such a multitude of evils.*

According to daily experience, then, the spread of the itch is accomplished by a living contagion; but, inasmuch as we can assign no scientific reason for this limitation, we do not feel disposed to deny that its increase and extension may be effected, in the same way as with other diseases.

It would be a matter of entire indifference to the interests of humanity, whether physicians were of the opinion that the itch arose from an insect, which had got under the skin of the unfortunate patient, no one knows whence, like flies in a room, or gnat-swarms in the air, or whether they thought that it was the production of the secret workshop of a disordered system, or of impure pieces, if it were not that the therapeutic maxims derived from these theories have so decided, and so noteworthy an influence on the general welfare of the coming generation. If Counsellor Dornblüth, at Planen, is of the opinion that the spread of the itch deserves more attention as a matter of medical police, than it has hitherto received, we might gently suggest, that the ways and means whereby its bounds shall be prescribed, are quite as worthy of consideration; for the adherent to the modern animalcule theory, considers "curing a man of the itch" to mean simply "ridding a healthy man of vermin." On this principle Vezin composed his treatise, containing the etiology of itch referred to, and the treatment built upon it, according to the modified English method, with the view, as he says, of removing the prejudices existing in the minds of many physicans, and of a great portion of the people,* against a rapid cure of the itch, and also the fear of the evil consequences supposed to follow such a cure.

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* Whether the Hanoverians entertain a horror of anointing the itch or not, we do not know. But with us, in Austria, there is almost no other lay treatment of it, than by salves (mostly containing zinc or lead), the recipes for which pass from hand to hand; by these it is quickly dispersed. So that (with us, at least) it would seem that the popular prejudice is against too protracted an internal treatment. Hebra (in his frequently cited treatise on the itch) asserts that no one has ever scared away an itch, with zinc or lead salves. But I know personally of four cases of genuine itch (all caught by contagion), in which the eruption disappeared in a few days, solely by using such salves, and without any other application. As I have seen rapid, remarkable, and in one case mortal conseqences, result from such a suppression of the itch, it appears to me that the method is exceedingly exceptionable; especially, as it contains no reference to the activity of the cuta-

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The question now presses upon every unprejudiced mind, how is it that the experience of physicians on this subject, should be so directly contradictory? Those who regard the insect as the sole pathogenetic cause of itch, in accordance with this view, direct their aim to the speedy destruction of the animal, without reference to the fundamental ground whereby the creature has been called into existence, nourished and increased, and in hundreds and thousands of cases, never see any injurious reflex upon the health of the patient take place. Others again, mostly the older physicians, who have either not noticed the acarus, or, notwithstanding its presence, have regarded the itch as a constitutional disorder, like other cutaneous lesions, but especially the advocates of the Homœopatic school, find, on the contrary, the injurious consequences so abundant that many of the latter maintain that an unrecognized itch, suppressed and not normally developed, lies at the basis of a large proportion of chronic diseases. Let us take the trouble to seek the solution of this difficulty, by some less pernicious means than Alibert's maxim* quoted by Hebra, and ask, Have the former, with their emancipation of the itch, *always* observed correctly? and have the latter *always* imagined their metastases of itch, after it had been suppressed?

Before replying to these questions, we must first beg the indulgent reader to accompany us, for a moment, into a still dim department of physiological researches—the period of incubation of disease. By this term, introduced into pathology from natural history, we understand the period which elapses between the onset of the morbid agents, and the development of the diseases, which they are competent to occasion. The expression has been especially applied to those maladies, which are usually attributed to the operation of particular causes, denominated animal poisons, contagions, miasmata. The first manifestations of their presence frequently become perceptible externally, within an absolutely determined period. According to numerous observers, the eruption of the itch takes place in children four or five days after the infectious contact. In adults this period is extended to from eight to fourteen days in summer, and from twelve to twenty in winter. In sanguineous temperaments it may be less, in bilious, more. In old age, and

neous surface, elevated by an increased temperature, upon which Vezin, in his treatise on the English plan, rightly lays so much stress, nor to a suitable preparation of it by cleansing-baths, washings, etc.

* Alibert says that men can never see, because they find it more convenient to imagine.—*Description des maladies de la peau*, Paris 1814, p. 252.

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in individuals afflicted with chronic diseases, several weeks and frequently even months, may pass between the contagion and the appearance of the eruption.* The syphilitic infection and its first symptom, gonorrhœa, primary chancre, manifest less accurately marked intervals.†

However deeply the nature of this organic process, or rather the mode in which the germ of this organic poison is preserved during this interval without affecting the integrity of the functions, may be hidden from our view; still, in reference to the period between the attack of a specific cause and the appearance of the first disturbances, there must be a certain relation of law, which as yet is known to us in very few disorders for want of this sort of observations. The majority of physicians will be of opinion that among the acute eruptions, the measles have the longest incubation period. In the plague it never seems to exceed fourteen days. In hydrophobia it behaves differently, for, according to incontestable observations, it may remain for months concealed in the body. Syphilis, however, must be considered as having the longest period of incubation, for secondary symptoms frequently manifest themselves after the lapse of one and even several years. In this fact we have unquestionable authority for the position, that the specific germ of disease may lie concealed for years in the living organism, without manifesting its existence by the slightest symptoms.

Thus, too, it conducts in the case of those metastatic diseases, which appear frequently after the expiration of a year from the time when an itch has been suddenly suppressed by external remedies. To these latter, belong not only popular remedies, but also the methods of suppression used in the hospitals of almost the whole of Europe. An itch driven in from the skin, will be looked for in vain upon the dissecting table; it is also rather a long journey from the hospital ward to the post-mortem room. It is hence easily conceivable, that pathological anatomy should be ignorant of itch-metastasis. Organic chemistry has discovered, as far as we know, nothing remarkable in the blood of patients affected with the itch or itch metastases. Whether, however, this sort of negative result ought to exclude the possibility of an altered condition of the blood, we may well doubt, when we find that mercury

* Encyclopædie der medicinischen Wissenschaften von Meissner und Schmidt. Art. *Krätze.*

† The latter appeared once in a case treated by the author, three months after its cause, while the common incubating period seems to lie betwwen three and five days.

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was never found in the blood, even when it appeared in a metallic form in the cavities of the body, on the skin, and in the bones. Upon this subject, we may ask with Autenreith, "Is it then demonstrated, that there is no other channel but the circulation, by means of which foreign matters may be distributed through the system?"

If we must, then, recognize *in the long period of incubation* of the morbid sequelæ of itch, the most weighty reason why many physicians were not restrained by such after evils from their rash attempts to cure this disease suddenly, there still remain many grounds of excuse for their apparently not too conscientious inquiry about the antecedents of the consequent disease.

1. It is erroneous, to make a formerly suppressed itch responsible for all diseases appearing as they are wont to do, and which may be accounted for, either by an inherited predisposition or a more or less accidental specific cause. We see every day the *vis medicatrix* sufficiently powerful to restore the organism, after considerable injuries mechanical or dynamic. The spontaneous improvement of the condition of the blood, cannot be denied to the striving of nature to maintain herself in health. As examples among many, look at the impoverishment of the blood by artificial evacuations, and at the spontaneous cure of chlorosis. Nay, it might be maintained, that nature accommodates herself with great toleration to the changing medical doctrines, in such a way that it is conceivable how the advocates of very varying views in therapeutics, draw the indications for their proceedings from their so called natural postulates, and would thus silence every doubt as to the conformability of their practice to nature. Thus the antigastric has much to do with sordes, the antiphlogistic with plethora.

If then nature has so many means at hand to overcome by separation, the foreign elements pressing upon her, by reason of the sudden suppression of customary excretions or secretions (the internal disease not being exterminated), she does not, nevertheless, always succeed in so doing, and she is so much the less successful as more psoric material had been accumulated in the individual, who has been thus relieved from the itch.—Mercury and iodine do not always destroy the teeth and lungs, of those who take the large and repeated doses of the old school; but can it be denied, that mercury thus administered may destroy the teeth, and iodine the lungs, if an internal condition should exist favorable to the development of these actions?

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Accurate observations and deductions become much more difficult, as the interval between the exhibition of the cause, and the production of the disease becomes greater.

2. The treatment of the itch is, for the most part, in the hands of hospital physicians, who are obliged to rely upon the reports of their subalterns; it is, too, an exceedingly difficult task, to keep watch of a case in which the itch has been thus cured. In military service it is almost impossible, on account of the movements of troops, furloughs, changes of garrisons, and also the frequent removals of the medical officers. Those who are discharged from the civil hospitals, leave that part of the country, or perhaps in a little while again seek admission, but by a different door, as asthmatics, dropsical, or phthisical patients, &c. And even if we could always arrive at this knowledge, can we deny that it is possible, that these diseases have arisen, and do constantly arise, from other causes?

And Rust remarks that when an itch patient returns to the hospital, suffering under some other disease, the new affection is ascribed to any and every other cause, than to the suppression of the itch. Cases of suppressed itch, says Richter, are certainly frequently mistaken and attributed to other causes; for they sometimes arise months after the disappearance of the primitive eruption, and sometimes the patient will obstinately deny (from shame) that he ever had the itch, or had driven it in by unguents. A very general experience teaches us, that the laboring classes suffer far less from fatigue and from the weather, and more from affections of the mucous, serous, and fibrous membranes than formerly; and that less physical endurance is to be expected from soldiers. Pringle would not have found it necessary to devote an entire chapter to phthisis as an army-disease, according to Autenreith, if he had not so frequently driven in the itch, by means of sulphur salves. In the same way, we may regard the ever increasing fatality of that disease, among the lower orders. It may be replied to this, that there are other reasons for these facts, but we ought not, on that account, entirely to lose sight of these, especially as they are less obvious, and therefore more worthy of observation.

It is an easy matter, to establish the connection between cause and effect, in those general lesions which have prominent characteristics, such as hydrophobia, syphilis, etc., even though they may be separated by the lapse of a considerable time. It is a much more difficult matter, however, in so particolored a disorder as the suddenly suppressed itch, which often appears after an interval of years, and assumes the most di-

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verse forms, according to the peculiar constitution of the affected individual. Should such morbid products arise as are cognizable by the external senses, pathological anatomy will recognize nothing new in them, and will be far from tracing any connection between them and the forgotten psoric process. While it must not be overlooked, in reference to the peculiarity of those maladies which are of a psoric-metastatic nature, that drugs administered endermically often exhibit their health-disturbing influence, it must also be remembered that there are many recognized forms of disease which appear after suppressed itch,* whether the suppression is effected by sulphur and soap or sulphur and fat, by lead or mercurial ointments, or by any other of the rapid treatments. Among these must be especially mentioned the manifold symptoms which indicate functional disturbance of the thoracic organs. By far the most frequent is shortness of breath, *Asthma psoricum*, a symptom which I and many other physicians (Weitenweber, Autenrieth, Schönlein, Bang, Michaelis, Weisse, Franzel, Vogel) have frequently witnessed after the suppression of itch. He who has once observed the disturbance of the functions most important to the animal organism, will find nothing absurd in the opinion that suppressed itch may be the means of producing phthisis,† disposition to organic cardiac difficulties,‡ chronic diseases of the liver and stomach, dropsies, hysteric chloroses, inflammations of the knee and hip (Schönlein), and numerous nervous affections.§

The course of diseases arising from suppressed itch presents many peculiarities. According to *Weitenweber* they exhibit much similarity to hysterical disorders, which frequently renders the diagnosis very easy. They are aggravated for the

* "The similarity of the symptoms which appear after the inconsiderate suppression of the itch, and my own experience a hundred times repeated, that manifold diseases arise only from that cause, convince me so deeply of the truth of my observations that all objections on theoretic grounds excite in me only pity and disgust."—*Autenrieth.*

† *Autenrieth's* Versuche für die pract. Heilk. aus den Klinischen Anstalten von Tubingen. According to this authority, the expectoration, mental state, and even the post mortem appearances in psoric phthisis, present some characteristics which deserve to be read, as described in the treatise cited. See also *Portal* on Phthisis.

‡ *Horn's* Archiv für medic. Erfahrung, 1832.

§ These short observations are taken from *Weitenweber's* well arranged digest of all the diseases which succeed the itch (Œster. Jahrbüch, 1845). He was induced to take the trouble of collecting them from a conviction grounded upon an extensive experience, that since P. Frank, Werlhof, Guldener and others, far too little stress had been laid upon the fact of a precedent itch, as one of etiological importance.

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most part in the cold, or during the evening or in the night. The attacks commonly come on after sundown (Schönlein). Such secondary affections are often attended by a troublesome itching especially at night, an eruption of vesicles, particularly on the hands, forearms, or only between the fingers. In the case of consequent organic disease of the heart referred to, it was extended over the whole body excepting the face. The itching between the thumb and index finger of the left hand in an ecclesiastic, who suffered from headache after removal of itch, was still present nine months after the disappearance of the disease.

Light is sometimes thrown upon the psoric origin of such diseases by their disappearance under the internal administration of antipsorics, the artificial production of psoric eruptions, or their spontaneous appearance. In this way, according to Autenrieth and Richter, the psoric ulcers of the feet (*ulcera pedum psorica*) which come on after suppressed itch are cured, but never under any treatment founded on general principles. This must be antipsoric, conformably to its specific nature. In this way it was that the ecclesiastic above referred to was relieved of his headache, accompanied by severe digestive disturbances and emaciation, by several weeks use of the sulphur baths of Baden, after he had been fruitlessly treated with drugs for months previously. In the same way, the general itching and papulous eruptions appeared in the heart patient referred to, after continued use of the *Spiritus vini sulphuratus*. And Autenrieth saw a case of melancholia, which appeared after the rash suppression of an itch, perfectly and lastingly removed on the appearance of an itching psoric eruption spread over the whole body. Bartholomäus cured a religious melancholy in a peasant boy in whom the itch had been suppressed by applications of sulphur and olive oil, as soon as he had succeeded, by subjecting him to a month's intercourse with itch patients, in bringing out a psoric eruption. Every practising physician can increase these few observations from the stores of his own experience, and thus establish for himself the truth of the principle we have announced.

Therapeutics of the Itch.

The importance of a proper, thorough cure of this affection, is obvious to him who considers, in the first place, that the genuine itch is with the greatest difficulty removed by the unaided powers of nature alone; and in the second, that if neg-

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lected it gradually overspreads the whole surface (all physicians of all shades of opinion agree in this), and gives rise to more or less dangerous effects, attacking the cutaneous system or the organs sympathetically allied with it. Vezin acknowledges (notwithstanding his attachment to the Hippocratic maxim "*Psora turpitudo magis quam morbus*") that by the nervous irritation consequent upon the continual itching, but especially, in itch of long standing, by the disturbance of the secreting functions of the skin, a great quantity of material that should normally be thrown off from the system is retained within it,* and is with facility directed upon the internal organs, producing diseases of the serous and mucous membranes of the lungs: and this may so much the more reasonably be expected to be the case where there has been a constant obstruction of the cutaneous pores *by the application of fatty salves.* Lorinser's etiology of tuberculosis is also properly estimated by Vezin. "It has long been recognized from experience," says Lorinser, "that the retention of matter that should be excreted may prove exceedingly destructive to the body, and we need only reflect a moment upon obstructed perspiration, recession of milk, &c., to be convinced that the materials of these excretions, if not suffered to escape, may act as poisons to the whole organism. We may learn also from these observations of what immense importance, in reference to therapeutics, are metastases and critical evacuations in all those diseases which arise from similar sources. We may conclude also that tubercles in the lungs arise in the first place from an obstruction of the normal evacuation of the exhalant vessels. The disordered vitality of the lungs and the retained matter cause a vicarious diseased secretion into the cellular structure, furnishing the material for tubercles."†

If then the acarus is to be regarded as the admitted cause ‡

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* We are of the opinion that we must also take into account the introduction of foreign elements, by means of the skin, as an absorbing organ. So thinks Autenrieth. We need, says he, no wandering acari, nor transplantation of their eggs, to account for the metastases of itch; but, if we would not shut our eyes to daily sad experiences, we must allow the absorption and transportation of the peculiar pathological product of the animalcule. Morgagni says: "Admit that the itch is always communicated by the acarus, still its pustules form little ulcers, which united, would make a formidable sore; what physician would inconsiderately suppress this, if it had continued for any length of time?

† *Die Lehre von den Lungenkrankheiten.* Berlin, 1823, S. 79.

‡ The acarus, as we trust we have shown, is analogous to other contagions, in being at the same time cause and effect; exciting the disease, and being itself a product of its action.

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of the dangerous sequelæ, and metastases consequent upon the long continuance and spread of the itch, with much more probability, in our opinion, may we attribute to it those functional disturbances of important organs, which are caused by the sudden interruption of all the existing conditions of itch, by means which dry it up and destroy the animalcule; for in this way, the pathological alternations of the morbid sympathetic and polar activity of the various organs, previously held in check by the existence of the external eruption, must be then much more excited, and without any previous preparation of the organism. No physician would consider the state of the constitution as entirely normal, if *acne*, *prurigo*, *eczema*, *impetiginodes*, *lupus*, and diseases of this sort were present; though many patients enjoy a tolerable degree of health as long as the cutaneous changes absorb all the morbid activity. In this way we may explain the immunity from other affections, and even the suspension of previous disorders, which is observed in cases of itch, which are not of too deep seated, too wide spread, or too long standing a character. *Fabricius*, *V. Helden*, *Rivière*, and *Pringle*, have witnessed the disappearance of an inveterate melancholy, and of other chronic affections, on the spontaneous breaking out of the itch. *Pariset* placed an acarus, by way of experiment, in the axilla of an insane girl, in the Salpétriere; she got the itch, and her insanity disappeared.

If, then, the experience of many physicians, distinguished for their powers of observation, practical tact, and theoretical learning, be no chimera, we must admit, that the *utility and appropriateness of the treatment of itch should not be measured absolutely by the number of days within which the eruption can be made to disappear from the cutaneous surface*, but that we must also take into consideration, with the efficiency of any curative means, its *safety;* including in this, not only that the eruption is removed, but also that the patient remains free from all morbid sequelæ and evil results of such removal.

"A man practising in large hospitals," says *Biett*, "and suffering himself to be influenced by no exclusive opinion, soon perceives the false and erroneous views which quackery has introduced into psoric therapeutics. The first user of a remedy extols it to the exclusion of all others. *His* remedy must be sufficient for all ages and temperaments, and in all cases, whether simple or complicated. All these opinions must be submitted to the test of strict and impartial observation. An acute practitioner finds special therapeutic indications

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in the different ages of his patients, and *particularly in the multifarious modifications which the itch is capable of exhibiting.*"

It would exceed the limits of my task, were I to give a list of all the solutions, salves, fumigations, antipsoric quintessences, liniments and lotions, with which the itch was combated before the discovery of the animalcule. I will only remark, that all treatments and remedies seem to have been intended to fulfil one of three indications. In the first, in which the disease was cured both by internal and external applications, the humoro-pathological view indicated a neutralization of acridities and impurities. In the second (sulphur being either retained or rejected as a coadjutor) the object was to convert a chronic into an acute process (as was done in the treatment of inveterate ulcers and swellings), by increasing the cutaneous activity almost to the point of inflammation, by applying the most varied irritants—saltpetre, potash, sal-ammoniac, mercury, hellebore, tar, zinc, gunpowder, chlorine, diluted oil of vitriol,* &c. This is the only sure treatment of itch, according to Autenrieth. In our times, however, more close investigations on the acarus, which had hitherto been only found in the genuine contagious itch, have led to a simple process of bug-hunting, inexpensive in time and money, and therefore exceedingly attractive to governmental functionaries,† and capable of being entirely completed, by the methods thus far tried,‡ in the short space of from one to two, never more than five, days.

Among the methods founded on this principle, *Vezin's* has enjoyed the special favor of physicians.§ It is, concisely, as follows:—The temperature of the patient's room is kept, summer and winter, at from 28 to 30° of Reaumur (63 to 67½° Fahr.). Two bedsteads are placed in it, each provided with a straw bed, pillows, two woollen coverlets, and a gown of a thick woollen stuff, three ells in length, and provided with long wide sleeves. The patient is put in the heated room into a metal bathing tub containing warm water about a foot in depth.

* Drugs of this kind were used by *Horn*, *Jasser*, *Wilhelm*, *Schmied*, *Krüger-Hansen*, *Penzlin*, *Helmerik*, *Maysl*, *Neumann*, *Dupuytren*, *Alibert*, *&c.*

† In the British army, the English method is prescribed by law; and the Prussian Secretary of Religious and Public Instruction, under date of 24 May, 1841, has acknowledged our obligations to Vezin for his meritorious endeavors to discover a method of treatment, which should be effectual, rapid, and unattended with morbid subsequent affections.

‡ Among these must be reckoned the catching of the acarus, which is customary in some places.

§ The reports of the Berlin, Hamburgh, Stuttgard, and Prague hospitals, are loud in praise of the method of Vezin.

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When stripped, the whole body is assiduously rubbed with a large piece of woollen cloth, with black soap and warm water. Thus cleansed, he puts on the gown and lies down on the bed, where he can, at will, draw over him the woollen coverlets. Here he lies twelve hours, a sweat very soon breaking out; he is most troubled during this time with violent itching, and not unfrequently new papules break out. At the end of twelve hours the first inunction is performed with the *Unguentum Anglorum contra scabiem.**

This salve is rubbed into the whole body, but especially into those parts where the eruption is most crowded, the patient standing near a hot stove. He then puts on his gown again and lies down; at the expiration of twelve hours the rubbing is repeated, and a third time at the end of twelve more. The patient then lies a-bed twelve hours more, and is afterwards washed; the grease being removed, and the papules, thanks to the flannel and soap, gone, the patient is dressed in clean clothes and dismissed as cured (!?) in the short space of eight and forty hours. The diet is generous. In this way young and old, recent and long standing cases, nay, even children and pregnant women, were treated with an equally favorable result.

"I attribute great efficacy," says Vezin, "to the observation of the required temperature, and the older the eruption the more is this necessary. As the itch is only presented to us as the result of a universal acridity, or as the effect of the acarus, it is always important to draw out the peccant matter to situations in which we can most immediately operate upon and most readily annihilate it. It is for this reason that we put the patient to bed twelve hours before the first inunction; the eruption in that time comes out most strongly, and it is easily conceivable that the acarus will come out upon the skin in greater numbers, and be more easily killed by the salve, as it is acknowledged that insects of that sort are much more lively in warmth."—At any rate this increased temperature may be the reason why perhaps fewer relapses and consequent diseases take place under Vezin's treatment than under any other of the methods founded upon the same etiology. But it does seem wonderful how Vezin could, in justification

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* ℞ *Pulv. subtiliss. Sulph. dep.* ʒ j.
Pulv. rad. Helleb. alb. ʒ ij.
Kali nitrici. gr. x.
Saponis nigri. ʒ j.
Ung. suill. ʒ iij.

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of his practice, have recourse to a position which he has stigmatized throughout the whole of his treatise, as totally unfounded,* and how he can talk of acridity in itch patients when he entirely denies its existence. Besides, that the acari are enticed to the external cutaneous surface by warmth, and that they are thus brought near to the bug-annihilating salve, is disproved by Hebra; observations, according to which the animalcules are only found in their burrows, from which they never emerge. The increase of the itching under the woollen coverlets may be more satisfactorily explained, by the supposition that the considerably augmented temperature acts as an exciting irritant upon the diseased skin, and, at the same time, also morbidly excites the acarus and incites him to increased digging and boring, just as the intestinal worms, when stimulated by anthelmentics, produce their peculiar local and consensual symptoms in a higher degree. Several years ago I saw a psoric patient, who had employed many means to no purpose, perfectly cured by the use of the Russian sweating baths.

To this class also belong *Wilhelm Adolphi's* treatment of the itch,† and *Neumann's*, with a solution of hydro-sulphuric acid. The *English* attain the end of destroying the insect by washes of a decoction of tobacco; *Aubé* by spirits of turpentine. *Bourbousson* lightly rubs the itch vesicles with linen moistened with the alcoholic tincture of Sabadilla.‡ *Hebra* pays no attention to the condition so indispensable according to Vezin, the high temperature of the room. The patient, on his entrance into the hospital, is cleansed of filth by means of a warm bath. He is then rubbed with a very small quantity of Wilkinson's salve, *only on those parts where the acaric burrows are discovered* (this, according to Hebra, in 98 cases in a hundred is exclusively on the hands and feet).

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* See his treatise, *the itch and its treatment after the English plan.* Osnab. 1834.

† *A hitherto secret mode of removing the itch whereby it may be infallibly cured in three days, and without subsequent injury to the health.* Divulged by *Wilhelm Adolphi*—Lieban, 1829—Eine bisher geheim gehaltene Heilart der Krätze, &c., &c.

‡ *Bull-gen-de, thérap.* 28 *May*, 1845.

§ The following is Hebra's modified formula:

℞.	Terrae cretosae		ʒ iv.
	Sulph. Venalis		
	Picis	aa	ʒ vj.
	Axung. porci		
	Sap. domest.	aa	℔ j.

Sufficient for twenty individuals.

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The frictions are repeated morning and evening for three days, and the cure is complete at the sixth application. The efflorescence still present and the artificial eczema produced by the frictions are removed in some eight days by means of baths. The excoriations produced by the scratching of the patient, and the ulcers, are most rapidly healed by fomentations of warm water, the artificial eruptions caused by the remedies administered, by cold poultices, the douche, local baths and zinc salves (one drachm to an ounce of lard).

We cannot deny to these two most important of the modern plans of treatment (Hebra's and Vezin's) the advantages of rapidity and cheapness; but we think we have proved from physiological considerations, and shown from the results of experience, that not only they, but all the older cognate frictional methods cannot so readily be allowed the attribute of safety. And in these doubts, and this solicitude for the future of patients thus cured, we are not dwelling upon the fact that relapses are by no means unfrequent occurrences after this treatment,* for, besides that the very best plan is still only a human plan, and therefore never free from defects, the little expense of time and money by which these relapses could be again medicated would still make it preferable to the old tedious process. Nor do we rely upon the facts that the ordinary methods of destroying the acarus have but little of the "*jucunde*" in their application, nor that a separate subsequent treatment is required for those cutaneous lesions that are occasioned by a thorough course of frictions; nor that the method has proved perfectly inapplicable† to those cases in which there is a delicate and irritable skin.‡ We have ample reason for rejecting this mode of treatment, in the very slender guaranty it can afford us against morbid sequelæ, even after the lapse of years.

In conclusion, a few words on the homœopathic treatment of the itch.

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* *Bird* says (*Horn's Archiv*, 1822); "It so frequently happened that the patients treated on the English plan again contracted the itch, after having been considered as cured, that I preferred other remedies." Dr. *Hesselbach*, in a lecture before the Society of Physicians, in Bamberg, at the October session of 1841, related two cases in which the itch had returned, after having been cured by *Mayst's* ordinary plan—frictions with soap 1lb., sulphur 1lb., and lard 3lb.

† I refer here only to the uncomplicated animalcular itch.

‡ Bird's observations on the English method for the itch.—(*Horn's Archiv*, 1822.)

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Whenever the itch has been cured thoroughly, i. e. rationally, as far as we can look back in medicine, it has been accomplished solely by the medicine which is entirely specific to this disease,* *sulphur*. What constitutes its character of specificity has been laid down by Hahnemann in the principle which he discovered: *Sulphur works the cure of itch by the action of similitude, or in other words, the only natural cure of itch is the homœopathic.*

Before commencing the treatment of itch we should take into consideration that this disease, like other exanthemata, has to run through several periods. *Parat* thinks even that itch cannot be cured radically until it has run through all its periods. In southern climates, in the summer and spring, in robust and sanguine individuals, every pustule runs its course rapidly, unless scratched open; in the north, in the summer and autumn, in old and debilitated persons, that course is slower. The fact, that the itch disappears when the system is attacked by severe illness and returns when the latter is cured, places the itch in the category of other chronic diseases of the skin. Dr. C. G. Neumann thinks that the disappearance of the itch upon an attack of fever, whether intermittent or exanthematous, or attending an internal inflammatory, or a fever of any kind, is a fact showing a connection of the itch with the centres of organic life.†

That sulphur is capable of producing an eruption similar to the itch, is evident from the effects of the natural warm sulphur springs; and a glance at Hahnemann's materia medica

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* The itch alluded to in these remarks is the acarus itch.

† Neumann is also of opinion—in contradiction with the above conclusion—that this has given rise to the delusion of many eminent physicians: that repelled itch causes a number of chronic diseases. To this we reply, that if some other disease, *such as an acute exanthem, abdominal typhus, intermittent fever, etc.*, be developed in the system infected with the itch, and the itch be thus forced into a state of latency, from which it returns when the other has left, this shows indeed that the itch (irrespective of its animated contagium) is dependent on the action of the internal vital priniciple, and, in this respect, is similar to the other psoric diseases of the skin, to all of which the above law applies, no matter in what form they appear: eczema, herpes, lichen, tinea capitis, crusta lactea, as every practitioner must have noticed, especially in regard to the diseases of children. But it is a very different thing with the *sudden suppression of the itch by remedies which, without being assisted by internal influences*, remove the itch from the skin by merely suppressing it. That this natural difference should have escaped Neumann is the more surprising, since he acknowledges the itch-patient to be internally diseased, and he does not recognize the presence of the acarus.

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shows us in sulphur a medicinal body, which, if taken internally by a healthy person, produces phenomena very similar to the symptoms of the itch. (See Hahnemann's Chronic Diseases, Vol. VI. S. 838–841 and 847–859.) The itch never gets well spontaneously, and its cure by Homœopathic agents has, since the foundation of Homœopathy, been considered one of its main pillars.

Even Celsus has made use of the sulphur springs, and three hundred years before him it appears that the warm sulphur springs on the island of Melos were employed for the cure of the itch. The oldest physicians did not administer sulphur internally, and when, in modern times, this has been done, the doses were usually so large as to purge, being thus, as Hahnemann says, unable to effect a cure, since the organism expels the sulphur without having had the advantage of its curative properties. In such cases the internal use was worse than useless, and dependence was then placed on the external application. Hahnemann condemns the latter totally. He says in his Chronic Diseases, that the physician who desires to proceed conscientiously and judiciously should apply no external means to any kind of eruption of the skin, and yet in the Materia Medica Pura we find attached to the sulphur symptoms the following remark.

"According to all *appearances* sulphur produces pimples and pustules very much like those of the itch, and, like the latter, chiefly on the joints and during the night; but in the *sensation* there is a difference, to wit: the itch causes a kind of intolerably-agreeable, creeping, itching biting, as from lice, and well defined by intolerably voluptuous itching, which, as soon as rubbed, ceases to itch and begins to burn, and continues to burn after the rubbing has ceased. As long as the internal use of sulphur has not changed that sensation into that peculiar to the sulphur-eruption, *so long it is not time yet to apply the sulphur-ointment externally.*"

Thus, according to the above expression, Hahnemann originally admitted the external application of sulphur. Ten years later (in his Chronic Diseases) he says that a recent itch, the eruption as well as the internal malady, is perfectly curable in two, three, or four weeks, by a few pellets moistened with the tincture of sulphur, without any external remedy. We infer from this a confusion with itch-like eruptions, because, in laying down the diagnostic characteristic of the itch Hahnemann has omitted those which are truly characteristic; the acarus-canals and the well authenticated infection. If we consider how seldom recent itch comes under the observation of the

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physician; how easily, without the above characteristic signs, a mistake may occur in the diagnosis, we are inclined to ask Hahnemann's disciples and students whether and how often they have cured the real, simple itch, according to the master's directions, and we should probably be answered by a skeptical silence.

All the phenomena of the action of sulphur on the healthy organism, unmistakably express its specific relation to the skin, in the vegetative sphere of which it produces evident and important changes. Besides this, sulphur has a specific action on the mucous membranes of the lungs, as is acknowledged by most pharmacologists. Consequently it produces on the healthy system, catarrhal conditions, miliary, papulous, itching eruptions, furuncles, &c.* Its absorption by the blood, when used internally, is manifested by the smell of the excretions, particularly the perspiration and fæces. Metals carried in the pocket whilst taking sulphur internally, become blackened (*Burdach Wichmann*). It has also been used for intestinal worms successfully. *Garnet* has expelled ascarides; *Schnurer*, the tapeworm with this remedy.

I have often convinced myself that amongst all antipsoric remedies, sulphur is that which is decidedly most capable of exciting itching of the skin, and every homœopathic physician who has treated Eczema, Ecthyma, Prurigo, Lichen and Herpes with Spiritus Sulphuris, will at the same time have observed what an important increase of the eruption and of the itching is brought about by a few doses of this remedy, even when the ure cannot be attained by sulphur alone.

For the complete and certain cure of the itch, the physician has a double task to accomplish. First, above all to eradicate the psora, and in particular, with regard to the itch, to remove the anormal condition of the vital forces (internal anomaly) by the proper dynamic remedies.† Secondly, to remove the peculiar consequences and miasmatic productions caused by the

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* Bird administered internally flor. Sulph. and ordered simultaneous Ung. Sulph. Comp. At a given time he expected to find the skin clear, instead of which the itch-eruption had increased. Even amongst such as seemed completely cured of the itch, the internal use of Sulphur brought this disease out again.

† The human skin produces of itself alone, and unaided by the rest of the physical economy, no eruption whatever, and becomes in no manner diseased, without the influence and agency of general ill health, and an anormal state of the system.

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disease. Without doing justice to the last indication, it would never be possible permanently to cure either the inveterate itch, or (since the acarus is found even from the commencement of the disease) probably even the recently contracted common itch.* As a matter of course, it is necessary to the cure of either the recent or the old itch, to carefully attend to the skin by ablutions, baths, change of linen, and proper regulation of the temperature.

Nearly all ointments and washes that have for centuries been used against the itch, contain as a principal ingredient "Sulphur." A proof, how from time immemorial physicians have been impressed with the curative powers of this remedy in the itch! It is certainly a very interesting fact that Sulphur, which is capable of producing pimples, papulæ and pustules, accompanied with itching, at the very same spots where they are generally formed by the itch, and is consequently sufficient for the homœopathic cure of similar impetiginous forms, should also *possess a specifically destructive power against the contagium vivum of those diseases.*

In modern times the specific power of Sulphur has been doubted, as is shown by the various additions of potash, ammonia, salts, &c., but this may be owing to another cause than the discovery of the acarus. One can easily convince one's self of the power of Sulphur to destroy the acarus by administering it by itself. The cause of that doubt is founded in the seductive shortness of time required to kill the acarus by severe acrid substances, and thus work an apparent cure; this accounts for the ambition of some practitioners to excel each other in the rapidity of making the itch *invisible.* Even the manufacturer knows that the most rapidly made goods are not the best! Such treatment is not to be ascribed only to the desire of saving time and expenditure, but to the principles of the old school, according to which new aggregates are either added to, or taken from the pharmacological body. There is no surer method of withdrawing medicine from the dominion of fashion, than by pointing out the road which leads to a better knowledge of the pharmacodynamic relations of drugs to the organ-

* Neumann thinks that when one has a case of simple itch to treat in private practice, it would be sufficient to do nothing else than to cause daily baths and washing in pure water; that then Sulphur inwardly would suffice to accomplish a complete cure. Besides this, particularly in Military Hospitals, it is often necessary to wait somewhat long for a cure. The great Bœrhaave left nothing untried to recover itch-patients from their disease by inward remedies; he was, however, at last obliged to resort to outward means.

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ism,—i. e. *physiological provings of drugs.* The same fate which Sulphur has had is now threatening Mercury, the specific for syphilis, and the trias of Paracelsus has lost much of its credit by the idol of the day, Iodine. Sulphur has for centuries cured the itch, *cito tuto et jucunde*, though it is a disease which enters deeply into the vegetative life and originates in dyscrasia.

Hahnemann has furnished the means for a rational explanation of this curative process, by his discovery, and given a scientific foundation to the experience of ages. In the later periods of his life, which has been devoted to the regeneration of the healing art, he admitted, together with the internal treatment of diseases, the external use of remedial agents as necessary.* With great propriety it may be asked in a physiological point of view, Is the absorption by the skin of so diffusible a body as sulphur, local or partial? Then the admission of substances into the stomach, by the mouth, is still more confined.

"There is no doubt," says Neumann, "that a disease of the skin like the itch is cured more rapidly and thoroughly by remedies which act directly on the skin, than by any other means. In either mode of administration, internal or external, the sulphur has to enter the system, by absorption through the blood."

These views I have taken as the foundation for my treatment of the itch in administering the sulphur, both internally and externally.

In the present state of our diagnosis of the itch, I think it very desirable that homœopathic physicians in hospitals should endeavor to solve the following two problems:

(1.) Is the real itch, *scabies sarcoptica*, curable by the internal homœopathic remedy alone; and if not, (2.) What is the best external and internal treatment of the disease, to cure it easily, safely, and rapidly?

The subject may be summed up by the following propositions.

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* In the last edition of the Chronic Diseases Hahneman says: This external application, which I have frequently tried with the best success, accounts for the marvellous cures effected by mineral springs, which happened to contain the specific—in the appropriate dose. Hahnemann likewise claims the external treatment with cold water, the douche, ablutions and affusions, as parts of the homœopathic system.

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1. Real itch differs from very similar eruptions of the skin by the power it possesses of infecting others, which is founded in a *contagium vivum*.

2. The contagium vivum (the acarus) is the product of the disease, and capable of reproducing the disease like other contagia and miasmata.

3. The itch originates, like other non-contagious exanthemata, in an internal disposition hidden in the organism, which is developed or brought to light by external influences, such as want of cleanliness, close air, poor nutrition, &c.

4. The usual contagion takes place by means of an insect (the *acarus exulcerans Linnæi*) which transfers the contagion, without excluding the possibility of communicating the contagion in the same way as other contagious diseases.

5. The disease, which results from the conflict of the internal organism with the hostile influences, affects ihe organism throughout.

6. The itch, if suppressed injudiciously and prematurely, engenders many complaints, and the *itch-metastasis is no phantom of physicians, but a fact substantiated by abundant experience.*

7. The real itch is cured homœopathically by the internal and external use of *Sulphur*, as shown by the experience of 1700 years.

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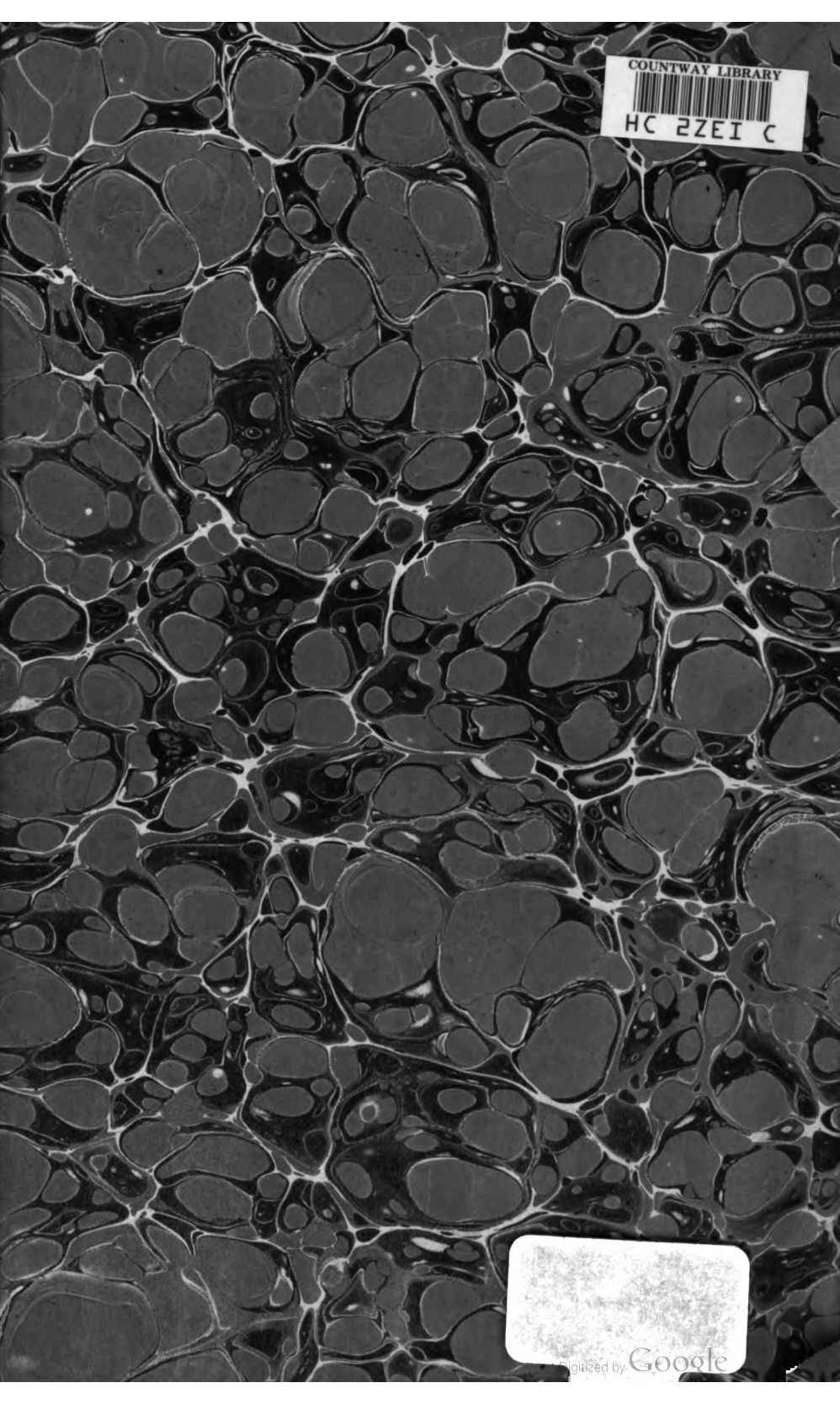
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