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A

PRACTICAL GUIDE

TO

HOMEOPATHIC TREATMENT

DESIGNED AND ARRANGED FOR THE USE OF FAMILIES, PRESCRIBERS
OF LIMITED EXPERIENCE AND STUDENTS OF HOMEOPATHY.

BY

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TO
MY MOTHER
WHOSE KINDLY SYMPATHY, WISE COUNSEL,
AND INSPIRING EXAMPLE
HAS BEEN A CONSTANT BENEDICTION FROM THE FIRST,
THIS BOOK IS LOVINGLY DEDICATED
BY THE AUTHOR.

P R E F A C E

The ordinary preface consists of a skillful blending of that which may be considered largely explanatory, personal, and apologetic, and as such it should cast a gleam of light upon what is to follow; such at least is the purpose of the author.

There are two reasons which have been most persuasive with me in preparing this book. The first was a conviction that there is, at the present time, an increasing demand made by intelligent laymen, prospective medical students, and physicians of different schools, for a full and definite statement—or rather, a re-statement, of all the principles and claims of Homeopathy.

To meet this reasonable demand, I have endeavored to set forth in Part I., following the *exact order of discovery and development*, all of these principles, together with definite instructions for their practical application; believing, as I do, that in their free dissemination, correct interpretation, and practical testing, rests the only fair and rational way of reaching a conclusion as to their truth or falsity. Special emphasis has been placed, throughout, upon the *guiding principle for the selection of the remedy*, namely, “*Similia similibus curantur*,” rather than upon the “small dose” which no longer forms the “storm center” of discussion or opposition, but is rather becoming recognized as an integral part of a scientific and curative prescription.

The second reason, which has prompted me to its final

completion, is that, after nearly half a century of active medical practice, I have felt that during the closing years I could do no greater service than to make some permanent record of the results and conclusions which have, with me, long since become demonstrated realities. If practical experience has a word to say or a duty to perform in making public some of the knowledge and observation of a lifetime, then, herein has mine been accomplished;—the real value of which the future must determine.

Thus I have endeavored to make my humble contribution of experience, with its attendant study and reflection, towards the construction of what I believe to be a sound and permanent system of therapeutics; resting as it does upon the foundation of all natural sciences, the truth of which, modern research, is furnishing ample proof. Essentially this conviction has held me steadfastly to the task of completing this book which has been accomplished by an hour here and an hour there, redeemed from the activities and exactions of an every-day medical practice. If the following pages accomplish their intended mission by proving a trustworthy guide to the prescriber and a blessing to the sick, so long as there remain any to be healed, then my object will have been attained.

To some of my life-long medical colleagues, for valuable suggestions, and to my efficient secretary, Miss Kennicott, for much painstaking work on the manuscript, I am profoundly grateful.

MYRON H. ADAMS.

Rochester, New York, January 7, 1913.

“All that mankind has done, thought,
gained or been; it is lying as in magic
preservation in the pages of Books.”

—*Carlyle.*

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Calcarea carbonica	Calc. c.	358
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PART I.

CHAPTER I.

CHARACTER OF THIS BOOK AND HOW TO USE IT.

As the title of this book would imply, it has been designed and arranged as a practical hand-book for ready reference.

It has been the chief aim of the author to embody in this treatise such essentials of homeopathic treatment as are now firmly established, gleaned from the most authentic sources; together with the results of many years experience in hospital and private practice which afforded unlimited opportunities to corroborate clinical facts and indications for remedies, such as are herein set forth, thus bearing full approval of my personal observation; also to so present these principles as to meet the requirements of those having a limited knowledge of, or experience with, homeopathic methods of treatment.

Briefly to furnish, in compact form, such a guide and such material that any who desire to test the efficacy of homeopathic remedies or to make constant use of the same, may find herein the necessary information to accomplish their object.

As a first step for those not thoroughly familiar with the principles of homeopathy, I advise a most careful reading of all of Part I, beginning with this Chapter I., as it is fundamental to all that follows. It is but the work of an hour and should be read and re-read until all is familiar to the prescriber.

While primarily intended as a guide to homeopathic treatment, it has seemed necessary in order to make the book most useful, to include at least a summary of the essential features—history, diagnosis and prognosis of each disease. A constant aim to encourage accuracy and simplicity in each prescription, which are the essence of true homeopathy, has excluded all that is speculative and wholly empirical in the use of remedies. The same is essentially true in the history and description of disease, and only clinical facts well authenticated are herein stated.

As a practical, working hand-book, brevity has again compelled the omission of a long list of remedies occasionally found useful, the author having preferred to elaborate more fully those in constant use; those “long tested and found true.”

Wherever possible, all technical words and phrases have been avoided and their meaning expressed in plain language or such as would ordinarily be used by physician and patient.

This book is divided into three parts.

Part I.—Principles of Homeopathy and their practical application.

Part II.—History or description of diseases, and their treatment.

Part III.—(Materia Medica) General outline of each remedy together with special indications, or “guiding symptoms,” grouped under different heads, to facilitate the work of selecting the remedy.

In Part III no claim is made to originality. However, under the most crucial testing, the author feels justified in expressing unqualified confidence in all that is herein set forth. The Homeopathic Materia Medica is the product of the combined labors of a host of physicians and provers extending back more than a century, and will forever stand an imperishable monument to their diligence and learning.

In Part III (Materia Medica) many of the well known, verified characteristics of each remedy are more fully given, and when in doubt as to the proper remedy as directed under treatment in Part II, the prescriber should make free use of Part III, which will often make the selection of the remedy easy and certain. This course will develop both familiarity with the remedies and skill in prescribing, and reward the prescriber by a prompt cure. More definite instructions as to the selection of the remedy will be found elsewhere, all of which should be made familiar.

I have given what may appear to some, undue prominence to all preventable contagious and infectious diseases. My justification for this is that there is much that is true and comparatively new in this realm, concerning which dense ignorance still

prevails, and that it is precisely along this line of medical and sanitary science that instruction is most needed and most helpful. Furthermore, the prevention and the cure of diseases are clearly related, and the old saying still holds good that "he who prevents disease is even greater than he who cures."

Of course, *it is assumed from the outset that the principles of Homeopathy will be recognized in full and followed out in each prescription*, otherwise disappointment will follow. This involves some serious attention and study to attain the very best results, for no prescriber of Homeopathic remedies, however well versed in therapeutics, can dispense with the use of works of reference. A reasonable care and study of different remedies, especially their "characteristic" indications, will soon develop a surprising familiarity with the same, and their use will disclose results in the way of cures that will amply reward the prescriber. That this unambitious effort to prepare a manual to make useful the practical experience of a life-time may prove an enduring aid to all those who seek to cure the sick and alleviate human suffering, is the sincere desire of the writer.

CHAPTER II.

THE PRINCIPLES OF HOMEOPATHY

OR

WHAT IS HOMEOPATHY?

A glance at the medical history of one hundred years ago will show that all medical practice was, to say the least, extremely crude and chaotic. Approximately it was during this time that Homeopathy took its place as a distinct school of medicine, proclaiming openly a law of cure. This law as expressed by different authors in different phraseology, cannot well be misinterpreted. No more lucid or comprehensive expression of this principle has ever been made than the one by Samuel Hahnemann in the following Latin sentence: “*Similia Similibus Curantur.*” It has become a classic and been adopted by Homeopaths the world over. Other and more familiar modes of expressing the same principle have been used, as for instance “like cures like.” Such definitions of Homeopathy without further elaboration, would fail to convey to the mind of the inquirer any adequate idea of the *Homeopathic system of therapeutics as a whole*. Therefore it has seemed necessary to enter upon some details in connection therewith, dealing with the same in the order of discovery and development.

THE LAW OF CURE — HOW DISCOVERED.

As a preliminary *this one pivotal principle* must be rightly understood, for to it all that follows is vitally

related. Plainly stated, Homeopathy is a system of therapeutics *based upon the natural law or principle* that any drug capable of producing symptoms or abnormalities when given to a person in health will, when similar symptoms occur in connection with disease, act curatively.

As an illustration of this and as the *initial step* in the *history of Homeopathy*, it was discovered that when drugs hitherto considered as specifics for certain diseases were administered to individuals in perfect health (to determine something of their action) they *produced symptoms and conditions similar to those of the disease* which they had *previously been given to cure*. This, although unexpected and apparently irrational, finally led to extended experiments with different drugs and upon different individuals (in health) with such uniform results that the conclusion was forced upon the mind of Hahnemann that back of all this *uniformity there must be some law of cure, some scientific guide* for the use of drugs on the sick.

HOMEOPATHIC MATERIA MEDICA — HOW FORMED.

Thus originated the idea of a law of cure which has been the *permanent foundation* for the building up of our Homeopathic Materia Medica of to-day. Convinced of the truth of this law, the pioneers of Homeopathy organized classes and began the systematic *proving of drugs on the healthy, making careful record of the same*, and so well was their task performed that it has never been excelled. We of to-day, must remain under everlasting obligations to them.

HISTORY OF THE SINGLE REMEDY.

Obviously, in the proving of drugs on the healthy *scientific accuracy* required that but one should be administered at a time; and here, it is safe to say, originated the use of the single remedy in prescribing for the sick. This, of itself, was a great improvement on the prevailing methods.

HISTORY OF "SMALL DOSES."

After years of experience and observation, it was discovered that *in prescribing Homeopathically* for the sick and using the prevailing large doses of the drug the results were not uniformly good, and in some cases the condition of the patient was made worse. This finally led to the *gradual reduction of the dose*, with increasingly good results in the percentage of cures, with no aggravation of the existing disease.

By this outline in the order of development, of a history extending over many years, it will readily be discovered that the question of *small doses* (*so often ignorantly or falsely charged as the sum and substance of Homeopathy, itself,*) was the *last* problem to be solved and that it came to a solution through prolonged observation extending over several years. I think it may be said here, once for all, that in the matter of dose, as in every other step taken in all the history of Homeopathy, *it was preceded by the most rigid experiments, extending over many years of painstaking observation.* Thus the tenets of Homeopathy, as related above and all so well correlated to each other, have stood the test of a century and are becoming

more recognized than ever before as *fundamental and unchangeable*.

Assuming the truth of all that is claimed for Homeopathy, what is to be gained thereby? Everything! Absolute stability in therapeutics is gained for all time, and this as over and against a constant procession of changing views as to drugs and disease which in time invariably leads to negativism or a general denial of the value of medications of any sort.

A Materia Medica is gained, based upon drug provings on the healthy, good for all time to come; and that the single remedy in proving and prescribing is the scientific procedure towards any real permanent progress. Furthermore, that the size of the curative dose depends upon the principle upon which it is given, and that the best dose is the minimum dose that will cure; also that the curative dose need not be so large as to injure the patient.

SUMMARY.

I.—The first and central fact, namely, the discovery of a *law of cure*, the result of administering drugs to persons in *perfect health*.

II.—Extensive proving of drugs on the healthy, followed by their administration to the sick, according to the law of cure, or *practical Homeopathy*.

III.—Scientific accuracy, both in proving and prescribing, demands the use of the single drug or remedy.

IV.—That when prescribed homeopathically, crude drugs or large doses often aggravate the disease or fail

to cure, whereas small doses give better results; a fact which *finally led* to the process of *diluting and potentizing* of drugs from the first on to the 6th, 30th and *higher potencies*.

In this endeavor to give a clear answer to the question "What is Homeopathy?" I have stated the *known facts* of its history past and present, studiously avoiding the use of argument as foreign to the purpose in view.

No attempt has been made to connect the name of Hahnemann with all the various stages in the development of Homeopathy, or give the experiments or processes of reasoning by which he reached his conclusions, for that would have extended this article far beyond reasonable limits. It is safe to say that medical history has made sure all honor to him as the discoverer and promulgator of Homeopathy.

A few facts of medical history relating to Homeopathy may properly be mentioned here, as follows: while it is true that even prior to the time of Hahnemann some of the principles of Homeopathy were openly recognized by medical men eminent in their day, (those relating to law of cure and single remedy) but were soon forgotten or more probably submerged by the medical prejudice which hitherto retarded the progress of any genuine medical reform. It remained for Hahnemann to follow up the first gleam of light as it came to him, and to face in person and for a lifetime every known phase of ostracism and persecution, even to banishment from his field of professional activities and from his native country, rather than surrender his convictions. Fortunately for

him and for humanity, he lived to a ripe old age and was permitted to see the principles to which he had devoted his life, all well introduced and maintained in nearly every civilized nation of the globe. To his great learning, his loyalty to his convictions and his moral courage, we owe our existence as a school of medicine.

CHAPTER III.

PRACTICAL APPLICATION OF THE PRINCIPLES OF HOMEOPATHY.

SELECTION OF THE REMEDY.

This is surely the *most important*, as it is the most difficult principle of Homeopathy to master and put in practice. This brief outline of procedure is intended for those having but a limited experience, and should prove helpful as a guide in *starting right*. It is essentially the plan followed by Hahnemann and by a *large majority of the most successful prescribers*. It must be admitted that some have a mental aptitude for successful prescribing and make *rules of their own*; and again, there are times of haste and emergency when *experienced* prescribers succeed without any rule.

The following outline if consistently followed will soon become a fixed habit of procedure, enabling the prescriber *even from the start, to attain the best results*.

The patient should be requested to give a correct history, beginning with the first symptoms of any attack or illness, and proceed to state somewhat in detail and particularly in the *order of development*, any essential features or symptoms that have occurred down to the date of the present interview. Only such interruptions

should be made as seem necessary to guide the patient in an orderly narration of the case in hand. Following this, the patient should be questioned and examined with a view of making a diagnosis of the disease. Apart from the selection of the remedy or not, it should never be omitted. This may or may not furnish material aid in the selection of the *one* remedy for the case; however, it will often suggest a number of remedies to be considered more fully later on. If the case is properly conducted up to this point, the next step may be comparatively easy. *The final act of selecting the remedy should begin here.* If, after listening to the patient's narration of the case, one or more remedies should have been *suggested*, it should be followed up and the patient questioned closely, to see if further indications or symptoms confirm the suggestion beyond a reasonable doubt. If not, and other remedies have been suggested, they should be considered in the same way. *If, through the inability of the patient to give an intelligent history of the case or when such history is brief, furnishing no special features which would naturally suggest a remedy, then the prescriber must proceed to question closely so as to discover the cause and first appearance of the illness, and so gradually unfold any facts or symptoms down to the time of seeking the prescriber; all to be done with a view of selecting a remedy.*

When this is well done, the cases are rare that do not furnish some good indications for remedies. It is well for the inexperienced to know that *all* symptoms have a relative value. As for instance, *many diseases exhibit many symptoms in common, but each disease exhibits*

individual peculiarities or characteristics. The same is essentially true with medicines. *Many drugs produce symptoms common to each other,* while it is equally true *each drug exhibits individual peculiarities which in prescribing are very appropriately termed "characteristics" or "key-notes," and the better these agree with the symptoms of the patient, the more certain the cure.*

Thus to designate and give proper emphasis to the so-called "key-notes" they are printed in italics, and black letters for still greater emphasis, both in the Materia Medica, Part III, and also under "Treatment." Symptoms printed in common type are close up to the "key-notes" in reliability, requiring only added experience and observation to place many of them in the class of "characteristics," thus ultimately forming the ideal Materia Medica.

Again the fact that circumstances often prevent the careful reading of all the indications for the remedy under consideration, as well as the fact that some symptoms of the remedy are more important than others has led to the use of italics and black type to facilitate the choice of the remedy.

These "characteristics" may refer to all the *circumstances and conditions of aggravation and amelioration, such as time, rest, motion, heat, cold, light, etc., etc.*

Again, in selecting the remedy, the mental symptoms and temperament of the individual often furnish a guide to the remedy. The first cause of an attack will often suggest the remedy, as for instance certain errors of diet, different kinds of exposure to all sorts of weather, mental and emotional disturbances from various causes, etc.

The most successful prescribers have utilized all of these aids in deciding the choice of the remedy.

Occasionally two or more remedies may seem equally well indicated, and here comes a real perplexity for even the best prescribers. A careful review of the symptoms, including conditions of aggravation and amelioration will generally clear up such perplexity. All who have had real experience in this painstaking study know that *the price of success is a strict compliance with the law of cure*. This means a diligent and discriminating use of the homeopathic Materia Medica and the treatment of the patient as a whole rather than treating the name of a disease.

Alternating of two remedies when they both seem equally well indicated is advocated by some and condemned by others. It is not a good rule for either the patient or prescriber, as it tends to superficial and loose methods of prescribing.

Of course, in all prescribing it is assumed that the *avoidable* causes of illness will receive due attention and if possible by advice, be corrected, that injuries and local disease requiring local treatment will be treated accordingly, and that disease and conditions generally regarded as surgical will receive the attention of a surgeon.

The following quotation from "The Hand-Book of Materia Medica" by Timothy F. Allen, M. D., LL. D., a most eminent authority, expresses more concisely the same or a very similar method of procedure for the *selection of the remedy*, and as he states "it can be followed by the trained or untrained prescriber."

“The first duty of the prescriber is to note carefully and completely the various complaints of his patient and add thereto his own observations concerning his condition, that is to say the prescriber must get all of his symptoms, subjective and objective. This duty is frequently quite apart from that performed in making a diagnosis of the disease and often requires a different line of investigation. This duty may indeed be performed without making a diagnosis, though it is not wise to attempt it.”

Summarizing his plan follows. “After carefully observing the history of the case, the character of the pains or sensations and location of the same together with the conditions of aggravation and amelioration, a group of remedies will usually be suggested from which, by the aid of the *Materia Medica*, one may be selected which best covers the case. Again, if the diagnosis of the disease has been made as it should be and is reasonably certain, then the first step would be to consider carefully the indications for remedies partially described under said disease, for thus, as is often the case, the right remedy may be selected without referring to the *Materia Medica*. However, in all cases of doubt the latter should be consulted, for thus only can Homeopathy be successfully practiced.”

Dr. Clark, of London, another eminent authority, says in his introduction to his book, “The Prescriber,” under the head of “Rules for Practice”:

“The beginner in homeopathic practice should, in

the first instance, make himself absolute master of some dozen of the most widely useful remedies, with all their characteristics and peculiarities; of the conditions under which their symptoms appear and cease, and of their special times of occurrence, if they have any.

“An accurate knowledge of the symptomatology of these drugs will enable the practitioner to deal successfully with the majority of the cases he meets. But it will also do more than this for him; it will give him a solid basis on which to build up a knowledge of the rest of the *materia medica*.”

The last sentence in the above quotation is especially important and cannot be over-emphasized. The number of remedies to begin with may be even more limited. They will increase rapidly and normally without any confusion if the prescriber is diligent in study.

Again in the same book under the head of “Case Taking.” Dr. Clark states in few words the essential principles concernings which there is practical unanimity among all homeopathists.

“The first step towards making a good prescription is a well-taken case. The homeopathist takes his case with much more care than do others. The directions given by Hahnemann himself in the *Organon* should be carefully studied, and the spirit of them followed. The patient should be allowed to tell his own story, stating just what he feels, and the particular symptoms he is most anxious to be rid of. The practitioner

should then ascertain the condition under which the symptoms occur, times of day at which they are worst, and any concomitant symptoms that may accompany them. If it is then not quite obvious what remedy he ought to prescribe, he will be prepared to consult his books of reference, knowing clearly what symptom he wishes to find."

VERBAL VS. WRITTEN EXAMINATIONS.

In an acute mild case a verbal examination of the patient may be sufficient but in chronic cases with considerable history, a suitable record of at least the main features of the case should be written down for future reference and if need be for study. The remedy prescribed with the potency used should also be made a matter of record. A few remedies suggested by the first examination may well be put down in parenthesis, for further consideration. It matters not how good the memory, or how great the experience of the prescriber, the record will be of interest and value even in after years. In my own practice I have found it of great service and have continued from the first until now to make such a record.

CHAPTER IV.

DIRECTIONS FOR THE PREPARATION, ADMINISTRATION AND CARE OF HOMEOPATHIC MEDICINES.

FORMS OF MEDICINE, DOSE AND ITS REPETITION.

Assuming that the proper remedy has already been selected, it is believed that the following directions for its use are sufficiently definite and comprehensive to form a proper guide for its administration, enabling the prescriber to deal intelligently with any ordinary case of sickness. These general rules are based upon and confirmed by a vast amount of experience extending back for more than a century, and in my opinion a careful adherence to the same is the surest guaranty of success in curing the sick. They are placed here in a group, with such explanations as will make them applicable for the whole book, thus avoiding much useless repetition. There is really nothing intricate or difficult of comprehension about the practice of Homeopathy, except the selection of the curative or indicated remedy, which will be considered in another place. However, a lack of familiarity or indifference about some of the following details may prevent a cure, or even hazard a human life; hence all is important in obtaining the best possible results.

“When one has to do with an art the end of which is the saving of human life, any neglect to make oneself thoroughly master of it is a crime.”—*Hahnemann*.

DIFFERENT FORMS OR PREPARATIONS OF MEDICINE.

Medicine accurately prepared for homeopathic use is put up in different forms, viz: First, liquids; in the form of tincture, dilutions or potentized remedies. Second, in form of medicated pellets, tablets and triturations. They should be obtained thus prepared from a reliable homeopathic pharmacy or homeopathic physician. Nothing is more important than this, that the remedy should be accurately prepared and every way reliable, else all effort is vain. To obtain all my potentized remedies as originally prepared by a first class homeopathic pharmacy has been the custom of a life time. Self-made, or drug-store potencies I have never used. To eliminate every avoidable source of failure on the part of those who are testing or using homeopathic remedies, I must urge the plan adopted by myself.

The two forms liquid (dilutions) and pellets, are the ones in general use. The particular form of homeopathic medicine to be used in each individual case is quite largely, if not wholly, a matter of convenience, in other words, if the medicated pellets will cure a case, the liquid or medicated solution will do the same, and *vice versa*. The *one essential* thing, emphasized above all others, and certainly the most difficult is the selection of the right remedy according to the principle of Homeopathy, so concisely stated by Hahnemann, “*Similia Similibus Curantur*.”

DOSE OR POTENCIES OF REMEDIES.

Although in these latter days we hear comparatively little about our small doses, the question even in our own school is far from being *permanently settled*. Some prefer the use of crude drugs, or the lower potencies, while others use the higher potencies exclusively. A very large middle class make use of *both the lower and higher potencies*, endeavoring in so doing to suit the potencies to the *susceptibility or individual temperament* of each patient, as well as the *nature of the disease*. This method of differentiation, when it can be accomplished, represents the true ideal, and obviously includes the use of *both the lower and higher potencies*. To become thoroughly established in this latter method, requires time and close observation; in my own case it required several years of experience and careful observation at the bedside, for I began my practice handicapped by some of the prejudice and training received in another school of medicine. *To illustrate*—it is safe to say that when well indicated any *one* of the third, sixth, thirtieth or two-hundredth potency *will cure* a given case of disease, but as to which one will *cure the quickest and best*, there still remains much honest difference of opinion, time and experience will help to decide. If experience is worth anything, and has anything to say, it seems that here is a rare opportunity, for it is doubtful whether there is any other way the question of the most suitable potencies can approach a solution. The sixth and thirtieth potencies have been my main reliance, however, truth compels me to say that the two-hundredth and one-thousandth have often cured when the lower failed. It is generally con-

sidered best for those of limited, or no experience, to begin with the lower potencies, the sixth to thirtieth.

“The highest ideal of cure is rapid, gentle, and permanent restoration of the health, in the shortest, most *reliable and most harmless way*, won by easily comprehensible principles.”—*Hahnemann*.

PREPARATION OF MEDICINE AND DOSE.

If the liquid is used, the patient may be directed to *mix 10 to 15 drops in a half tumbler of water*, a teaspoonful to be taken as directed in the following paragraph “Dose and Its Repetition.” If medicated pellets are to be used in preparing a solution, 10 to 15 may be mixed in the same quantity of water and used as above. Pills or pellets made for homeopathic use are composed of pure cane sugar, absorb the tincture or dilution readily and are soluble in water. Size 35 (medium) of pills is the one generally used. For convenience, the medicated pellet taken *dry on the tongue* seems to have the preference in chronic cases, and a single dose of 4 to 6 pills given thus may well precede the *first* dose of a watery solution. In *acute* cases where frequent doses may be required, it is well to prepare a solution as before described.

DOSE AND ITS REPETITION.

In acute cases attended by any violent or urgent symptoms, characterized by *pain, exhaustion or high fever*, the remedy should be given often, ranging from *every 15 to every 30 minutes*. In cases less urgent, with no severe pain, give *once an hour or even two hours*. In all

cases (either acute or chronic), as soon as there are *clear indications of improvement*, lengthen the interval or stop the medicine altogether so long as the improvement continues, and repeat the dose when improvement ceases. This is *important*; it may sound revolutionary, but it is not even new. Make sure the patient is improving and have no fear. If following a few doses of medicine there is evident improvement, the patient begins to perspire, or become more quiet with less pain and discomfort, it is generally safe to conclude that the remedy has been well chosen and other good results are to follow. As a rule, it is seldom wise to waken a patient from normal, quiet sleep to administer a dose of medicine.

WHEN TO CHANGE THE REMEDY.

In acute, *urgent cases*, with pain and violent symptoms which are not changed for the better after *3 to 6 doses given often*, another remedy should be chosen. In milder acute cases where the remedy is given every one or two hours, more time must be allowed before changing the remedy, *even 6, 12 or 24 hours*; after which if necessary, a more suitable remedy should be sought and given. In all cases, acute or chronic, the remedy should not be changed too often, should be given a *fair trial*, and with the appearance and *continuation of favorable symptoms* do not interrupt the same by giving a different remedy.

CHRONIC CASES.

If the disease has passed from the acute to a semi-chronic form, or has existed for months or years with no serious complication or urgent symptoms, the remedy

should not be given too often ; not more than two or three doses per day, and much less frequently or discontinued, *after improvement is evident*. In chronic cases the curative process is generally slow, and the medicated pellet answers well in such cases. It should be given preferably before meals or on retiring at night.

CARE OF MEDICINE.

Homeopathic medicine should be carefully protected against any and *all forms of contamination, should be labeled, well corked, kept in cases, closed box, or drawer*. If medicated pills are used, they should, to ensure reliability, be re-medicated once or twice a year.

CAUTION—Unless expressly prescribed, it is well while taking homeopathic medicine and for some time thereafter, to avoid the use either *internally* or *externally* of all other drugs, strong acids and coffee.

PART II.

DISEASES AND THEIR TREATMENT.

CHAPTER I.

AIDS AND ACCESSORIES TO DIAGNOSIS AND TREATMENT.

GENERAL CONSIDERATION OF DIAGNOSIS AND ITS IMPORTANCE.

The appalling results that sometimes follow from errors in diagnosis cannot be realized by the inexperienced; that this department of the practice of medicine in earlier times was quite as weak and chaotic as that concerning therapeutics, is saying a good deal. The scientific aid of the present time, available for every case and emergency in diagnosis, was practically unknown to physicians of earlier times.

The unaided five senses supplemented by crude observation only, will explain many of the strange vagaries that fill the pages of the earlier works on pathology and diagnosis. To-day all is different, with the aid of the microscope, the X-Ray, the clinical thermometer, and a score of minor inventions there is no excuse for blunders in diagnosis. Occasionally obscure cases may furnish good ground for difference in opinions.

As I read the early history of homeopathy, it is easy to discover that there was a tendency to neglect diagnosis. Doubtless much of this was due to the uncompromising attack by the homeopaths upon the prevailing method and error of treating disease by name rather than the patient as a whole, so that out of apparent neglect has come a permanent compensation to the principle of treatment. An early and accurate diagnosis of every case is of the greatest importance to the individual, the family, the community and the state. This is especially true in all contagious and infectious diseases, for upon this depends all proper and successful quarantine regulation. To the individual as a unit, it means much, even apart from medical treatment, for no patient can be properly safeguarded against many errors of diet, exposure, etc., unless the nature of the disease is well understood and defined by some definite diagnosis. Again, the suspense of the patient and friends often works havoc through fear of some serious impending disease, which does not exist. There are many minor reasons why a right diagnosis should be made early and any neglect thereof might in some cases be considered criminal. An early diagnosis often leads to the early treatment of diseases, easily controlled in the first stages, and increasingly difficult in the latter.

Another reason is that while the principle of regarding and treating the patient as a whole is fundamentally correct, nevertheless when the disease is early and rightly named in the diagnosis, some advantages accrue to the prescriber in the way of hints of a group of remedies generally indicated in certain diseases. A careful con-

sideration of each remedy in a small list is much easier and far more successful as a rule than a wide glance at the whole *Materia Medica*.

Obviously much is gained by a diagnosis, and the earlier made, the better for all concerned. *In the meantime, the condition of the patient as made known by the symptoms given and those discoverable to the prescriber, should all be utilized in selecting the one remedy which best includes them all, "the totality;"* for with or without a full diagnosis, this is the best and practically the only way to prescribe successfully for a patient. And fortunately the result is often such that the impending disease is "nipped in the bud," regardless of any diagnosis.

Let the emphasis on the importance of diagnosis be placed where it should be.

FIRST: As a general preventive measure, as in contagious diseases.

SECOND: Its importance in the proper management of the individual patient.

THIRD: Relief from unnecessary suspense to patient and friends.

FOURTH: Such suggestion or aid as may come to the prescriber by reason of a smaller group of remedies to be considered, from which to select the right one.

THE CLINICAL THERMOMETER—ITS USE AND MISUSE.

This instrument is indispensable to the physician and surgeon. To the student and layman possessing a reason-

able amount of knowledge and discrimination it is likewise a most valuable aid, for in every case of any importance its use will contribute much towards a correct diagnosis and prognosis. Also in treatment where some *hours in advance of visible symptoms the thermometer often reveals impending changes either for the better or worse*, requiring continuation of the remedy or a change of the same, as the case may be. The normal temperature, or "blood heat," in perfect health is placed at 98 3-5. Slight variations from this standard owing to *advanced age or peculiarities of temperament are not rare*. A slight rise in temperature in health may follow after some *active exercise or after a meal*. The presence of fever will cause a rise of from 1 to 6 or 8 degrees above the normal. With the subsidence of the fever the temperature falls proportionately. In the *early stage of the eruptive fevers of children, also in acute inflammatory diseases of the lungs with both children and adults, the temperature is persistently high*. A moderate increase of temperature, *gradual from day to day* (but persistent) may indicate typhoid fever or incipient tuberculosis. A *sudden* drop in temperature especially if to below normal may not be favorable, particularly if the pulse continues *rapid, weak and irregular*. A gradual decrease in temperature with favorable symptoms in general to correspond, may safely be considered as an approaching convalescence.

Notwithstanding the essential information furnished by the thermometer when properly interpreted in its relation to each individual case, there are still some serious objections to its use by those who greatly *exaggerate its value or are bewildered by its every unfavorable fluctuation*.

This often leads to premature and radical changes in treatment, as well as discouragement of the patient and demoralization in general. As a matter of fact, in most cases of illness and *within certain limitations*, there is a daily fluctuation of temperature with a usual tendency to reach its *maximum in the evening and minimum in the morning*. As a result of much bedside observation, it has been found most unwise, as a rule, to allow the patient to have access to the daily record of temperature or to announce the same every time it is taken, *except it is accompanied with a proper explanation*.

A *persistent rise* in temperature extending over days and weeks should never be disregarded. It is an index pointing to some organic disease or impending illness which can only be determined by a careful examination of all the facts and conditions. The temperature, whatever it may be, will of itself furnish little or no aid in selecting the proper homeopathic remedy. However, if following the administration of the remedy the temperature becomes improved or normal, it is a safe conclusion that the remedy has been well chosen. In diseases of children the temperature is inclined to rise and fall more suddenly than in adults. In such diseases as are characterized by a peculiar temperature, the facts will be more fully elaborated under the head of such disease. As a *means to an end*, the thermometer with all the misuses eliminated, must ever occupy a large place as an aid in dealing with the sick. That these words of caution and instruction may lead to an intelligent and *discriminating* use of the instrument is the object of the author in devoting so much space to the subject.

BLOOD PRESSURE AND DIAGNOSIS.

The determination of the blood pressure by the use of the sphygmomanometer occupies an important place in the diagnosis and treatment of diseases. Briefly related, by blood pressure is meant the estimation of the pressure exerted upon the blood by cardiac or heart energy and the elasticity of the arterial walls. The pressure varies from 110 to 130 millimeters in healthy young adults. In children the pressure is lower, while in those over 40 there is a physiological increase. The blood pressure in health varies within broad limits and is influenced by such factors as exercise, position, anger, excitement and digestion, so that the interpretation of the blood pressure must take into consideration any possible factor, known to influence and result.

In disease the estimation of the blood pressure affords the most assistance in chronic diseases of the kidney, some complications of obstetrics and surgery, while it affords information regarding the outcome and treatment in diseases like Typhoid and Pneumonia. It is well for those individuals over 40 to have their blood pressure determined at intervals and in the event of a gradually increasing pressure to have a physician order such a regimen as may prevent or retard the development of disease. Blood pressure observations are now required as part of life-insurance examinations, extensive observation having proved their value in determining the existence of disease where other methods failed.

The great value of the principles involved in blood pressure in establishing early the presence of threatening

disease has already been demonstrated. Much importance is attached to diseases of the heart and blood pressure and their relation one to the other. While blood pressure alone is not to be depended upon in making a diagnosis it certainly fills a large place as a first "danger signal" pointing to the necessity of a further investigation.

SPECIALISTS AND DIAGNOSIS.

The contribution of specialist to accuracy of diagnosis is not fully appreciated. The multiplication of departments in medicine with their respective specialists has rendered curable many so-called incurable diseases and has led to entirely new lines of procedure, both in medical and operative cases. The rapid increase of specialists in all departments of medicine during the past twenty-five years has been phenomenal and can scarcely be accounted for except as a part and parcel of this progressive age, and as a normal response to that strong underlying principle that runs through all the realms of human activity, namely "demand and supply."

The change has come to stay for it is so manifestly in the interests of suffering humanity that no custom or retroactive could turn us back to the time when the "family physician" or the general practitioner was practically the whole thing. However the practical problem will for obvious reasons continue to be thrust upon the patient and the family physician as to whether the case in hand is one for the specialist or the general practitioner and this fact has led me to devote a little space in giving something of my own experience and views in this matter. Assuming for the purpose of illustration only, that the

case is one of suspected appendicitis which as a general rule may be both medical and surgical. Who should assume all responsibility for a diagnosis and the plan of procedure? Are not the chances for eliminating error and for the recovery of the patient far better when the services of a competent specialist and the physician are combined? Answering both questions after no small amount of observation I would say that in all cases of suspected diseases or injuries which by common consent are classed as surgical, it matters not whether of the nose and throat, the eye and ear or the wider field of surgery, the specialist in such line of work is an almost indispensable factor and should be associated with the family physician in obtaining the best possible results; this is particularly important in all cases where there is more or less uncertainty about a diagnosis.

THE TRAINED NURSE.

Considering the aids that are available in the treatment of the sick, the trained nurse stands only second to the physician himself and in some special cases the order may be reversed, giving the nurse first place. The evolution of the trained nurse, like that of the specialist, has come about rapidly within recent years and has come as a response to a genuine demand. I recall the fifteen years of my early practice before the cap and gown of the trained nurse were visible. I think the custom of leaving the selection of the nurse to the physician in attendance is most important and for the following reasons: An unsuitable nurse for a very sick patient is next to none at all; this as a rule

need not occur, if the physician has some personal acquaintance or knowledge of the nurse. For instance, a nurse having no interest in young children or infants should never be asked to care for them when sick. The most successful nurse for children is one with a natural fondness for them, one who can sympathize with them and interpret their language. The selection of a nurse for a discouraged, despondent pessimistic patient should never be left to chance. Perhaps the greatest need of such a patient is a nurse who represents temperamentally the opposite condition. The so-called nervous patient needs a nurse with an ingenious mind and steady strong nerves, not much given to noticing trifles or discussing details, optimistic and able to create healthy diversion for the invalid.

The foregoing are given as typical illustrations only of what should be the rule in all cases. Fortunately in the large class of trained nurses nearly every temperament and personality is represented, so that in most cases the adjustment of the patient and nurse can be reasonably well accomplished. The recovery of the patient and the success of the nurse is herein involved.

It has been my privilege during the past twenty years to be affiliated with the teaching force for a large class of trained nurses and to observe something of their work in after years. I am persuaded that most of the failures that I have known have come from an unwillingness or inability to adjust themselves to the

case in hand; this, it must be confessed, is no easy task, for the sick one is not always reasonable, in fact is mentally and physically abnormal. No position in life requires more patience, more diligence and more unselfish devotion than the trained nurse, who does her whole duty. Her life should be made as easy as possible. It should be an easy and reverent thing for us to say, "God bless her!"

SUMMARY.

The foregoing general considerations, influencing diagnosis and treatment of obscure diseases have already become quite indispensable, but the details concerning the same are inadmissible here. Other aids and accessories should be mentioned as of equal importance. The culture test for diphtheria; the tuberculin test for diagnosis and treatment of incipient tuberculosis; the importance of proper climate for the invalid (already considered briefly in connection with tuberculosis, hay fever and asthma) the widening field of the X-Ray, both in medicine and surgery, all are now available for those who seek relief through medical and surgical treatment.

Much that has been written in this chapter may be considered as a sort of practical review or "reminder," more especially for the non-professional reader.

GENERAL PRINCIPLES OF DIET.

Under the head of special diseases, special directions may be found as in gastritis, etc. To avoid useless repetition, only *general principles will be considered here.*

The selection of nourishment for an invalid is of much more importance than is usually attached to it, and it should not be left to the patient, or over-indulgent ones to decide. The dietary for the sick should on general principles be so chosen as to greatly reduce the labor or process of digestion. In most cases of illness, especially those of a febrile character, the *digestive process is greatly impaired*, the gastric secretions scanty, and more or less deteriorated.

Under such conditions any error or excess in feeding, *either as to frequency or amount*, is sure to do much harm and retard the results for which it is given. This is especially true in acute diseases, attended *with much fever*, where for a brief period of from one to three days only the lightest liquid food should be allowed, and in some cases total abstinence from all food may be still better. In such cases, there is generally much thirst, and a liberal use of water, either warm or cold, is both permissible and beneficial.

Broths prepared with much care from beef, lamb, chicken, clam and oysters are all available for the sick. With some one or more is preferred while others are rejected or unpalatable. The choice can generally be left to the patient, or two kinds may be given in alternation.

Milk in its various modifications is indispensable, especially with young children and infants. Delicate nourishment may be prepared from rice, barley and oat meal, and can generally be mixed with broth or milk, more especially in cases during convalescence. *The white of an egg well beaten* or pure unfermented grape juice

(diluted) often answers in the case of young children or even adults where other nourishment disagrees or is rejected. As a general rule in most acute cases, it may be considered safe to change from a liquid to a semi-solid food, when the pulse and temperature approach close to normal, and when the thirst and dry tongue and mouth give way to a more *natural condition*, followed by a *moderate sense of hunger*. Only *small quantities* should be given at first, gradually increasing in the absence of any unfavorable symptoms.

In the case of chronic diseases, especially when they have become incurable, the plan of rigorous dieting is often useless and cruel, annoying the patient to the point of making life miserable. Not only this, but in some cases the "dieting of the disease" is at the expense of the patient's general condition and the reversal of the order of diet may have a beneficial effect on both the patient and the disease.

GENERAL CONSIDERATION OF PALLIATIVE, EXTERNAL, AND LOCAL TREATMENT OF DISEASE.

Recognizing the fact that the foregoing are often related to each other and to avoid the multiplication of topics I have grouped them under one head for a general consideration only. The temptation to relieve pain without regard to consequences is often very strong and when the temptation is strengthened by the appeals of sympathetic friends having little or no knowledge of the consequences, it become to some irresistible; the result of which has caused many so-called "mysterious," "unex-

pected" and "sudden deaths" to say nothing of the perplexities in making a correct diagnosis or selecting the curative remedy for the patient who is already doped and drugged to obtain "quick relief."

"The highest ideal of cure is rapid, gentle, and permanent restoration of the health, in the shortest, most reliable and most harmless way, won by easily comprehensible principles."—*Hahnemann*.

Fortunately there no longer remains any doubt about the fact that ordinarily a well chosen remedy will not only bring quick relief but a safe and permanent cure. Reviewing my own observation, I can say that the use of anything outside of the well selected homeopathic remedy is very rarely a necessity. Complications and fatalities are less frequent when the main dependence is placed upon the proper internal remedy; rather than upon heroic dosing or questionable local applications.

The abuse of the hyperdermic syringe because of "speedy results" easily obtainable has in these later days lead not a few into methods of palliation rather than to making permanent cures, and into a superficial study of our remedies which if carefully selected would in a great majority of cases accomplish the desired relief by a prompt and permanent cure.

That our deep acting constitutional remedies will cure local diseases, or diseases having chiefly local manifestations, admits of no doubt; furthermore, they will overcome certain constitutional predispositions which in some individuals and families is a menace to good health and

often a source of complication when attacked by acute disease. The use of the higher potencies best accomplish these results.

Of course any proper means of palliation that are safe and sane may be used in connection with the proper internal remedies; they are permissible and often beneficial. But in all doubtful cases it is always well to be on the safe side, exercising the most discriminating judgment in the use of external applications and always avoid the use of all harmful, dangerous experiments, simply to gain "speedy relief."

The treatment of any form of skin eruptions (either acute or chronic) by external applications is much less prevalent than in former times, showing as I believe a better understanding of the nature of such diseases as well as a knowledge of the risk of such treatment, which often proves to be a suppression rather than a cure, resulting in chronic internal disease which is far more difficult to eradicate than the original disease.

Rest assured it will pay to take time to make a careful selection of the curative remedy, for the relief thus obtained will not only be astonishingly prompt, but permanent.

As is well understood, Homeopathsists as a rule depend upon the internal administration of medicine rather than their local and external application, and especially so in all non-surgical cases; however, there are three remedies whose use externally has been so thoroughly sanctioned by clinical experience that their frequent use locally

seems amply justified. I refer to Arnica, Calendula and Hamamelis, each having a well defined sphere of action which is fully described under the head of each drug. Occasionally it is not easy to determine as between the indications for Arnica and Hamamelis, for in some respects they are quite similar in action and either may be beneficial in their application in a given case.

BACTERIA AND THEIR RELATION TO DISEASE.

Definite knowledge as to the cause and source of many of the most fatal diseases has, within the past twenty-five years, revolutionized all methods of prevention and treatment. This is notably true of all diseases of bacterial origin. Of these there are many, all of which will be treated under the head of contagious and infectious diseases. To Robert Koch, whose death has been recently announced, we owe much; for he was the foremost bacteriologist of his time. His persistent work rescued the bacterial theory from a mere hypothesis and placed it upon a scientific and working basis.

The far-reaching effect of this great service to humanity cannot yet be fully realized. Not content with the discovery of the cause of tuberculosis and kindred diseases; he pushed on, pioneerlike, until by patient research he was able to announce to the medical world *the great principle of inoculation, or the use of the antitoxines in the cure of these diseases.*

Up to recent times, it would have seemed far-fetched, if not absurd, to devote a chapter to the consideration of bacteria and their relation to or cause of disease. How-

ever, demonstrated facts have come upon us with the suddenness and emphasis of an avalanche, compelling most serious attention if in earnest we would seek out the true cause of disease and death which hitherto, largely through ignorance, have fallen from generation to generation like a fatal blight upon the human race. How, through all the centuries of medical research, have such important facts remained undiscovered and millions of lives been sacrificed? Perhaps the most obvious reason is that bacteria, owing to their infinitesimal size, being discoverable only by the most powerful microscope, have been overlooked or ignored, thus giving rise to the expression of the present day scientist. "Bacteria are man's invisible foe."

While this is true of the so-called "disease-producing bacteria," it is also true that there is a vast variety of species which are not only harmless, but may be considered in the great economy of nature as man's invisible friend. Some kind of bacteria may be found almost everywhere in nature. Wherever there is decay or degeneration of tissue they are often abundant. In the soil beneath our feet or the dust that flies through the air, the water of the stagnant pool or the river that tumbles on its way to the sea, they are there. In the uncooked food, fruits, vegetables and milk, enormous numbers are taken into the system and by the action of the digestive organs are rendered harmless and possibly made to serve a function in building up the animal economy. The complete function of non-disease-producing bacteria is yet to be learned; their role however humble cannot be an accident. In the early study of bacteria, owing to their

activities and rapid reproduction, it was a difficult task for scientific men to determine whether they should be classed as animals or plants. Many were inclined to consider them among the former, but at the present time evidence is conclusive that they are to be classed as plants. The one fundamental fact is that "disease-producing baccilli" may remain dormant, retaining the power of reproduction for months, in fact indefinitely, and then when implanted in the throat or lungs of one in health may produce a disease of a specific form, after its kind, which may be any of the contagious or infectious class. *This is the method and essence of the spread of so-called contagious and infectious diseases.* In one case it may be diphtheria, in another tuberculosis, etc. It matters not whether it be carried by the air we breathe, the water we drink or the food we eat; when the disease-producing bacillus comes in contact with the *heat, moisture and organic matter of the human system, the necessary conditions for self-multiplication are complete and ideal,* and the rapidity of this process is one of the mysteries of bacterial life. As a result of their rapid growth and decay, *poisonous chemical compounds are formed which cause disease.* Such, in the briefest possible outline, are some of the most essential facts concerning bacteria and their relation to disease. *Believing that a definite knowledge of the causation and prevention of disease together with the dissemination of such knowledge is one of the greatest boons that the physician can confer upon the physical part of humanity, and that such knowledge is now available is my reason for writing this brief outline which I trust may prove an*

inspiration to others to pursue the subject which has been fully elaborated in the latest standard text books.

FEVER.

In using the term Fever as applied to an abnormal state of the system it is intended to designate a condition where there are present *increased heat of the body, increased frequency of the pulse; elevation of temperature; heat and dryness of the skin and mouth, with much thirst.* In the beginning of all acute diseases, fever is generally the first signal of impending illness. In subacute and chronic diseases, fever is often the first and best evidence of acute aggravation, or a threatened relapse. Fever thus early in evidence may be, and often is only symptomatic of what is to follow; yet if *suitable remedies are administered early*, and a proper diet adopted, the disease may be prevented or if it does follow, it will be in milder form and of shorter duration. *To aid the prescriber in dealing with the first appearance of any illness* is my explanation for adding here some few remedies so often useful in the early or febrile stage of disease.

Fever, with its many causes and classifications, is, in the last analysis, symptomatic of some deeper, underlying cause, which will be considered mainly under the head of special fevers. See Index.

Only a *few of the most frequently useful remedies are suggested here.* Others will appear elsewhere, under the head of specific fevers. From a consideration of the special indications for each remedy, it will be discernible

that they each represent a *different type of fever*, which may, and naturally does, precede the more fully developed disease. With a moderate amount of discrimination there need be no confusion, as for instance, between *Aconite and Arsenicum*, *Aconite and Gelsemium*, or any of the other remedies. If in doubt as to the remedy or remedies, turn to the *Materia Medica*, Part III., and study the same more carefully.

The "suitable remedy" to which frequent reference is made, is the one which corresponds closely to the *totality of the symptoms* and pathological conditions of the case in hand.

Successful prescribing in the *early stage* or any stage of disease depends largely upon a close adherence to this method, which in no wise interferes with or underestimates in any way the importance of an *early diagnosis*, or the *subsequent use of the indicated remedies*.

Aconite—Very often indicated in the *first stage*. May be preceded by a *chill*, from *exposure and cold*, with *sudden checking of perspiration*, followed by *high fever*, *full, rapid pulse*, *hot dry skin*, *great thirst*, *extreme restlessness*, and inability to sleep. After taking cold, with impending organic disease, especially pneumonia, pleurisy or croup. After a very few doses of *Aconite* a free *perspiration* generally follows, patient becomes more quiet, accompanied by general relief of more violent symptoms, after which, if improvement ceases, other remedies, selected according to indications may follow.

Arsenicum—Corresponds to fever of *lower type* than *Aconite*, and is marked by extreme *prostration*, especially

in gastric and intestinal derangement accompanied by *nausea, vomiting or diarrhea*. The *thirst* is marked and peculiar. Constant craving for water but satisfied with *very little at a time*. Restlessness of body, changing about from place to place.

Belladonna—Somewhat similar to *Aconite*. Thirst and full pulse less marked than *Aconite*, with more marked *brain symptoms*. Throbbing headache, *great aversion to noise and light*. Skin very *hot*, face very much *flushed*, pupils *dilated*; impending scarlet fever or sore throat of severe type. Follows well after *Aconite*, if *Aconite fails to relieve*.

Bryonia—Following exposure and chill. Fever, with severe, *sharp pains through chest and aching of limbs and muscles of body*. Some thirst, but not marked. *Great aversion to moving or being moved*, which aggravates all pains. This is the opposite of *Aconite and Arsenicum*. Impending *pleurisy, important*. Follows well after use of *Aconite*.

Chamomilla—Fever of *children* more especially. *One cheek red and hot, the other pale*. *Irritable in extreme, with desire to be carried about*. Restless at night, with gastric and intestinal disturbance.

Gelsemium—The fever of *Gelsemium* is less marked by heat of the surface and thirst than that of *Aconite*. Often after *colds with debility, headache and lameness and soreness of eyeballs*.

Fever with *slight thirst*, especially with *prostration*, the characteristic of *Gelsemium*. Fever with brain and spinal involvement.

The fever developing during the *progress of organic diseases* and from other causes, as local inflammation, injuries, etc., *will be treated fully under each head.* See Index.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

GENERAL CONSIDERATION OF CONTAGIOUS AND INFECTIOUS DISEASES.

These include all such as may be transmitted from one person to another, either by direct or indirect contact; the former only by *direct contact with the sick*, the latter by *intermediate objects*, hereinafter described. As yet medical authorities are far from agreement as to the diseases thus transmittable; however, *the number has increased rapidly during recent years.*

It has been fully determined that *some diseases are both contagious and infectious*; as, for example, diphtheria and scarlet fever, while others like mumps and whooping-cough, are contagious only, *direct contact being necessary.*

Infectious diseases may be transmitted in many ways besides direct contact, as through food, water, clothing, dust and books, Examples of which, scarlet fever and tuberculosis may be considered most typical. *Formerly the contact or contagious idea was so generally accepted as the full limit of danger that little or no attention was paid to infection from remote sources.* Definite knowledge in these matters is of the greatest importance, as

some of the most fatal and wide-spread epidemics have been traced to the importation of infection from distant localities by the various media herein described. It is safe to say that through the revelations of the microscope and various scientific aids, it is possible at the present time to declare preventable quite a large number of the most prevalent and fatal diseases, a partial list of which will follow. The first step in this work of prevention was to obtain *positive evidence of the character and source of the infection and, secondly*, the ways and means of its communication to the healthy individual. A brief summary of these facts may serve a far more important purpose when put in practice than a knowledge of treatment; for the old maxim "Prevention is better than cure," still holds true. The following diseases have been declared *both contagious and infectious*.

Cholera, diphtheria, dysentery, influenza, leprosy, pneumonia, scarlet fever, tuberculosis, typhoid fever, and small-pox. Many other diseases may be said to be *contagious only* requiring *contact with the sick*, which is really by far the most certain and prevalent way of communicating disease to the healthy individual.

Certain *infectious* diseases may be communicated by indirect contact; as through clothing, handkerchiefs, wash-linen, carpets, etc. Also, in drinking water, raw oysters, milk, and various foods we have a very common source of infection, especially in cases of scarlet fever and typhoid. Infection from dust, carrying dormant bacteria, as in the dried sputum of tuberculosis, is considered a factor well-defined in the spread of infectious

diseases. (See tuberculosis.) Last, but not least in importance, is the common house-fly, always troublesome and now condemned as a "*dangerous creature*," because of its ability to carry about in its tiny anatomy the germs of disease; such as cholera, dysentery, diphtheria, tuberculosis and typhoid.

Strange to say that when the scientists first made their declarations as to many of the heretofore unknown sources of infection, and the character of the same, they were met with ridicule and denial. Now those days are past. Things invisible to the naked eye have become a mighty reality to humanity at large. The revelations of the microscope and the laboratory *have come late* but with a potent message which gradually will change the physical destiny of the human race.

In recent times the most notable change in the classification of diseases is the great reduction in the number of so-called "local diseases," and a corresponding increase in those diseases now known to be either constitutional or infectious. This has resulted in far more successful treatment and has disposed of many fallacies of diagnosis.

Safe and saner methods of management have been adopted and measures of relief have been directed towards the patient and the disease as a whole rather than to some local manifestation of the same.

If, added to a knowledge of the ways and means of infections, reasonable forethought and caution are exercised, all in sympathy with proper legal regulations, the generation to come will be spared the awful visitations of

diseases which have heretofore swept millions to untimely graves. Already the mortality tables show a great reduction in the death rate of some of the diseases mentioned, due almost entirely to prevention, rather than to any newly discovered method or treatment.

It would not be presumptuous to say that in the not far distant future contagious and infectious diseases will become rare and exceptional. During these later days definite knowledge and information have multiplied tenfold, so that there is little excuse for ignorance. Those who expose themselves or others to disease must do so with a new sense of personal responsibility. Provisions are now being made as never before, for the dissemination of knowledge along these lines, both by State and National Boards; so that "*They who run may read.*" It is true that the laws and regulations governing quarantine and sanitary regulations often operate as a burden and sacrifice to the individual patient, but they are, nevertheless, wisely framed for the benefit of the masses, and should be cheerfully obeyed in both letter and spirit.

SPECIFIC CONTAGIOUS AND INFECTIOUS DISEASES.

SCARLET FEVER.

HISTORY, CAUSE AND GENERAL FEATURES.

That scarlet fever is highly contagious and that it may be communicated from one person to another by a third person or by contaminated objects, such as books, clothing, etc., are well known facts. That the contagion of

scarlet fever retains its vitality for *many months*, especially when closed up in books and clothing, though not so well known, is equally true and important. Another danger lies in exposure to a case before complete desquamation, or "peeling," which extends over a period of from six to eight weeks *after the fever has disappeared*. "Prevention is better than cure," and ignorance or carelessness concerning the foregoing facts seems inexcusable. Formerly, few children reached the age of fifteen without having scarlet fever; but with our present knowledge of how its spread may be prevented by rigid enforcement of quarantine laws, there is no reason why the disease should not be "wiped off the map," or at least rendered a matter of rare occurrence.

SYMPTOMATOLOGY.

Following exposure, the period of incubation is short and somewhat variable, ranging from four to seven days. The attack is more abrupt, and the symptoms are more severe than in measles. Following slight chills, a high fever, sore throat, and *vomiting* occur; also a *high temperature which continues during the eruption*. With such a combination of symptoms, the patient should be *immediately isolated* from all other children, and steps taken to prevent the spread of the disease through direct or indirect contamination. During the first twenty-four to thirty-six hours, or prior to the appearance of the eruption, the condition resembles diphtheria, and a diagnosis on the spot, at this stage, is not always possible. However, the management of the case, *for the time, will be the same*, as both are contagious.

The first of the eruption should make its appearance on the *neck and chest*, within twenty-four to thirty-six hours, after which it gradually extends over the whole body, from above downwards. The peculiar flushed *scarlet red* color of the eruption, doubtless gave rise to the name scarlet fever. Often the entire surface of the body is scarlet, hot and dry. Pressure with the finger will cause the redness or blush to disappear; and when it re-appears it will be from the *periphery to the center*. *In measles this is directly opposite*, re-appearing from *center to periphery*. The sore throat is often more painful than all other symptoms, but usually improves with the development of the rash. The tongue has a peculiar appearance called "strawberry tongue," caused by the red papillae projecting through the white coating. Complications most likely to arise are swelling of the glands of the neck and acute *Bright's disease*. About the end of the first week, beginning where the rash first appeared and extending over the body, the skin *peels off*; during which time, it may be four to six weeks, the disease may be transmitted to another, either through direct contact or by something worn by the patient.

While waiting the arrival of a physician, or where one is not readily obtainable, one of the following remedies should be used. Of course the diet during the febrile stage must be restricted. Light broth, warm milk diluted, and water in moderation. The sick-room, especially in all cases of contagious disease, should be as well-ventilated as is possible without exposing the patient to cold and drafts which might cause suppression of rash. Aconite, with the inexperienced or superficial prescriber,

is too often given in every case of fever; whereas other remedies, with fever and well-defined symptoms are neglected. This is notably true in cases of scarlet fever. *Belladonna*, in many cases not only covers the fever but in addition, most of the *accompanying symptoms*, as herein after described. Hence *Bell.*, for a century past, has been found to be by far the best, or most frequently indicated in scarlet fever. The safe guide in prescribing is the condition of the patient, the totality of symptoms, and not a *name*, whether fever or otherwise.

MEDICAL TREATMENT.

Aconite may be the true remedy in some cases. If, in addition to the chill and fever, the patient is tossing with restlessness, wide-awake, anxious look, fear of death, predicting the same, (*Bell.*, drowsy and indifferent) skin dry and hot, great *thirst*, *pulse full and rapid*, a few doses of *Aconite* may be followed by free perspiration and mitigation of severe symptoms; after which some other remedy may be indicated to carry the case along safely.

Hahnemann's familiarity with the proving of *Bell.*, led him to recommend it, both as a preventive and a cure for the most prevalent form of scarlet fever. A century of experience by the medical world has verified his prediction. However, accurate prescribing requires that *Bell.*, should be selected, the same as any other remedy, for the different forms of the disease, which can only be met by *careful differentiation*.

Belladonna—Throbbing headache, drowsiness or desire to sleep but cannot; starting suddenly from sleep;

eyes injected, inflamed, dread of light and noise; *pupils dilated*. Face *fiery red*; *throbbing of carotids*. Throat very dry and sore; nevertheless a *constant desire to swallow*. Skin feverish and very *hot to touch*. The rash is of a fine, *smooth variety*, causing the skin to be *very red, like a fresh sunburn*.

Bryonia—If the rash *delays, or suddenly disappears*, with paleness of face, dry parched lips, with great thirst, drinking large quantities hastily; with sharp pains, specially in chest, with great aversion to any motion; pain on moving, or deep breathing.

Gelsemium—Considerable fever but no thirst; patient very weak and rather dull and quiet. Pulse fast but not strong. *Languor and drowsiness with pain at base of brain, with drawing of head backwards*.

Lachesis—In the more *malignant cases*, throat sore and livid; especially left side, which is very sensitive to touch. Eruption slow to appear and dark, livid color. Everything worse after sleep.

Rhus Tox—Many of the symptoms are similar to *Bell.*, but in addition there appears to be swelling of face and about the eyes. Tongue is parched, dry and brown, *with redness of tip*. Patient may be exceedingly *restless*, drowsy and feverish, rheumatic pains; backache, pain in eyeballs. The rash *may be coarse, rough, almost vesicular*, which is the opposite of the smooth, fine, red rash of *Bell.* There may be diarrhea and prostration, with typhoid symptoms, with delirium, and dreams of hard work and great fatigue.

Sulphur—An occasional dose may be given, if the

indicated remedies fail to act, or if the patient is of a scrofulous habit.

MEASLES.

This is one of the most common and perhaps the least dreaded of contagious diseases; yet the mortality, especially from *complications and sequelae*, should afford sufficient warning as to the importance of the best care and treatment. Few cases should terminate fatally. Those would generally be children of frail, scrofulous constitutions. It is probable that the disease is conveyed by close contact and not often by intermediate objects as third persons. The period of incubation is usually about ten days. One attack affords life immunity from another.

SYMPTOMATOLOGY.

The first stage is not unlike an ordinary attack of coryza, with the well-known symptoms; such as sneezing, watery discharge from the nose and eyes, headache, chilliness and fever accompanied by dry, frequent cough. Generally about the third or fourth day a fine, red rash appears; first in throat and roof of mouth which is dry and sore. The following day the rash makes its appearance on surface, usually on face and neck; after which it gradually extends over the entire body, the eruption being completed in from three to four days. At the end of the fourth day the rash begins to disappear, first at the place of beginning. The fever, which has been high during the period of eruption, now disappears quite suddenly. The cough, which has been frequent, may continue for a time. In some cases it is very persistent and, if

neglected, may be followed by organic disease of the lungs. Earache and abscesses, especially in scrofulous subjects, may develop during or after measles, superinduced by taking cold. Weak eyes may follow measles unless care is taken to exclude the bright light and bathe the eyes with tepid water sufficiently to clear away any secretion on lids. During the first and second stages, or until the rash has disappeared, the temperature of the room should be kept about 70. *The proper remedy given early will hasten the eruption, mitigate the severity of the symptoms and prevent complications.*

MEDICAL TREATMENT.

Aconite—High fever preceded by chilliness, *skin hot and dry, with great thirst, very restless and anxious mood, no sleep and never quiet, pulse full and rapid, dry, teasing cough.* Acon. should be given frequently at first, less so after improvement begins. This remedy when well selected is often sufficient to take the case well through the disease, but should be discontinued when any of the following remedies are better indicated.

Apis—This is occasionally indicated when patient is inclined to stupor, face swollen, *puffing about the eyes, eruption slow in appearance, dark in color, urine scanty or suppressed entirely.*

Arsenicum—In the more severe, malignant cases with marked *prostration, vomiting and diarrhea, very restless and thirsty, drinking only a swallow but very often, child afraid to be left alone.*

Belladonna—Early stage, *throbbing headache with drowsiness, starting suddenly from sleep, head hot, skin*

very hot and dry, *face scarlet red*, throat feels very dry and sore, with constant desire to swallow. Great aversion to light and noise.

Bryonia—Eruption slow to appear, or if it disappears prematurely with pain in head and chest, especially sharp, cutting pains. *Patient dreads to move or to be moved; vertigo on arising*, face becomes pale, dry cough with sharp, pleuritic pains.

Ipecac—For the cough during or following measles is very often a magic remedy, especially if there is occasional nausea. The cough may be dry or loose.

Pulsatilla—Fever not marked, but constantly *chilly with no thirst*. Child timid and tearful, desires fresh air, *aversion to hot room*, tardy eruption. Frequently called for, and unless other remedies are well indicated *Puls.* may be given.

RUBELLA.

(German Measles).

Rubella is a disease of children, that usually occurs epidemically, and one attack gives immunity from another.

At the outset of the disease, with fever, sore throat and rash of the measles order, a differential diagnosis between measles, scarlet fever, and rubella is quite impossible.

The violence of the symptoms is much less than scarlet fever, and the coryza symptoms and cough of measles are not marked. The invasion of the disease is short and its duration the same, lasting from three to five days.

Nothing definite is known as to its cause. It is contagious, and does not give immunity from attacks of measles.

SYMPTOMATOLOGY.

Slight fever with drowsiness, which is soon followed by a fine rash, first on the face, afterwards spreading sparsely over the body, remaining out only two or three days. Headache and sore throat are early symptoms. Every child with such symptoms should be separated from other children and treated as a case of scarlet fever or measles; at least until the nature of the disease is fully determined.

MEDICAL TREATMENT.

The remedies, *Aco.*, *Bell.*, *Bry.*, *Ipec.* and *Puls.*, especially indicated in measles, will be useful in rubella.

MUMPS.

(Parotitis).

Mumps is an acute, infectious disease which involves chiefly the *parotid glands*. Sometimes only one is attacked. After an exposure, a period of two or three weeks may elapse before the disease is manifest.

SYMPTOMATOLOGY.

A slight fever, lassitude, loss of appetite and sleep, irritability and such general symptoms as may precede other diseases, but nothing characteristic until about the second day, when one or both *parotid glands begin to swell* and become sore and even painful, especially when

opening the mouth or moving the jaw. Thenceforth, for some days the fever and swelling increase until the patient's face presents a most ludicrous appearance. After a period of five to seven days all symptoms generally subside. As an aid to an early diagnosis the well known test may be tried of giving the patient a *taste of some strong acid substance* (a lemon or pickle) which will generally aggravate the pain in the gland and jaw. One attack, if both parotids are involved, renders a person immune to another. In a case of mumps, the diagnosis is not difficult as the parotid gland is seldom involved as in a case of diphtheria or tonsillitis. To avoid possible mistakes the *throat should always be examined.* In mumps, the throat is not noticeably involved. Mumps, like most other contagious diseases, must run a set course and the most treatment can do is to guide it safely and speedily to a successful termination. This can be best accomplished by proper *care and by giving the indicated remedies at the earliest opportunity* or as soon as the symptoms of the disease appear. There should be no sequelae following the disease if the above suggestions are heeded and *all local applications avoided.*

MEDICAL TREATMENT.

Ordinarily only a few remedies are required except in cases of neglect, with metastasis or other complications.

Aconite—In early stage or at *any* stage when fever is marked, with thirst, pain, restlessness and irritability.

Belladonna—A valuable remedy when the swelling of *gland is hot with throbbing in head*, very restless or may be drowsy, *aggravation from jar, light and noise.*

Mercurius—*Much saliva accumulates in mouth and throat, tongue loaded with thick, whitish coating, breath offensive, gums and mouth much involved as in salivation, patient much worse at night.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

WHOOPING COUGH.

(Pertussis).

HISTORY, SYMPTOMS AND DURATION.

Pertussis or whooping cough is an acute contagious disease, largely confined to children, although adults are not exempt from a first or even a second attack. Infection generally occurs from the breath or sputum through proximity, and is seldom if ever conveyed by a third party. The duration of the disease is from six to ten weeks and may for practical purposes, be divided into three stages. First the preliminary, which continues for a week or more with symptoms not unlike a cold, the cough being rather more frequent and worse at night. Second, in which the paroxysm is often *ushered in with a whoop or spasmodic cough with choking, possibly vomiting and retching at the close of each paroxysm of cough, with extreme redness of face which suddenly disappears.* This stage may last for three or four weeks. Third, when the whooping gradually disappears or changes to an ordinary loose cough which is much less troublesome at night. The vomiting ceases and the slow convalescence follows, which may require two to four weeks.

It is probable that the period of *infection begins with and is most active in the first stage*, but a possible infection may occur at any time during the progress of the disease. Some epidemics have been attended by quite a large mortality, but such is not generally the case when proper remedies are used in the first stage of the disease, whereby the severity and duration may be considerably modified.

Infants and frail children should be carefully safeguarded from any exposure to the infection, for the reason that complications often arise during its *tedious course* which are not easy to remedy. Patient should, during pleasant weather, remain much out of doors. The air of the seashore seems beneficial to the more serious cases. In an ambition to give the patient fresh air, there should be no prolonged exposure to damp, cold weather or to extremes of any sort.

MEDICAL TREATMENT.

Aconite—Fever, dry cough, restlessness at night.

Belladonna—Often useful in *first stage, cough worse at night, 11 P. M.* Cough dry and constant with great *redness of face*, moaning and starting in sleep, heat about head with drowsiness, redness of eyes with dilated pupils, may be nausea and vomiting.

Drosera—Violent cough after midnight, retching and vomiting, paroxysms frequent and *much difficulty in getting breath.* *Similar to Ipec.* and may be given when *Ipec.* fails to relieve.

Ipecac—With the cough which is frequent, there is

much *nausea and occasional vomiting and gagging*, face becoming *livid*. *Ipec.* follows well after *Bell.* when the symptoms are less violent and the cough slightly loose.

Tartar Emetic—In the middle and *last stages* when the cough is *loose with much rattling of phlegm* in the larynx and chest, face may be livid with some *cold perspiration on forehead*, patient worn and weak from long continuance of disease. Following remedies may be called for. See *Mat. Med. Part III. Ars., Bry., Cup., Hep. Sul., Kali Carb.* and *Rumex*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

INFLUENZA.

(La Grippe).

HISTORY.

A disease which corresponded closely to *la grippe*, has prevailed epidemically as far back as there is any medical history. Under different names, but particularly that of "*bone-break-fever*," it has swept rapidly over vast areas, if not encircling the globe, from east to west. There have been intervals of 20 or 30 years when it has not appeared to any extent; and again for as many years, with the approach of cold weather, it has recurred in varying degrees of severity.

Prior to the winter of 1889 it seems to have been absent for a long interval. During that winter occurred the most general and fatal epidemic which has ever visited this generation; and each succeeding year the disease

has appeared, though in a milder form and not so prevalent or fatal.

Nevertheless, it has been a serious menace to the aged and feeble, and has left not a few who were formerly strong, with a legacy of some organic disease or general feebleness.

Notwithstanding the disease has seemed to prevail in epidemics, extending over wide areas, it is well known that the cause lies in the existence of a true influenza bacillus (Pfeiffer's bacillus).

La Grippe must therefore be classed among infectious diseases, within all practical limits; at least, *immediate contact between the healthy and sick should be restricted*. The aged, feeble ones, and any suffering from bronchial, lung, heart or kidney affections, should be carefully *protected from the disease*.

SYMPTOMATOLOGY AND COMPLICATIONS.

There are few preliminary symptoms. A severe headache generally worse in forehead and about the eyes, followed by chill, high fever, distressing *pain in back*, with more or less *aching and lameness* in all the muscles of body; with *prostration* and often profuse perspiration. In most cases there is *nausea*, sometimes vomiting, which helps to differentiate from common cold. With the exhaustion, the patient often becomes mentally depressed and morose; which often continues for weeks after the acute symptoms have all disappeared.

In the course of the disease there may be cerebral, pulmonary, or gastric complications; any of which should be

anticipated and promptly treated as such. If proper care is exercised from the beginning, and proper remedies given, the complications will be few and the severity and duration of the disease greatly modified. In every case of *la grippe*, the patient should *cease work at once, and remain in a warm room*. In the severer forms, the patient should be put to bed immediately and kept there until fully recovered. A vast amount of observation has demonstrated the importance of such a course. Let no one confound the disease with a common cold, the neglect of which is not always without a severe penalty. Any one familiar with the symptomatology of the following remedies, or who will turn to the chapter on Materia Medica and read the same carefully, will have little difficulty in selecting the right remedy. Ars., Bry., Gels., Eupato Perf. and Rhus Tox, or possibly Acon., Bap. and Bell.

MEDICAL TREATMENT.

Aconite—Following a chill; high fever, skin dry and hot with thirst, mental agitation, and bodily restlessness, (see Ars. and Rhus Tox) dry cough.

Arsenicum—Chill or chilliness, with fever which is attended by great weakness from the start, often with nausea and vomiting. The thirst is great but takes only a swallow and often. Restless, going from one place to another. Anxious; much dread of being left alone; gastric disturbance and diarrhea.

Belladonna—Cerebral form. Much drowsiness, with sudden starts from sleep. Throbbing headache. Face very much flushed and hot. Dread of light, noise or jar.

Bryonia—Aching in muscles, pain in limbs, but lying very quiet and dreading to be moved. Nausea on rising from chair or pillow. *Sharp pains in chest, worse from deep breath or any movement.*

Eupatorium Perfoliatum—Indispensable. Its symptomatology is a counterpart of La Grippe. The chill is followed by pain in head and eyeballs, which are sore to the touch. Tongue coated white. Thirst for cold water, vomiting after drinking. (*See Ars.*) Bruised, aching pain in back and hips. The body and extremities full of pain. Some hoarseness and cough. Vomiting of bile. *The bone-pains, pain in eyeballs and back, with nausea and vomiting are characteristic.*

Gelsemium—*Creeping chills and general lassitude*; cannot get warm. Some prostration, with aching all over body. *Eyeballs lame and lids feel heavy.* Some fever with pain at base of brain. Not the thirst and restlessness of *Aco.*, or *Ars.*

Rhus Tox—With *intense backache* relieved by *lying on something hard.* *Tossing, with restlessness,* especially of legs. Tongue very dry with red tip. Drowsy, typhoid condition, dreaming of hard work and full of fatigue. Better from moving about. Cannot keep still.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

TUBERCULOSIS.

If the whole human race could have a correct knowledge of the cause of tuberculosis and all other infectious

diseases, and would use that knowledge to avoid the unnecessary spreading of the same, medical statistics would be revolutionized in a generation.

The average duration of life, the death rate, the mortality tables of life insurance, would need to be rewritten and all would be so transformed for the better as to astonish the most optimistic. Already a good beginning has been made, and the statistics of many diseases have already been most favorably affected. Public sentiment is now aroused and ready to co-operate with legislation; so that, henceforth, progress should be rapid. Prevention, rather than medication, will be the main dependence in dealing with tuberculosis. A matter so vital to all demands some elaboration in every treatise pretending to deal with medical subjects. (See contagious and infectious diseases, page 44.)

HISTORY AND INFECTION.

In these days, those who read the newspapers and magazines, or medical text-books, must be somewhat informed concerning this, the truly "white plague" of the human race.

In its universality, including every known race; in its great fatality far exceeding any other malady; in its persistent progress and mystery; having, until recent days, baffled diagnosticians, physicians and scientists as to its origin and dissemination; surely it may well be termed the "perpetual white plague" which has caused more deaths than any other agency, it may be more than many others combined. Were it not for the revelations of the microscope in the hands of scientific men, this horrible sacrifice

of human lives would have gone on through the unrestrained devastations of the tubercle bacillus, to the generations yet unborn.

It seems incredible, nevertheless it is true, that up to as late as 1880, when Richard Koch, an obscure health officer in Germany, first discovered the cause of tuberculosis, little or nothing of practical value had ever been done to arrest the progress of the disease. In fact, well up to the present, it has been taught and believed that tuberculosis was a hereditary disease. Here and there one had declared it to be contagious, but with no scientific reason as to how or when. As a result of this failure to diagnose correctly concerning the disease, ignorance and chaos have prevailed to the present time. But these are rapidly being displaced by a knowledge of the cause of the disease and its mode of transmission.

PREVENTION.

In this treatise, intended to be practical rather than technical, there is space only for a few facts which pertain to prevention,—so closely allied to cure that they cannot consistently be omitted here. Those who desire details or speculative arguments, are referred to the exhaustive treatise which has been written on the subject.

Every individual should become familiar with the following facts.

FIRST: That in every case of tuberculosis, whether of the respiratory or abdominal organs, the bones and joints, or lymphatic glands, there is always to be found the tubercle-bacillus. This is a minute, colorless, rod-like parasite,

discoverable only by the aid of a powerful microscope. It is easy to understand how, because of its infinitesimal size, its marvelous powers of self multiplication, remarkable vitality and indifference to environment, it may live and pass unrecognized by our senses from one person to another, doing in due time its appalling work.

SECOND: That this bacillus can be transmitted in various ways to a person in health and produce or reproduce tuberculosis in such person.

THIRD: That there are various conditions which favor such transmissions and numerous media by which they are accomplished.

FOURTH: That there are conditions and precautions which prevent such transmissions.

FIFTH: That there are varying degrees of susceptibility as well as immunity to the implantation of the tubercle bacillus in the non-tuberculous subject, each influenced by climate, occupation and environment.

SIXTH: The human sputum, moist or dry, is the chief source of the transmission of the bacillus, hence the danger not only of any direct contact with sputum but from the dust of infected rooms or sleeping cars, drinking-cups, articles of food, etc.

SEVENTH: For the truly incipient case there is a reasonable chance of recovery, especially if transferred early to a suitable climate, aided by proper diet and remedies. The serious problem is with the advanced cases, for so long as they are unprovided for and allowed the freedom of the family, the factory, or the neighbor-

hood, there will always be an increasing number of incipient cases. This is the most obvious fact of all; else the accepted theory of infection is false. Time and an enlightened public sentiment may eventually provide for all these things. While these words of warning are applicable to all, they are especially designed for those who are constitutionally weak and defective; or those having any pre-disposition, hereditary or acquired to tuberculosis. The following guiding principles are fast becoming axiomatic, and should be familiar to all.

SOME THINGS TO BE AVOIDED.

Using the common drinking-cup in the home of the sick or in public places; railway car, station or school. The sick one generally craves water and has used the cup.

The dust of sweeping, as in sleeping-car, hospital, theatre, public hall or sick room.

Close proximity to the breath or cough of the invalid.

Sleeping with invalids or in beds or rooms used by them.

Direct contact in kissing on the lips (perhaps the most prevalent and risky of all exposures.)

Living or sleeping in damp, dark, badly ventilated rooms, where sunlight seldom enters. Sunlight tends to destroy disease producing bacilli; while damp, dark, and ill-ventilated rooms form culture beds to produce them.

Occupations inseparable from air laden with dust, fibres and odors; such as crowded factories, stone cutting, polishing, working in plaster of paris, printing offices and book binderies.

Neglecting colds with persistent coughing, with suppressed functions of the body.

Prolonged mental or physical exertion, especially night work.

SUGGESTIONS, CLIMATE AND TREATMENT.

Elect such occupation and residence as seems least irritating to weakened lungs. Seek when possible, such a place to toil and to live that pure air and sunshine may best sustain life.

In all cases where there is a *suspicion of risk to self or others, take a safe, sensible course*, instead of yielding to the sentimental formalities and customs *known to be fraught with danger*. There are ways of meeting and treating our invalid friends, that do no violence to the courtesies of life nor sacrifice anything of genuine sentiment.

In the *majority* of the *truly* incipient cases, proper climate, diet and remedies will result in cure.

In the advanced case where the local lesion has become marked by destruction of tissue, and the general condition by emaciation and debility, temperature and pulse well up, there is little that can be accomplished, more than to palliate symptoms and prolong life for a time. Change of climate to distant parts for such an one is generally a sad mistake. To the incipient, it offers much. Personal observations, made in southern California, Florida and Adirondacks, have compelled and confirmed such conclusion. Advice and competent instruction should be taken early and when a change is made, the case should ob-

viously be under the watch-care of a physician in the new climate. The emphasis put upon the value of out-door or open air life has not been too great; neither has the value of plain, nourishing diet which has displaced the former fallacy of stimulants. By aid of the *Materia Medica*, the following remedies should be carefully considered.

Ars.; *Bry.*; *Bap.*; *Hepar Sul.*; *Kali Carb.*; *Lycop.*; *Puls.*; *Phos.*; *Sul.*; especially *Bap.*; *Ars.*; and *Phos.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CEREBRO-SPINAL MENINGITIS.

(Spotted Fever).

HISTORY AND MORTALITY.

An acute, infectious disease, involving chiefly the membrane of the brain and spinal cord. It has prevailed, in epidemics, in nearly every country of the globe with a mortality uniformly great; attacking generally the young or middle aged. In recent times the communicability of the disease has been a matter of discussion. That it *may* be communicated from one to another admits of no doubt; not, after the manner of scarlet fever or measles, through the atmosphere, but through *contact with the secretions of the mouth, nose or eyes.*

Here, as in other infectious diseases, the *micro-organism* is found. Although of low vitality and difficult to cultivate, it is capable of *destructive work* when transplanted upon the mucus membrane of the healthy individual.

SYMPTOMATOLOGY.

The onset of the majority of cases is sudden, with no premonition. The patient is in apparent health when attacked with the disease. Severe headache, fever and prostration are followed by nausea and vomiting. In the severer forms, convulsions soon follow, with contraction and rigidity of neck muscles and the forcible retraction of the head, the latter being characteristic. There are cases where the invasion is less abrupt and the severity of the symptoms less marked; yet the symptoms are essentially the same. Stupor or complete coma develops early. The degree of fever does not conform to the severity of the disease; neither does the pulse, (which, at times early in the disease is slow), conform to the temperature, which is often 104. The worst type of the malady often proves fatal within a few days. The ordinary form runs an average course of two to four weeks. The mortality, except in mild cases is very great

Frequent sequelae of cases that pass through the acute stage are; deafness, paralysis, loss of memory and general impairment of the nervous system.

Some confusion may arise as to a differential diagnosis between cerebro-spinal and tubercular meningitis, or acute disease of the brain. A history of the attack differs markedly, and the development of the cases gives rise to symptoms and conditions that should not be mistaken.

MEDICAL TREATMENT.

After forty years practice, meeting a variety of epidemics, I cannot recall any that put all systems of

therapeutics to such a crucial test as an epidemic of so-called "Spotted Fever."

It was in the years 1871 and 1872, that it swept over Western New York, in fact over the United States, resulting in a mortality which has seldom been equalled. It occurred early in my practice, when the instructions of my teachers in *Materia Medica*, (Constantine Hering and Carrol Dunham), were fresh in mind. I determined to put their instructions to a test. A few cases presenting *many features in common were carefully considered*, the symptoms and conditions noted down. Taking the cases to the *Materia Medica*, it was easily discerned that there were four remedies contending for pre-eminence; viz., (given in order of preference); *Gelsemium*, *Belladonna*, *Bryonia* and *Rhus Tox.* *Gelsemium* 3x in most cases won out without a single fatal case.

Other remedies were called for in case of *complication* or where the type of the disease required it.

The early *administration of the indicated remedy prevented the usual spasms, relieved the intense suffering*, and prevented except in rare instances, the distressing sequelae; deafness and paralysis, etc.

Gelsemium—Chill or chilliness along the spine, followed by fever and *prostration*. *Trembling and mental lethargy* set in as once. Inability to think, except *disconnectedly*. Headache, mostly in *base of brain, extending to the eyes*, with dim, blurred vision. Pain in eyeballs *with heaviness or drooping of lids*. Fever, generally *without thirst*. Numbness of tongue with difficult articu-

lation. Great *weakness of extremities, with staggering and vertigo on slightest exertion.*

Belladonna—The onset is sudden and the symptoms of the brain are nearly the opposite of *Gels.* Excitement even to *violence, biting and striking* the attendants. Instead of quiet there is mental and physical agitation, which later may be followed by stupor broken by *moans and sudden startings.* Head *hot* and feet often *cold.* Face *flushed and at times scarlet.* The eyes have a wild, glassy appearance, *with pupils dilated.* The slightest noise, light or jar about the room *unbearable,* causing excitement, even spasms. *Bell.* may be more useful in the case of children and *young, sensitive, plethoric women,* when pulse and heat run high, with congestion and threatened convulsions.

Bryonia—Has less prostration than *Gels.* and but little of the brain excitement of *Bell.* If there is any delirium it is of milder type, with muttering about *business of the day or clamoring to go home.* Very irritable. Severe pain in the head, often confined to *base of brain and neck,* with violent, sharp pains through parts; worse for the *slightest effort to move.* Vertigo and faintness when *rising up.* Lips, tongue and mouth *dry and coated dark brown.* Fever of low, typhoid type. Lame, rheumatic pains in all parts of the body, with painful stiffness of the neck.

Rhus Tox—The brain and general symptoms stand between *Bell.* and *Bry.* There is the delirium and restlessness that resemble *Bell.* yet quite different, resembling the typhoid state of *Bry.* The face is flushed, and of a

dusky hue, instead of the scarlet red face of *Bell*. Headache is severe with distressing pain along the spine and *back*, with constant *tossing about*. The tongue is dry, brown and cracked, *with redness of tip*. In the sleep or stupor, the dreams are filled with *hard work* and fatiguing journey with *no rest of mind or body*. Cannot keep still. *Has to walk about*, which gives some relief. Attacks caused by *getting wet and cold*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DIPHTHERIA.

HISTORY, SOURCE, SYMPTOMS AND TREATMENT.

Diphtheria is a disease both contagious and infectious. Usually the uninfected person is brought in direct contact with the one having diphtheria or harboring diphtheria bacilli. Less frequently the disease is transmitted by infected food, milk, water, etc.

In most cases the patient will complain of a sore throat for a day or two, after which local and general conditions develop which render a diagnosis comparatively easy. Sometimes the attack is violent and sudden from the start. Such cases are as a rule of the *more malignant type*, and the *yellowish-gray membrane* makes its appearance *early*. The presence of this peculiar membrane leaves no doubt to the experienced eye. The most persistent symptoms of true diphtheria are swelling in the glands of the neck, *great prostration with tendency to sleep*, an offensive breath, coated tongue and increase of

saliva. The pulse is generally rapid and weak, while the temperature may be high or in some cases sub-normal. Such conditions call for prompt action. The great value of diphtheria anti-toxine has been demonstrated beyond all doubt and the early administration of the same by hypodermic injection is fast becoming the rule with all physicians. The dose should depend upon the case in hand; varying from 2000 to 4000 units. Much larger doses are given and repeated in the more malignant cases.

Homeopathic remedies have always been of unquestioned value in diphtheria and should be selected with the greatest care and given as heretofore. It is safe to say that, excepting the most malignant cases, homeopathic treatment has proved of the greatest value, and reduced the percentage of mortality to a comparatively low figure. The importance of separating a case of diphtheria, *or any case of "sore throat"* from other members of the family, and the duty of observing quarantine regulations has been duly elaborated elsewhere. The usual bacteriological examination should always be made to establish a positive diagnosis.

DIPHTHERITIC CROUP.

Not unfrequently the diphtheritic membrane extends into the larynx, producing a complication of most serious character. It is usually manifested by a *croupy cough* followed by *increasing dyspnea*. Again, some cases of diphtheria *begin in the larynx*, so that the progress of the disease is reversed. This has led to a wise regulation of isolating cases of croup until the full development of the disease; which is generally but a few hours. Should

a case prove to be one of diphtheritic croup, the treatment with anti-toxine is *especially indicated*.

MEDICAL TREATMENT.

The remedies for the different forms of acute disease of throat may be grouped together, for the medical treatment of all. The true homeopath is most fortunate from the fact that the whole patient, symptoms and conditions are to be treated, *and not the name of the disease*. To illustrate, *Belladonna may be indicated and curative* in diphtheria, tonsilitis, pharyngitis, and the same with any other remedy, without being specific, for any.

Therefore, in the earliest stage of the disease, when remedies are always most efficient, the suitable remedy may be selected and given with perfect confidence that whatever follows, whether diphtheria, tonsilitis, or pharyngitis, the severity and duration of the disease will be greatly modified. In the meantime and for obvious reasons no effort should be neglected to establish a *positive diagnosis at the earliest moment*.

Aconite—In the beginning or after a chill and fever, if the fever is accompanied by a dry, *hot skin; great restlessness, full, rapid pulse with great thirst for cold water*. Throat inflamed, with burning and dryness but no membranes. Chiefly the sore throat from *colds and after exposure to cold, dry winds*.

Apis—When throat becomes much swollen and *edematous*, giving the surface of the throat and palate the *appearance of a blister, with stinging pains* on swallowing, which is very difficult. *Suffocating breath-*

ing. Puffing about the *eyes and face*. Marked prostration, with great restlessness, generally worse five P. M. Often absence of thirst, with scanty urine.

In some of the most malignant cases of diphtheria and diphtheritic croup, *Apis* has proved curative; also in scarlet fever with the *characteristic throat, prostration and drowsiness*.

Arum Triphyllum—In the pharyngitis and laryngitis from colds especially. Symptoms of coryza with discharge from the nose *burning and rawness*. *Hoarseness worse from speaking*. Lips, mouth and throat sore, with burning.

Belladonna—Chiefly suitable in beginning. Great *dryness* in throat with *constant inclination to swallow*, which is very painful. Swelling and redness of throat, with sensation of choking. General symptoms such as sudden flushing of face, *drowsiness with sudden starting* from sleep; severe throbbing headache with throbbing in neck; skin hot and dry. Great aversion to light, noise, or the least jar. *Pupils dilated*. *Head hot, feet and hands cold*.

Lachesis—Much swelling of glands, worse on left *side* of neck. Cannot bear *slightest touch* of parts, even weight of clothes. Throat looks *dark or purple* instead of red; bleeds easily. Some dark, membranous deposit which may extend into the nose, with nosebleed. Lachesis reaches some of the more malignant cases.

Generalities: such as always worse *after sleep*, and great aversion to any clothing *about neck or chest*, sense

of suffocation *after every nap*. Useful in the most malignant diphtheria.

Lycopodium—In tonsilitis and some forms of diphtheria beginning on *right side*. Contracted feeling in throat; *cannot swallow*; fluids escape through nose; feeling as if a ball rose in throat; nose often stopped up, *with fan-like motion of wings of nose*; all worse *four P. M.*

Mercurius—If with the sore throat there is marked involvement of *the glands, especially the salivary, with profuse secretion of saliva*, *Mercurius* is generally the remedy; especially if tongue is swollen and thickly coated; all inclined to be worse at night. With the *salivation* there is the usual *offensive breath*.

Phytolacca—Throat *very sore, dry and dark-colored*, with *rawness* and pain on swallowing shooting through ears. Tonsils swollen. Tongue heavily furred and some excess of saliva but less than *Mercurius*. Generally worse on right side. *Backache and headache*; severe colds in *cold, winter weather*. *For further consideration of the above remedies and others, see index under quinsy, croup and scarlet fever*; or refer to Section on *Materia Medica*. Occasionally gargles between doses of the medicine may be resorted to. However, the main dependence must be upon the *carefully selected* homeopathic remedy. Alcohol diluted, or strong salt solution may be of service in soothing the pain in the throat, *Dioxygen* or *Hydrastis Canadensis tincture* diluted may be more efficacious in some cases.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ACUTE TONSILITIS.

(Quinsy).

Although this disease is not contagious it is liable to be mistaken for true diphtheria, especially in the early stage, hence until a positive diagnosis is made the patient should be strictly separated from all others. Fortunately the diagnosis can now be made with much certainty, however it may require from twenty-four to forty-eight hours time.

In this form of acute disease of the tonsil the *deeper tissues* of the part are all involved. It may follow other forms of inflammation in the throat or it may begin and remain confined to the tonsil. However this may be, it generally terminates in *suppuration* or the formation of an *abscess* which in due time ruptures, giving almost immediate relief.

SYMPTOMATOLOGY.

The early symptoms of all inflammatory disease about the throat are often quite similar. The painful, dry throat; the constant desire to swallow, notwithstanding the acute pain; yet in "Quinsy" the pain and swelling are *nearly always confined to one side.* The tonsil and surrounding tissues become *swollen, filling the affected side,* which renders the diagnosis easy. Inspection of the throat is often difficult on account of the stiffness of the jaw. The tongue is swollen and *heavily coated,* with *profuse flow of saliva* and *fetid breath.* The disease is more distressing than dangerous. Its duration depends upon the depth and progress of the suppuration, which is

far from uniform, and may require from four to eight days, during which time the patient may find it quite impossible to sleep or eat. The mouth and throat should be frequently cleared, by the free use of warm water, of the offensive secretions which are otherwise apt to be swallowed. The following remedies, used as indicated, are applicable to this and other forms of sore throat.

MEDICAL TREATMENT.

Aconite—Sore throat from *exposure to cold winds*, checking perspiration, followed by fever and thirst. Dryness, burning and stinging pains in throat.

Apis—Throat and palate look like a blister, with sharp, *stinging pains*. Throat feels full, with painful effort to swallow.

Belladonna—Throat feels very dry, with constant inclination to swallow, which is *painful*. Worse on *right side*. Feverish, with *throbbing in head and neck*. May be associated with scarlet fever or measles.

Baryta Carb—Enlargement of tonsils with every cold, with tendency to suppurate or ulcerate. Sometimes useful *after acute symptoms are past*, though *tonsils remain enlarged*.

Hepar Sulphur—After Acon. The fever is less, but throat worse, with inclination to *cough and perspire*. In Quinsy which inclines to an abscess. Tonsils swollen, feels as though there was a *fish bone pricking in parts*. *Saliva abundant*, breath offensive. *Hepar* hastens suppuration.

Mercurius—Throat and tongue seem swollen and

covered with saliva. Tongue heavily coated and difficult to protrude. Glands of neck swollen. Worse at night; perspiration profuse.

Lachesis—Throat and tonsils look dark red; worse on *left* side and from the *slightest touch* about the neck. Patient seems weak and drowsy, always worse *after sleep*.

Lycopodium—Pain begins on right side. Swelling slight. Symptoms not so violent as *Lach.* or *Bell.*, but persistent.

Phytolacca—Dryness with *burning in throat*. Swallowing very *painful*, on account of the *rawness* and *scalded feeling*, which is worse from *hot fluids*. Choking sensation with every swallow.

Sulphur—In cases inclined to recur often, or become chronic. Dryness, with sensation in throat as from a splinter or hair. Ulcers or canker about tongue and throat. See additional remedies under diphtheria and scarlet fever.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ACUTE FOLLICULAR TONSILITIS.

(Sore Throat).

CHARACTERISTIC FEATURES.

This is one of the most frequent forms of "sore throat." It is an inflammation of the *mucous membrane covering the tonsils*, which in its several forms simulates diphtheria. In some cases the *small, yellowish spots* that dot

the surface of the tonsils spread or extend over the entire surface, resembling a true diphtheritic membrane. However, the marked constitutional symptoms are *generally wanting*, and the usual bacteriological examination, which should always be made, establishes the diagnosis with much certainty.

The disease may be associated with scarlet fever or measles. The attack begins with creepy, *chilly sensations* rather than a real chill; this is followed by fever and more or less aching through the body. The throat soon becomes *dry and sore*, with frequent and painful swallowing. The tonsils appear considerably swollen and *red*, after which they soon become *dotted with small, yellowish-white spots*. Pain on swallowing grows quite severe, and often extends to the ear. In some cases the lymphatic glands of the neck become *swollen and tender*. The tongue has a slimy, thick coating and the breath is offensive. The fever generally continues for two or three days; when it gradually subsides and the local conditions of the throat rapidly improve, making a complete convalescence within a few days.

Whether contagious or not is still an open question. It often simulates a mild form of diphtheria requiring the culture test to decide—seldom is a diagnosis more important.

In the *early stages, at least* until a positive diagnosis is made, such cases should be isolated at once from the *other members of the family*. Young children should be put in bed and kept there during the febrile stage.

See remedies under *Acute Tonsillitis* and *Diphtheria*.

CHRONIC ENLARGEMENT OF THE TONSILS.

In scrofulous children or those who are constantly taking cold, or after an attack of scarlet fever, the tonsils may become permanently enlarged; resulting in closing the natural passage of air through the nose, which causes "*mouth breathing*" and all its attendant symptoms. The voice is also affected, having a "*nasal twang*." Enlarged tonsils are often associated with adenoid growths and catarrh, which when *long continued* produce defects in the bones of the mouth, and in deformity or pressing *outward of the incisor teeth*.

That a good percentage of the cases can be cured by homeopathic remedies has been proven by ample experience and it is equally true that some require an operation. When the medical treatment fails to reach the case within a reasonable time, a throat specialist should be consulted.

See treatment after *Adenoids*.

ADENOIDS.

The location of adenoids is in the post-nasal region, extending down on the walls of the pharynx occasionally visible back of the soft palate and *above the tonsils*. In the normal condition this region is well supplied with small *muco-lymphoid glands*, of such size and distribution that they in no way interfere with free nasal breathing. When from some exciting cause or predisposition these become diseased, enlargement follows which may fill the entire space, *rendering nasal breathing impossible*. Ordinarily the *enlargement is so gradual*, extending over months and years, that neither patient or parents are

impressed with the real situation. The disease *itself* is not malignant; is in fact of trifling importance *compared to the very serious complications* that result from their *presence*. It is generally the *after effects*, visible to the naked eye, *that arouse interest* on the part of parents which leads to proper, though belated, treatment.

SYMPTOMATOLOGY.

The nose and throat in a normal condition, are none too large for the admission of air to the lungs, and the slightest interference is not well tolerated. Mouth breathing is only one of *nature's emergencies* and if compelled for any length of time, will result in *impaired health, facial disfigurement, and a lack of mental alertness*. These three general conditions are noticeable in different degrees when a patient is presented for treatment. The pinched, *undeveloped* nostrils, the protrusion or prominence of the *upper incisor teeth*, the short, undeveloped upper lip, with *dullness of hearing*, one or all may be present. The growing child, embarrassed by the prolonged, unnatural mouth-breathing, has become literally deformed in facial outline and mental growth has been retarded; the danger of weak lungs preparing the way for easy development of tuberculosis must be classed among the ill consequences of neglect of treatment. Chronic enlargement of the tonsils is often found associated with adenoids, whether as cause or effect is not easy to determine. Both diseases result in partial closure of the nose and in *mouth breathing and have many symptoms in common*. *A constant tendency to take cold* from which recovery seems slow or is followed by catarrhal

troubles from which the patient *does not fully recover*, is another outgrowth of adenoids.

MEDICAL AND SURGICAL TREATMENT.

Many cases have come under my observation where in the earlier stages medicines have cured, but in the majority they failed or gave only *partial relief*. In chronic cases where the *hearing is impaired*, no time should be lost in obtaining relief through an operation. The cases that respond to treatment are those of an acute character with clear indications for some constitutional remedy. If marked improvement can be discerned within two or three months treatment an *operation should be deferred*, but if not it will prove a loss of time to continue. A competent specialist should take the case. Little has been accomplished by *local treatment*. The cases seem to call for *internal medication or an operation*.

Remedies that have been suggested in chronic enlargement of the tonsils may be considered in this connection.

Baryta Carb—This remedy has been the most effective in my cases. Mental condition *dull* and defective, glands of neck and throat *swollen*, *stoppage of nose and dull of hearing*. Child pale and shows *faulty nutrition*.

Calcarea Phosphorica—This remedy is a favorite with many competent prescribers. It reaches those cases where there is faulty bone development, in backward, scrofulus subjects who give evidence of a predisposition to glandular enlargement. It meets these constitutional defects curatively and in such cases heals the local disease like magic.

Calcareo Carbonica—Somewhat similar to *Calc. Phos.* A tendency to *grow fat, to perspire about the head at night.* A distention over the stomach or abdomen. Child very *backward* about walking, and the teething process *delayed.* Takes cold easily, cannot endure draft of cold air. Such patients need *Calc. carb.* with or without an operation.

Hepar Sulphur—This remedy may be useful after *Calc.* or before if the child is inclined to eruptions and open sores which *are slow to heal,* or if there is a *loose, rattling cough.*

Sulphur—May be given for a few days to start the *treatment.* Unhealthy looking skin, with *great aversion to a bath or to cold water.* Outward appearance indicates a tainted, scrofulous system.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ERYSIPELAS.

HISTORY AND SOURCES OF INFECTION.

Erysipelas is an acute, infectious disease, frequently transmitted by a third party whose hands or instruments have been in contact with erysipelas and afterwards with the *wound or abrasions of another;* or by direct contact of an abraded surface with the erysipelas patient. Hence the great risk in caring for the disease especially when the *skin is not in perfect condition.* *Erysipelas is a great foe to surgical and obstetrical work.* The danger of infection *in its fullest limit* has not as yet been definitely

established, hence safety must lie in the direction of *extreme caution*.

SYMPTOMATOLOGY.

Erysipelas is often ushered in without marked premonitory symptoms. A sense of chilliness or *creeping chills may precede*, and usually continue through the disease. Fever with a very high temperature, prevails during the height of disease. First appearance is often on the face, about the eyes, nose or ears. The skin at first looks *flushed*, and the patient describes it as *feeling stiff, like leather*. *Itching and burning are often intense*. Swelling follows, and about the eyes especially, the appearance is like a *blister*. The tendency is to spread rapidly from one part to another attended with a burning sensation which gave to the disease the appropriate name of "*St. Anthony's fire*." In an ordinary case, without complications, the disease is generally controlled by one of the three following remedies.

MEDICAL TREATMENT.

Apis—When there is swelling, like blisters, about the *eyes, with stinging pricking pains through the parts*.

Belladonna—If, in addition to the smooth, hot, red *skin, there is an intense, throbbing headache, eyes injected, pupils dilated, sleepy but cannot sleep, constantly starting in sleep, with moaning and dread of the least jar, noise or light, Bell. will both palliate and cure*.

Rhus Tox—This is the remedy most frequently indicated and its effect on the healthy presents a wonderfully similar picture to erysipelas. The *redness, swelling,*

itching and burning are all marked; the general surface of parts presents an *uneven, blistered* appearance instead of the smooth, red surface of *Bell.* The brain symptoms are less marked than *Bell.* *Rhus* has the swelling about the eyes similar to *Apis*, with the addition of *intense restlessness*, with *creeping chills, backache, cannot sleep, cannot lie still*; all very characteristic. The mouth and tongue dry, with redness of *tip of tongue*. Other remedies may be indicated especially when any complication arises, but judging from no small experience I can say that a careful differentiation of these three remedies used in time will prevent complications and accomplish a speedy cure. Wounds infected with erysipelas may and often do require such remedies as *Lach*, or *Ars*. If the disease involves the brain *Canth.* or *Bry.* may be as well indicated as *Bell.* or *Apis*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

SMALL POX.

(Variola).

HISTORY AND CHARACTERISTICS.

Variola, or small pox, is an acute and highly contagious disease. The invasion is marked by severe and repeated chills, followed by high fever; vomiting and *intense backache*. The eruption appears on the third day. At first, *small red spots, or pimple like eruptions appear on face* and gradually spreading over the body; three days later this eruption changes and the small, red spot takes

the form of a vesicle containing clear limpid fluid, or pus. After a few days this disappears and a yellow brown crust, or scab, forms which later peels off leaving in some places a permanent small pox scar, which is a source of permanent disfigurement.

The disease may be confounded with measles or chicken pox. However, neither have the severe backache and high fever; in fact the intensity of the symptoms of small pox are lacking, except the troublesome cough which points especially to *measles only*. Small pox is easily transmitted through the third person, books, papers or clothing and one attack prevents another.

With all the arguments against compulsory vaccination there seems as yet no other preventive; so in the interests of "*the masses*" it must be continued. (See vaccination.)

VACCINATION.

Since the accidental discovery that inoculation with vaccine or cow pox was a preventive of small pox, small factions have arisen here and there, opposing all vaccination. It is very difficult to understand how any could do so with even a slight knowledge of the history of small pox, as it has prevailed throughout the entire world. In *pre-vaccination times it was considered the greatest scourge of humanity*. It has, as the result of vaccination, become rare in all civilized countries. Historians, (notably Macaulay,) give a most *lurid picture of the ravages of the disease in early times*. The most rational explanation of anti-vaccination probably is that it grew out of the

results of using "*humanized virus*," truly an abomination, and also the *shifless, criminal way* it was employed in the process of vaccination. All is different, now. If the surface of the arm is properly prepared by scrubbing thoroughly with soap and water, rubbing afterwards with alcohol, and the virus called "*glycerinated*," and *hermetically sealed* be used, there need be no fear of any ill consequences except the *unavoidable sore arm, the inevitable price of protection*.

When the ivory points are used, the operation is simple and almost painless. By firm though gentle scratching of the skin with the ivory point, the outer skin is soon removed, leaving a red but *not quite bleeding surface*. The virus may now be rubbed well into the part and allowed sufficient time to dry. No other application or protection is necessary unless the sleeve or underwear is not fresh and clean, when a sterilized bandage may be used to cover the arm. On the third or fourth day a slight flush or redness at the point of inoculation makes its appearance. On the fifth or sixth day a small blister develops, with extended redness about the parts. On the eleventh or twelfth day the redness begins to fade away and the blister is gradually transformed into a dry scab which may fall off on the eighteenth to twentieth day. Some slight constitutional symptoms develop from the fifth to tenth day, such as slight chilliness and fever with loss of appetite and general indisposition, all of which pass away on the tenth to twelfth day.

Experience shows that not a few persons re-acquire a susceptibility to small pox, some years after a successful inoculation. To determine this in such case, and especially

during a threatened epidemic, re-vaccination seems necessary.

A few doses of *Acon.* may be used when febrile symptoms are prominent.

CHICKEN POX.

(*Varicella*).

Chicken pox is contagious in a milder degree than small pox, and of all eruptive diseases is the mildest; in fact there is little or no premonition of any sickness until the small *pimples* and *vesicles* appear, first in the *mouth* and *throat*, on the *scalp* and later over the body. Some fever and lassitude precede or accompany the disease. Where the eruption is general, with now and then a pustule forming with its crust or scab, the disease might be confounded with true small pox, but here again the symptoms of small pox (*backache, vomiting and high fever*) are absent.

Rest in bed and a light diet for a few days seem sufficient. If remedies are required see *Acon.* and *Gels.*

TYPHOID FEVER.

SOURCE OF INFECTION

Typhoid fever is an infectious disease, the causative agent being minute *micro-organisms* that find ready transmission through various media. Their presence in *drinking-water* is by far the most common source of infection. *Milk, raw oysters and articles of food* infected have contributed largely to the propagation of typhoid. The

statement that "*Food, fingers and flies*" have been busy spreading the disease is no exaggeration.

With definite knowledge of the *cause* of the disease and the *mode of propagation*, modern methods have done *much* to prevent its spread. The time is coming when a case of typhoid fever will be rare and the source of the same will be as carefully sought out as a case of small pox. In the meantime, the exercise of individual caution is important.

SYMPTOMATOLOGY.

In most cases typhoid fever is very *gradual in its development*. For several days or even weeks preceding the fever the patient complains of *headache, languor, loss of appetite, nights restless, and full of dreams*. Often there is nosebleed, severe backache, and diarrhea. Repeated slight chills or chilliness and heat alternating. *The temperature begins to rise, going a little higher each day*, until it reaches a maximum in the evening, of 103 to 105, with a drop of one degree during the night. The pulse is generally slow the first week. Later on, it becomes rapid and in severe cases weak and irregular.

The patient often becomes *delirious with inclination to sleep* which is frequently interrupted by loud talk, groans and excitement. The tongue is generally *coated and, like the lips, mouth and teeth, often covered with a dry, brown substance*.

Diarrhea, or constipation; the *former* in the more severe cases; abdomen *sensitive* to pressure, generally distended.

Complications with pneumonia often occur. Intestinal hemorrhage may occur in the *later stage* of the disease.

The duration of the disease is not uniform, much depending upon the severity of the attack and the constitution of the patient. From two to four weeks covers the duration of the fever, but as much more time is often required to complete convalescence. It usually attacks the more robust of adult life, occasionally children, but seldom the aged.

MEDICAL TREATMENT.

There are six leading types of fever remedies which, in my experience, have generally been adequate to meet all cases except those attended with some rare *complication or emergency*. Some one of the following will be found indicated in nearly every case. *Ars., Bap., Bry., Gels., Lach., Rhus Tox.*

Baptisia—The mental condition typifies a case of typhoid, especially the *early stage*. Ideas *confused*; wild wandering conversation; indifference and mental obtuseness; tosses about in bed *trying to get himself together*, thinking he is broken in pieces or that another self is in bed. *Mild delirium, with drowsiness in daytime*. Dull headache, brain and *eyeballs feel sore*. *Soreness all over the body, with sense of languor and fatigue*. *Face dull and flushed*.

Bryonia—Like *Bap.* more often indicated in the *early stages*. Violent *headache* and general *lame, sore feeling in the extremities*. Eye balls sore, with *aggravation of all symptoms from motion*. Desire to remain

quiet and sleep. *Dryness of lips* with thirst for large quantities of water. Dreams of, or talking about the *daily work or business*. Delirium and *desires to go home*. *Faintness on rising, nosebleed*.

Arsenicum—In the middle, later, or any stage with the following symptoms. *Great prostration, restlessness, thirst for small quantity of water very often*. There may be vomiting, especially *after drinking*. Diarrhea with symptoms of collapse. Troubled with constant fear of death or of *being left alone*. Face may be *pale*, or flushed. Mouth and *tongue dry*, with burning thirst. Burning in stomach, with aversion to all food.

Rhus Tox—Rhus may be indicated at any stage of the disease. The mind becomes confused and clouded, so that mental operations are difficult. The *tired, weary, languid feeling as in Baptisia, is marked*. More or less *aching in all parts*, especially the *back* and the *eyeballs*. There is the *constant restlessness*, similar to *Arsenicum*; but the prostration and thirst, are not so marked. Tongue *very dry*, often *brown and cracked*, with a peculiar, triangular, *red tip*. Sleep full of dreams of *work and fatigue*, with constant *tossing about*.

Lachesis—Is adapted to a *low type* of fever, with delirium, constantly talking in a rambling, disconnected manner. There is considerable *prostration* and restlessness. The tongue is *dry, red or dark, and is protruded with great difficulty*. The stools may be black, bloody and very *offensive*. Patient always seems *worse after sleep*, throwing clothes aside and tearing everything *loose about the neck*.

Gelsemium—Useful in the *earlier stages and milder forms* of fever. *Headache, drowsiness and lassitude.* Great heaviness of *eyelids* and *lame, sore eyeballs.* Inclined to chilliness. *Fever without thirst.* Pain in *base of brain* with drawing of head *backward.*

Arnica—May be indicated in early stage where there is great *soreness and lameness with tendency to stupor.* If awake, complains of nothing but the "*hard bed.*" *Tongue dry and red.* Involuntary discharge of *urine and stool.* Feet cold and head hot.

Apis—There may be *stupor,* with sudden *starting and screams,* especially with *children.* Fever but no *thirst.* Urine very *scanty.* Tongue dry and *difficult to protrude.* Face *bloated,* breathing oppressed, with muttering delirium.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

MALARIAL FEVER.

HISTORY AND SOURCE OF INFECTION.

Malarial fever is a disease of comparatively rare occurrence, except in localities where conditions are favorable for the production of a specific micro-organism. Low, marshy land poorly drained, and newly stirred soil exposed to heat and moisture prove culture beds for such micro-organisms. The disease is especially prevalent in hot or tropical climates, or in new sections where the virgin soil is being cultivated; and with the pollution of rivers, wells and water supply. Hence the prevalence of

the disease epidemically in certain localities which are termed "*malarial regions*."

Up to recent times, the foregoing was considered an adequate explanation of the origin of malarial fever. In the light of our present knowledge, it must be admitted that those theories were to say the least, *very incomplete*. Sufficient proof is now at hand to show that many if not all cases of the disease are directly due to the *bite* of a certain species of mosquito *primed with the malarial parasite*, which simply means *practical inoculation*. What has been previously said as to the supposed origin or *cause of malaria* is equally true as applied to the origin or *breeding place of mosquitoes*, and herein lies the probable explanation of the perpetual fallacy. That the mosquito is a *go-between* amongst the sick and the well, the *active agent in inoculation*, is the latest conclusion. The most elaborate experiments have been made to demonstrate the truth of this statement. Assuming its correctness, precaution becomes the most *rational procedure*. If a residence must be maintained in a malarial region, adequate protection by means of screens must be had, especially at night. The near-by *cess-pool, cistern, or any stagnant pools should be obliterated*, or sprinkled over with kerosene or coal oil, which seems *destructive of mosquito life*. Patients suffering with malarial fever, should be separated from the well by means of screens. The mosquito, having drawn blood from the patient, is primed, ready for the distribution of infection. (See "prevention" under yellow fever.)

SYMPTOMATOLOGY.

The earliest symptoms are headache, great lassitude, loss of appetite with a pale, anemic appearance. If, with such symptoms, a *marked periodic disturbance occurs*, either every day or every second day, a malarial infection may be *suspected or affirmed*. Following in the usual order of development is the chill, fever, and perspiration; constituting a typical paroxysm which unless interrupted by treatment, recurs after an interval of 24 to 48 hours. When feasible, the individual suffering from malarial infection should *change to a non-malarial region*. The long-continued effects of malaria often produce profound anemia and organic diseases, or become confounded with other types of fever, and incipient tuberculosis.

MEDICAL TREATMENT.

During the interval, as during the paroxysm, all conditions and symptoms of the patient should be carefully noted, and whenever a remedy can be found that covers the *totality of the symptoms*, a cure may be anticipated. This is not always an easy problem; hence physicians of all schools are often liable to fall back upon the classic remedy, *Quinine*. This remedy when indicated homeopathically, will cure in very small doses and in large doses it will in most cases arrest the paroxysm of chill and fever, but does not in all cases do more than palliate.

The therapeutics of malarial fever have always been a bone of contention, doubtless due to the causative factor of the disease. Here experience should render an account. Approximately two-thirds of the cases treated by the writer, have been cured by the 6th, 30th and 200th

potency. Another one-third, without definite guiding symptoms, was treated with *crude medicines of the usual dose*. Again, where Quinine has failed, the potentized remedy, selected according to symptoms has often cured promptly. The following remedies have been my chief reliance. They are mentioned in the order of importance. Each one should be carefully reviewed in Part III of the *Materia Medica*.

Arsenicum, Gelsemium, Eupatorium Perfoliatum, China, Ipecac, Nux Vomica.

Considerable importance is placed upon nourishing, wholesome food to sustain the strength, and *cleanliness of the surface of the body by frequent bathing*. Also, during or even after convalescence, the patient should avoid *fatigue of any sort, hot sun and night air*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

REMITTENT FEVER.

Remittent fever, sometimes termed bilious fever, or gastric fever, is chiefly prevalent with children. It is characterized by a high fever which continues for some hours, after which an uncertain interval of from six to twenty-four hours occurs before its return. As a rule, no distinct chill precedes the fever. In some cases, the stomach becomes involved in such prominence as to resemble gastritis. In other cases, the liver seems to be the chief center of disturbance, giving rise to nausea, vomiting bile, and later, Jaundice. Occasionally, from

neglect of treatment, the case, in the second week assumes a typhoid state, with continuous fever. Remittent fever has some features of malarial infection, and has been thus classified. The duration of the disease is from 7 to 14 days, and the prognosis is favorable. The patient should be kept quiet and in bed. The diet restricted to light, liquid food.

MEDICAL TREATMENT.

Aconite—When there is *dry, hot skin*, great *restlessness, with constant thirst* and no appetite. The mind filled with fear and agitation.

Arsenicum—Gastric symptoms prominent. *Nausea and vomiting, especially after drinking water*, which is craved above everything else, but *takes only a swallow at a time*. The Arsenicum patient is usually *very weak* from the outset, and the mind filled with alarm and anxiety. Fear of death and of being left alone.

Chammomilla—Adapted to children who are *irritable* without cause and worse at night. *One cheek red*, the other pale. *Perspire* freely, but no relief.

Cina—The fever is attended by gastric disturbance and *offensive breath*. Child constantly *rubbing or picking the nose*, with symptoms of worms.

Child very *irritable, cannot bear to be touched*. (See Anti. C., Cham.)

Gelsemium—Fever *without* thirst. Child weak and *drowsy*, with much headache, especially about eyes or back of the head. Eyelids heavy or closed.

Ipecac—Constant *nausea or vomiting* green fluid, with pain about the stomach.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

YELLOW FEVER.

In this country, only certain localities along the south-east coast and the Gulf of Mexico have been subject to this disease. It is essentially a disease of *warm climates*, often prevailing in the West Indies, West Africa and along the borders of the Mediterranean. It is an acute, infectious but non-contagious disease.

SYMPTOMS AND COURSE.

The beginning is often abrupt. A distinct chill followed by backache and headache. This is followed by high fever, which may continue without remission for two or three days. The usual symptoms of intense thirst and hot skin predominate. Nausea and vomiting often occur on the second or third day; the bowels as a rule, constipated. The face has a *peculiar flush*, the eyes look fiery, and delirium is often present. After the active febrile symptoms, the face and skin often take on a *yellow, jaundiced* appearance which doubtless gives rise to the name of the disease. Some cases beginning at this point make recovery, while others pass into what might be called a second stage. Instead of gaining strength the patient becomes exhausted, the pulse rapid and weak, the tongue dry and brown.

It is at this stage that the so-called "black vomit" may

occur, which like other hemorrhages from different parts of the body, is due to a form of blood poisoning. The mind becomes dull and apathetic. The fatal cases terminate on the fourth to seventh day, and the end is generally preceded by hiccough, cold sweats, involuntary discharges and convulsions.

The prognosis except in the mildest case is unfavorable, especially of those who pass into the stage where "black vomit" occurs, which of itself is a fatal sign. Under modern favorable conditions, the mortality rate should be greatly reduced from earlier figures of 20 to 25 per cent.

PREVENTION AND TREATMENT.

It now seems generally admitted that the chief source of transmission of yellow fever from the sick to the healthy, is through the medium of a certain variety of mosquito. Acting upon this conclusion, the disease has in several epidemics been easily controlled. In the city of Havana, where it had prevailed for a century, it was soon exterminated by destroying the culture beds of mosquitoes by pouring a small quantity of oil (Petroleum) into all such places as could not be perfectly drained, as stagnant pools, etc. The next step was to protect all yellow fever patients from the visitation of the mosquito. This was accomplished by providing all doors and windows with mosquito screens, besides which, patients in or outside of the hospitals were surrounded with fine mosquito netting. Receptacles containing water should be protected and all local sanitary conditions be carefully regulated.

MEDICAL TREATMENT.

Aconite—In the milder cases where following the chill, fever, hot skin, thirst and restlessness are all prominent. First stage of the disease.

Arsenicum—*Exhaustion marks the attack from the start.* Nausea and vomiting, *cannot retain water on stomach* though craving it constantly yet taking only a swallow. Restless, can sit or lie in one place but a moment, eyes and face sunken and pinched, symptoms of collapse. *Ars.* would seem to be indicated in many cases.

Belladonna—In some cases where there is *brain involvement*, with rage and excitement. *Face flushed, pupils dilated, sleepy* but cannot sleep, constant startings from the least noise or jar.

Carbo. Veg.—For the development of the *second stage; cold, livid face and extremities, circulation at a low ebb*, pulse weak, wants air and *constant fanning*, yet surface cold and clammy in collapse.

Gelsemium—After *Acon.* if fever continues with pain in base of brain, *drawing the head backwards*, inclined to convulsions.

Lachesis—Has proven a useful remedy in some of the more *malignant cases.* Hemorrhages of *dark-colored blood, great prostration, cannot endure any clothing about neck or abdomen.* Tongue dry and *trembling on protrusion.*

Rhus Tox—*Typhoid like*, the patient is drowsy, yet tossing about, complaining of backache and pain in limbs

and head. Mouth and *tongue dry*, delirium and dreams of *hard work and fatigue*.

Verat. Alb.—After vomiting and purging the patient becomes exhausted, *with cold sweat on the forehead, face is cold*, sunken and resembles a *Carbo Veg.* condition. Pulse rapid and weak. Further indications for the foregoing remedies may be found under the treatment of cholera morbus. Also see *Materia Medica*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CHOLERA ASIATICA.

True Cholera Asiatica seldom prevails in the U. S. A. This is particularly true of the northern portion. However, as late as 1831 to 1854, it extended its ravages over most of the northern cities, resulting in a mortality that was appalling. Fortunately there is much unanimity as to the cause of the disease and still more fortunate is the knowledge how to prevent the spread of the infection.

SYMPTOMS AND TREATMENT.

The disease begins with a diarrhea, in most cases painless and watery. The discharge soon resembles "rice water" and is accompanied by profound prostration. In a few hours vomiting occurs, first of the contents of the stomach and later of watery substances slightly tinged with yellow. The weakness of the patient increases rapidly and the voice becomes weak and husky. The discharges become involuntary, the secretion of urine often ceases. Insatiable thirst sets in, with great pain and

anguish in the chest and pit of the stomach, attended by cramps in the stomach, bowels, and calves of the legs. Before this, the appearance of the patient has greatly changed. The lips, face and extremities assume a bluish color, the eyes are sunken and the nose pinched. Cold perspiration stands in drops on the face, the surface of the body become icy cold, and the pulse so weak that it can scarcely be counted. Often there is dimness of vision, with roaring in the ears and extreme vertigo. In severe cases all this may take place in a few hours and the patient be no more. In milder ones the period of collapse may not occur for 24 to 48 hours. The non-fatal cases, or those that respond to treatment, will soon show signs of reaction, the pulse improves, coldness gives way to warmth of surface, the vomiting and purging become less frequent.

SOURCES OF INFECTION AND PROPHYLAXIS.

The disease is *highly infectious*, and like all such diseases has its specific micro-organism, which in cholera is the comma bacillus. This retains its vitality in water for some time; in fact it may be considered as *practically a water-borne disease*. On this account it often escapes quarantine through *running streams having their sources in cholera infected districts*, thus indirectly contaminating water tanks, milk supply, etc. It seems a fact well established, that the principal source of infection is through food and water, chiefly the latter, hence the greatest precaution should be exercised in this direction; first to guard in every possible way against the infection, hence caution of all articles taken into the mouth,

whether fruit, food or drink. The common house-fly, for instance, has facilities for distributing the germs of disease and should be shut out. In time of danger no one can guarantee that articles of food and drink are free from the presence of cholera bacilli, therefore the rule should be to *eat no uncooked food and drink no water that has not been boiled*. This simple precaution is all comprehensive and always available for those who would shun danger. Cold foods, meats and sweets that have been for some time exposed after cooking, possess elements of risk unless very thoroughly protected. Such sane precaution and care should be taken in a cheerful way, and anything whether in conversation or otherwise, that creates a constant state of dejection and terror, *depressing the system and increasing susceptibility to disease, should be avoided*. *Personal cleanliness and strict sanitary regulations* in all surroundings are of much importance, especially in warm climates.

MEDICAL TREATMENT.

No matter how mild the attack, the patient should be placed in bed and isolated from the healthy, except the nurse, who by taking care in cleansing the hands after disposing of all soiled linen, stool and vomited matter, need have no great fear for personal safety. *All stools and vomited matter should be subjected to the action of a ten per cent solution of carbolic acid*. Plenty of fresh air is beneficial to patient and attendant, alike. Only the lightest liquid food is admissible at first. Small quantities of tepid water may be allowed. If vomiting follows the use of either food or water, it should be temporarily

discontinued. Nutritious broths, the white of one egg, diluted brandy or whisky may be used. If one of the following remedies is selected with care and given early, the results will fully satisfy the most sanguine. Only a few of the principal and well *tested remedies will be mentioned here.*

Arsenicum, Veratrum, Camphor, Ipecac, Carbo. Veg., China.

Arsenicum—May be indicated in the first stage when with the diarrhea there is a persistent thirst for cold water which is satisfied *by one mouthful.* The patient is exceedingly restless, *tossing about, cannot stay in bed,* full of fear, fear of death and of being left alone for even a moment. Burning, cramps and pain in stomach and bowels, much relieved by *hot applications.* Great *exhaustion from the very first.*

Veratrum—With the nausea, vomiting and profuse, watery stool there is *cold sweat on the forehead,* face pale, *cold, pinched expression,* lips and face *bluish.* Fainting and weakness after stool. *Cramps in abdomen and legs.* Thirst for large quantity of cold water. The *cold perspiration,* cold surface, the “*rice-water*” stool, cramps in calves of legs, point strongly to *Verat.* which is similar to Camphor.

Camphor—*Icy coldness* of the face and surface of the body, exhaustion, *pulse weak with all symptoms of collapse.* Stool watery or dark and often involuntary. A vacant, staring look, *lips drawn and livid;* presenting a deathly appearance. Camphor produces in health such a picture. In Cholera it has proven *curative* in the most fatal forms of the disease.

China and **Carbo. Veg.**—Less frequently used and are more apt to be called for in *the latter stages* and in cases that have run on for some days, not having been controlled by the more common remedies. The stools of *Carbo Veg.* may be dark, watery, putrid and involuntary. The face is *pale and livid*, the *breath cold*, the mouth filled with stringy saliva. *Much gas* about stomach and bowels. Hiccough, *must be fanned; must have air*, yet surface of face and body cold. Stupor, with less vomiting, stool and cramps than *Verat. or Arsen.* The patient seems gradually worse and exhausted by the continuance of the disease.

China—Conditions similar to *Carbo Veg.*; though on the surface less alarming. The *loss of fluids leaves the patient very weak*, it may be from *hemorrhage, frequent stool, or profuse, long-continued perspiration.* Distention and fermentation in the abdomen. The stool may be painless, profuse, watery and involuntary. There may be *ringing in the ears and dimness of sight.*

Croton Tig—The yellowish *water, painless stool, pouring away suddenly with force*, aggravated after eating or drinking are sure indications for *Croton Tig.* Many of the more violent symptoms of other remedies are absent.

A preventive remedy recommended by no less an authority than Prof. C. Herring, and one that has proved successful in several cholera epidemics, is; “Dust a pinch of pulverized sulphur in each shoe or stocking, repeating the same two or three times per week.”

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under “Directions.”]

DISEASES OF THE RESPIRATORY AND CIRCULATORY SYSTEMS.

CORYZA.

(Acute Rhinitis.)

Coryza is an acute inflammation of the mucous membrane lining the nose and turbinate surfaces and is synonymous with acute rhinitis. The inflammation may, and often does, extend by a continuous membrane from the nose to the throat, larynx and bronchi, giving rise to diseases elsewhere considered. A form of coryza precedes the eruption in measles, and the *earliest symptoms* of influenza are often like those of coryza. It is one of the most frequent complaints calling for medicine, and the right remedy given early may prevent a succession of ailments which are far more serious than the coryza. The most common form of the disease is that which *follows exposure* resulting in "taking cold."

SYMPTOMATOLOGY.

Beginning with frequent sneezing which is followed by a free, watery discharge from the nose, we have two signals easily recognized. Soon the nasal passages become red and inflamed, with more or less tickling, burning and irritation frequently extending through to the

lachrymal duct and resulting in profuse lachrymation with redness of the eyes. Gradually, after two or three days, the discharge changes to a watery mucus which often excoriates the adjacent surfaces. Frontal headache sets in early and often continues for some days unless relieved by remedies. Acute rhinitis uninterfered with often blends into sub-acute catarrh, and finally the foundation is laid for chronic catarrh with all its well known concomitants. This is especially the case with children *suffering from adenoids and enlarged tonsils*, making a combination often met in every-day practice. This gives rise to "Snuffles" or stoppage of the nose, with "mouth-breathing" at night, mucus secretions in nose and throat with more or less dull frontal headache, physical and mental lassitude. Such cases usually respond to homeopathic treatment. The *early administration* of the indicated remedy for coryza will often end a "sea of troubles."

MEDICAL TREATMENT.

Allium Cepa—With the coryza there is cough and hoarseness, constant *sneezing with profuse watery*, acrid discharge from nose; bland but *profuse lachrymation*, smarting and *burning in eyes*. Coryza seems worse in *warm room*.

Arsenicum—When there is, with the coryza a burning heat in nose with watery discharge; patient feels *weak and inclined to be thirsty*, with general indications for *Ars.* as in influenza.

Belladonna—When there is slight discharge, the nose seeming obstructed; parts feel *dry even into the*

throat, with head *throbbing*, eyes sensitive to light, *throat dry and sore*.

Chamomilla—In children, considerable heat in head, *one cheek*, red, the other pale, very fretful and only pleased or quiet *when being carried*. Worse at night.

Dulcamara—Sudden changes in weather *from hot to cold*.

Gelsemium—When with the cold there is a *general lassitude*, chilliness, with *dull headache and drowsiness*; the eyelids seem *heavy* and *eyeballs lame and sore* with some sneezing and discharge from nose and eyes.

Euphrasia—*Profuse, watery, acrid tears* which incline to excoriate the lids and face, *eyes inflamed, red*, lids agglutinated, with discharges, photophobia worse *from lamplight*, *profuse, bland fluent discharge from the nose* with *sneezing*, worse *at night* and lying down. The discharge from the eyes in *Allium cepa* being bland while in *Euph.* it is *acrid and poisonous*; the reverse being true of the discharge from the nose. Hoarseness with tickling cough.

Eupatorium Per.—In addition to the coryza symptoms sneezing and headache, there may be "*aching in the bones*," *backache*, chilliness and *nausea*, assuming more violent symptoms of influenza.

Mercurius—Eyes and nose symptoms similar to *Ars.*, only less severe and always *worse at night*, *throat sore* with *much saliva*, considerable lameness in muscles and *aching in bones*, *profuse perspiration*.

Rhus Tox—Colds following *getting wet* or from

going in water with aching and lameness over the body, especially back and eyeballs.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CHRONIC NASAL CATARRH.

The prevalence of this affliction in its multifarious forms from the mildest to the most repulsive is not exceeded by any other ailment. Numerous causes are operative; *coryza, neglected cold, unfavorable climate, damp, poorly ventilated rooms, occupation, disease of tonsils and adenoids, etc.* In the face of all these obstacles, medical treatment has been far from successful. In addition to the above, there are not a few cases supposed to be catarrhal, which are due to growths and deformities in the nasal passage. The general practitioner is not usually prepared to diagnose all of these cases; so it has come to pass and I think fortunately, that the specialist is called in to help clear up the *more obscure* and difficult cases.

Some cases can be cured by medicine, some by local treatment, while others being due to causes practically mechanical, require operative measures. Every case must be dealt with on its merits, and thus managed the treatment of so-called nasal catarrh may be considered reasonably successful. The first step to the accomplishment of this would seem to be a *correct diagnosis*. In uncomplicated cases and those growing out of colds much can be accomplished by giving the indicated remedy. usually in an ordinary case of catarrh there is a free dis-

charge of yellowish-white, mucous, even purulent matter, generally worse in the morning. At times the discharge ceases and the nose is stopped up, with heat in the nose and head. A form of so-called dry catarrh gives more discomfort than any other and leads to obstruction in the nose, with "mouth-breathing" which is most detrimental when long continued. The following remedies, mentioned in the *order of importance*, should be carefully studied in the section on Mat. Med, Part II.

Nux, Puls., Hydrastis, Calc. carb., Sang., Sulph.

In seeking out the indications for each remedy in Part III, not only the "nose symptoms" but also the head, throat and general indications should be carefully read. See remedies under "Coryza."

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

HAY FEVER

Concerning the cause of *Hay Fever* many divergent views have been expressed, and the same holds true as to its treatment. Some have maintained with some show of reason that it was caused by bacteria, in fact this conclusion was for some time quite generally accepted. More recent experiments point to plant-pollen as the source. It is at the season when the pollen matures that hay fever prevails. The plants which mostly supply this pollen are commonly known as "ragweed" and "golden rod." The former is by far the more prolific. Other plants and vegetation may in a lesser degree furnish the pollen. The pollen theory seems to have displaced that of bacteria,

and is at the present time the most plausible one to offer and the one now generally accepted. Based upon this theory some experiments were made with pollen toxin, and finally a remedy was prepared called Pollentine, which in the hands of some careful observers has proved to be of value, curing some and relieving the majority of cases. Individual predisposition to hay fever has also been a matter of much speculation. Not a few believe it to be due to a highly nervous or neurotic temperament. However that may be, it is a certain fact that some individuals show an extreme susceptibility to the pollen toxin, whenever it comes in contact with the mucous membrane. The annual attacks make their appearance with much precision, and any slight variation in dates is due to the condition of vegetation.

The early symptoms resemble an ordinary coryza, slight tickling in the nose and eyes followed by sneezing, which is soon followed by profuse watery discharge from the nose and eyes. The eyes become very red, the lids swollen, attended with itching. The mucous membrane of the nose becomes inflamed and swollen, causing obstruction, so that breathing is often carried on through the mouth, resulting in a dryness preventing sleep. General symptoms may be headache, depression, ill-humor and exhaustion. Asthmatic symptoms develop in some cases, which are very distressing. More or less fever prevails during an attack. All of these symptoms may be greatly aggravated at any time by exposure to night air, by railway journey, or by lingering in a locality where vegetation is over abundant. The pollen theory finds substantial support from these facts, as also from the

fact that patients often find relief in an ocean voyage, or by going to the mountains where there is the minimum amount of vegetation. The White Mountains, Green Mountains, Catskill and Adirondacks, all have found their advocates. Not much can be said of real cures by homeopathic medicine. Palliation by the use of *Euphrasia* and also by *Allium cepa*, is quite possible. Other remedies may be indicated by some special or general symptoms, especially *Ars.*, and *Gels.* A careful comparison of these remedies by referring to each in Part III. *Materia Medica*, will often reward the prescriber and afford at least partial relief to the patient. Well-to-do patients who are not inclined to spend their time at sea, should try to find some location where perfect immunity is obtainable and return to it annually. Some are exempt in one place, and others find there no relief. The annual taxation of the system by this exhausting disease is no trifling matter, and all who can make their escape are wise to do so, rather than pay the penalty of "enduring what can be avoided."

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ACUTE CATARRHAL LARYNGITIS.

The larynx is the upper portion of the respiratory tract, the entrance to which is opened and closed by the epiglottis, and in which are located the vocal chords. During the very act of speaking, and breathing, the functions of these parts are called into action. This, with the inhalation of the multiform substances in the air and

the close contact with the extremes of temperature, makes this portion of the human anatomy one of the most *intricate*, as well as the most exposed and liable to disease.

Acute laryngitis is by far the most frequent disease of the larynx. The majority of common colds either attack or invade the larynx in their course downward from the nose and throat to the bronchial tubes and lungs, often giving rise to a mild form of laryngitis. The chief causes of acute laryngitis are exposure *to cold, excessive and improper use of the voice in public speaking and singing, and tobacco smoking*. The latter in some cases produces a form of laryngitis with hoarseness and cough which is *first acute*, then *sub-acute*, and *finally chronic*.

SYMPTOMATOLOGY.

The symptoms are not numerous or very marked. The hoarseness and *dry, semi-croupy cough* which is present in the *early stage* of the disease, is later, under proper remedies, followed by some secretion and expectoration. Even slight knowledge of the parts involved should convince any one of the importance of avoiding *exposure and use of the organs during an attack*, which ordinarily, under treatment, is of short duration.

In the case of children this disease simulates croup in many respects, and is often confounded with that disease. The remedies for each are also *similar* and should be referred to before making a prescription.

MEDICAL TREATMENT.

Aconite—After exposure to *dry cold wind*, followed by

hoarseness, dry cough and soreness in larynx. *Fever and thirst* may be present, cough *may be croupy*.

Belladonna—With the dry cough the throat becomes *dry and sore*, with *constant inclination to swallow*. Throbbing headache and throbbing in the carotids; face flushed with cough.

Arum—Loss of voice from over use in *singing or speaking*. *Voice hoarse* and changeable with *soreness in larynx*, worse after exposure to *cold winds*.

Causticum—*Hoarseness and loss of voice*. Scraping rawness in throat. *Cough*, with *slight mucus very difficult to expectorate*.

Hepar Sulphur—Some *wheezing and rattling* in larynx with cough, somewhat croupy, *worse from least cold air*. Sharp pain in throat or larynx like a fish bone. Later stage of disease, with inclination to *perspire with every coughing spell*. Sense of suffocation or as of *dust or fumes in larynx*.

Kali Bichrom—Croupy cough worse 3 *A. M.* The expectoration, if any, is *stringy and tough*. Voice hoarse with some rattling of mucus.

Lachesis—Always worse *after sleep* and from the slightest touch about the neck, cannot tolerate any clothing *about neck*, cough dry and face almost livid.

Nux Vom—The *mental and physical* conditions are important. Overworked or debauched. Bad effects from *tobacco smoking* and *intemperance*. Cough *dry and spasmodic*. *Worse after any mental effort*.

Phosphorus—Much *hoarseness*, with *dry cough* which

is much worse from *use of voice* in *speaking* or *laughing*, or from *cold air*.

Rumex—Much coughing with *tickling and irritation in larynx*. Worse on *lying down* or from *inhalation of cold air*.

Spongia—*Dry, barking, croupy cough. Sudden starting from sleep, with sense of stoppage in larynx with suffocation and dyspnea.* The attack is decidedly *croupy*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CROUP.

Croup, although it frequently attacks some children through predisposition, seldom if ever occurs *without previous exposure to cold*; either indoors, perhaps *while the child sleeps*, or by *sudden out door exposure to cold, damp atmosphere*.

Generally without previous symptoms, the child awakens with a peculiar *dry, "barking," choking cough* which if once heard will never be mistaken for any other cough. Marked dyspnea accompanies the cough, which in severe cases, is nearly constant.

Such may be considered as simple, uncomplicated cases of croup, which usually yields promptly to proper treatment, the mortality being very small.

A far more dangerous form is that which develops out of or is complicated with diphtheria, with the formation of *membrane in the larynx*. This presents an alarming condition requiring the most *prompt and efficient*

treatment to prevent a rapid and fatal termination. Owing to the similarity of the symptoms, especially the croupy cough, it is not always possible even for the experienced physician, to determine the *exact nature of the disease*. Therefore no layman should attempt to manage a case of croup that fails to yield very promptly to remedies. There is an interval of time before a physician arrives, *when the indicated remedy may and should be given*. Again; where there is an absence of any sore throat, and a physician is not easily obtainable, the proper remedies given early may be used for a few hours with reasonable hope of success. Should the cough and difficult breathing continue into the forenoon, there should be no further delay in seeking medical aid.

In the mild, spasmodic, non-membranous form of croup, the recovery *is prompt*, although the child should be kept for some days indoors and in a *warm room* both day and night.

In the more malignant, membranous, diphtheritic form, the recovery is more prolonged; the features of this disease will be more fully treated under diphtheria.

MEDICAL TREATMENT.

A very few homeopathic remedies which have been used for a century, have been sufficient to cure promptly nearly all cases of simple croup. The symptoms are few and *well defined*, and the few remedies named seem to cover wonderfully well the great majority of cases.

Aconite—Often the *first* and only remedy required. The child has been *exposed to cold* or has taken cold at

night. Wakens suddenly with *dry, barking cough, difficult breathing, very restless, frightened by sudden attack and fears death is imminent, very nervous and mentally excited. Feverish, full pulse, skin dry and hot.* Thirst for cold water.

Belladonna—When the cough is dry, *face flushed* and very nearly scarlet, with *drowsiness, jumping and sudden starting from sleep.* Skin very dry and hot.

Hepar Sulphur—After *Acon.* has subdued the more violent symptoms, and where there remains a croupy cough *with rattling of phlegm, some dysnea, and a tendency to perspire profusely with the coughing, Hep. Sul. will relieve, and complete the cure.*

Spongia—The cough is *similar to Acon., but much less fever, restlessness and anxiety.* The *barking, dry rasping cough is almost constant,* with the absence of any looseness, which is the *reverse of Hep. Sul.* A practice not uncommon with some physicians, is to give the *Acon.* and *Spongia* in alteration, a method not without much success; but the better and ideal way is to try and *find and use the single remedy.* See *Materia Medica,* the following remedies: *Kali Bi; Ipec; Lach; Tar. Em.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

APHONIA.

(Loss of Voice, Hoarseness.)

Loss of the voice may be transient or permanent. From colds, laryngitis, and from *excessive* use of the voice.

Permanent hoarseness comes from lesions in the larynx, involving the *vocal cords*. It may be ulcerative, paralytic or syphilitic in its character, also a common form of hoarseness that precedes or attends tuberculosis. There is another form of hoarseness which has been designated "clergyman' hoarseness" or "*clergyman's sore throat*," one that is common to all public speakers. In these cases not only the larynx and vocal cords are involved, but the entire throat becomes irritated and after any prolonged effort at public speaking, the hoarseness is prominent. It may be caused or aggravated by an improper use of the muscles of the throat, resulting in overstraining the parts. Nervous and hysterical subjects are often worried about hoarseness which is simply functional and often disappears when the mind is interested in something else.

MANAGEMENT AND TREATMENT.

By the public speaker or singer whose voice is a *valuable asset*, too much caution cannot be exercised about using the voice *during an attack of hoarseness*. If it is acute, as from cold, it will pass away much sooner if the vocal cords are allowed to *rest for a brief time*. In cases from overstrain in public speaking or singing which incline to return after every effort, a *much longer rest* of the *vocal organs* is necessary. Some cases may be cured by instruction as to the proper use of the voice in public speaking. Such cases will not receive much benefit from rest or medical treatment. Each case must be managed and treated on its merits. If the general condition of the patient indicates tubercular disease, the larynx should be carefully examined by a specialist.

Obstruction of the nose from any cause, will change and embarrass the action of the vocal cords and should be corrected, either by remedies or an operation. The remedies outlined under laryngitis and colds may be referred to here.

Aconite—*Acute laryngitis*, with hoarseness the result of exposure to *cold wind*. Some fever and thirst.

Arum Triph—This remedy has been most useful in the sore throat and hoarseness from *public speaking*. A sense of *rawness* in the mouth and throat extending to the *nose and larynx*, with symptoms of *coryza*.

Belladonna—In addition to hoarseness the whole throat feels *dry and sore*, with inclination to swallow, which is quite painful. After cold with throbbing headache.

Causticum—Also usefulness in hoarseness of *public speakers and singers*. Dryness, with loss of voice, cough *with scanty, difficult expectoration*. Pain and soreness streaks through the larynx with every cough.

Hepar Sulphur—With the hoarseness there is considerable mucus in the *larynx* with cough which is sometimes loose and sometimes croupy. Dyspnea and cough on the slightest exposure *to cold air*, generally worse towards morning and after croup—with *free perspiration*.

Phosphorus—Perhaps no one remedy is given so often as *Phos*. The voice is *husky* with sense of *dryness* in *throat* and soreness in larynx, *worse in morning*.

Dry cough worse on *using the voice, laughing or talking, or from cold air.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

BRONCHITIS.

While less exposed to cold and irritation and of a more *passive function* than the larynx, the bronchial tubes are subject to much the same diseases; hence the *grouping of remedies under one head*. In cold climates, subject to great variation from cold to warm, from dry to moist, bronchitis is one of the most prevalent diseases; whereas in mild, equable climates it is far less frequent. Young children, *even infants*, are quite as often attacked as adults, and the mortality is quite large in those cases, unless *early treatment* is properly administered.

SYMPTOMATOLOGY.

Generally after some exposure to cold, there occurs a slight chill followed by moderate fever, dry cough, breathing somewhat embarrassed, but *not so rapid as in pneumonia*. The same is true of the pulse. Children, and very ambitious patients are often allowed to go out and pursue the usual duties, but in so doing, pneumonia, a very serious complication, often develops. The prognosis in bronchitis is very favorable. A few days of precaution and the use of the indicated remedy, generally suffices for a cure.

MEDICAL TREATMENT.

Aconite—In laryngitis or bronchitis often indicated in the *first stage*, but very seldom in the latter. Especially indicated after *checking perspiration by exposure to cold*. There is some fever, *dry, hot skin*, with *great restlessness*. Thirst, but no appetite. Cough is dry and frequent, breathing short. Should perspiration and quiet follow *soon after giving Acon.* continue the remedy at *longer intervals, making no change so long as improvement continues.*

Belladonna—Occasionally indicated where the throat also becomes inflamed, *with dryness* and constant inclination to swallow, which is painful. With the *dry, constant cough*, the face becomes intensely *flushed*. Some fever, with *very hot, dry skin*, and throbbing headache.

Bryonia—Frequently indicated, especially *with infants and children*: Patient much less feverish than Acon. Instead of being restless, is very averse to *moving or being moved*, as it seems to *aggravate pains, soreness and cough*. Bry. is often called for after the acute, febrile *Acon.* stage of disease and especially if there are *sharp pains about the chest*.

Chamomilla—Especially for *infants or young children*. May be complicated with stomach and intestinal disturbance. Child is exceedingly *irritable* and can only be quieted by being carried about; somewhat feverish, *one cheek very red*, the other pale; *worse at night*.

Hepar Sulphur—For the middle and latter stages, when cough becomes *loose, with rattling of phlegm*. Con-

siderable sweat, especially *after each paroxysm of cough*. Very sensitive to *cold air*.

Ipecac—Very often indicated when the *disease follows measles*. Cough is *loose*, no fever, often *nausea* with or after coughing.

Phosphorus—*Much hoarseness*. Cough is often dry and constant, aggravated by *talking or laughing*. Worse from *cold air*, and in the *morning*. Sense of *tightness and weight* on the chest. More beneficial in adults who may be suffering from sub-acute attack with debility and and sense of *weakness or "goneness"* in the abdomen.

Tartar Emetic—An invaluable remedy in the *latter stages*, especially when the larynx and bronchi seem filled with *rattling phlegm* not easily expectorated. Cough has become very troublesome and exhausting with *cold sweat on the face*, threatened suffocation. *Tart. Em. has relieved and cured a multitude of such cases*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

PNEUMONIA.

Pneumonia is a disease that should from the first be under the most vigilant care and scrutiny. A thorough *physical examination of the chest should be made daily*. No attempt will be made to present here in full the pathology of pneumonia. Only a few of the more conspicuous features of the disease will be stated, but these should enable those in charge to waste no time in trifling with "remedies for a cold," but see that the patient is placed in bed and proper remedies used.

Pneumonia is one of the most, if not *the most*, prevalent disease of our *northern climate*. Its mortality is too well known to need mention here. It is largely a disease of winter and spring months; at least it very seldom, if ever, occurs without some *exposure to cold, or to the breath or sputum* of one suffering from the disease. A severe chill, it may be prolonged, follows very soon after exposure and this is immediately followed by *high fever, rapid pulse and high temperature, often delirium*. Respiration becomes increasingly *rapid and labored*, with desire to have the head and chest *elevated*. Dry cough follows, with expectoration of *clear, frothy, tenacious phlegm* and *somewhat later, bloody, "rust-colored" sputa*. Such, in brief, is an outline of a *typical case* of pneumonia. Special cases may vary but not sufficiently to throw serious doubt on the diagnosis.

PNEUMONIA OF INFANTS AND CHILDREN.

In pneumonia of infants and young children the foregoing stages of the disease are *less marked* and it generally runs a more *rapid course* either to convalescence or a fatal termination. In the absence of any acute pain and with the tendency in most cases to sleep, this disease *in children is often unrecognized* in the early stages, hence the importance of an early examination; a correct diagnosis can be made only by a thorough physical examination of the chest. It is well to know that pneumonia is not only caused by exposure and cold but that in recent years it has been classed among the *contagious diseases*; not as virulent as smallpox or scarlet fever, nevertheless there is abundant evidence to prove that pneumonia may be transmitted from one to another through the medium

of the *breath and sputum* which contain the pneumococcus a *minute micro-organism* endowed with a power and rapidity of self-multiplication which is unbelievable, except to the bacteriologist behind the microscope. Fortunately, with reasonable caution there need be little or no danger of infection in caring for a case of pneumonia. By *burning the clothes on which sputum is collected*, and by keeping out of range during *paroxysms of coughing* when fragments of phlegm often fly from the mouth, by avoiding *kissing the sick or drinking from the same cup*, these and minor precautions will reduce all risk to the minimum. A well ventilated room is another source of safety to attendants as well as of benefit to the patient.

A personal word in reference to the treatment of pneumonia may be excusable here. After an observation extending over forty years, including hospital and general practice, one should be able to speak with some authority. With this justification I can affirm positively the vast superiority of homeopathic treatment of pneumonia. It has been demonstrated by thousands of physicians and many thousands of patients. In fact, nearly every case of uncomplicated pneumonia, if placed under strictly homeopathic treatment from the beginning, will recover.

MEDICAL TREATMENT.

Aconite—Very *early in attack*, perhaps before the physician can reach the patient, *Aconite* may do much to break the *violence* of the disease. Some, or all of the following indications call for *Aco.*, the *burning fever with thirst, full, rapid pulse, high temperature, great restlessness, cough and rapid breathing.*

Bryonia—If *Acon.* fails to give relief within a few hours and should there follow *pleuritic pains after each breath or motion*, give *Bry.* The patient is averse to being *moved in the slightest*, owing to aggravation of all symptoms, which is the opposite of *Acon.*

Phosphorus—Constant *dry cough*, or if loose, sputa is often *bloody*, breathing rapid, *weight and tightness over bronchia*, circumscribed redness in one or *both cheeks*. More useful in adults, slender, *frail individuals* in the second stages of the disease.

Sul.—In cases where improvement is not satisfactory, a few doses may be given to be followed by the indicated remedy.

Tartar Emetic—Useful in all stages but much oftener indicated in *later stages of pneumonia*, with the *excessive secretion of mucus* in lungs causing *constant rattling, wheezing*, expectoration and breathing difficult, *patient exhausted, face bathed in cold perspiration*.

A much larger list of the common remedies is available, especially for *children*. See *Mat. Med.*, Part III.—*Bell., Cham., Ipec., Lyco., Rhus.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see *General Index* under "Directions."]

PLEURISY.

Pleurisy often occurs as a complication with pneumonia; again, it often follows injuries to the chest walls, as in fracture of the ribs. Frequently it occurs as a disease by itself. The causes of such attacks are gener-

ally similar to those which induce pneumonia, especially exposure to cold. The constitutional symptoms are much less violent and profound, but the local pains in the chest or pleura are *more severe* and characteristic. An attack of pleurisy is often made known by *acute, lancinating pains in the side of the chest*, rendering breathing very difficult; a chill and some fever accompanying the attack. The mortality in properly treated pleurisy is *slight*, yet it is subject to somewhat frequent complications, especially serus effusion into the pleural cavity. As this can only be determined by a careful physical examination of the chest, it is well to have the patient under careful observation until *fully convalescent*. In the meantime *the indicated remedies* should be given.

MEDICAL TREATMENT.

Aconite—After a *chill from exposure to cold wind*, or from *checking perspiration*, patient becomes feverish with *hot, dry skin, thirst and great restlessness*. The pulse is *full and fast*, the respiration often rapid, the cough dry and hacking, with little or no expectoration. A few doses will often cause free *perspiration and a general mitigation of the more alarming symptoms*.

Arnica—After *blows or injuries* to the chest, sharp pains with great *soreness in the chest walls*.

Bryonia—Breathing *rapid and superficial*, on account of *sharp pain which follows a deep breath*. Instead of the restlessness of *Acon.*, there is a desire *not to be moved* because of the aggravation of *all symptoms*. Better from lying on the *painful side*, nausea and vertigo *on rising up*

or attempting any motion. Lips and mouth *dry*, with some thirst but not so great as that of *Acon.* Bryonia often indicated and the relief often follows after the first dose. No one remedy presents such a *picture of pleurisy as Bry.*, and none has *cured so many cases.*

Rhus Tox—Symptoms quite the reverse of *Bry.* with some resemblance to *Acon.*, *Rhus.* is especially useful when the pleurisy is caused by *getting wet or by sprains.* Patient very *restless*, with aching in *limbs and back.* The fever has subsided or may be mingled with creeping chills.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ASTHMA.

Asthma is rather a functional disturbance of the lungs, than an organic disease. It occurs in various degrees of violence; from a slight embarrassment of breathing to the most distressing dyspnea, which renders it nearly impossible for a patient to inhale sufficient air to support life.

The characteristic feature of asthma are its suddenness of attack and equally sudden disappearance. Inability to lie with the head *low.* Worse in *damp weather, south winds, and at night.*

Owing to the fact that it may be mistaken for some organic disease of lungs or heart, it is necessary to differentiate carefully. In asthma, the *pulse and temperature generally remain quite normal;* whereas in organic

disease of heart or lungs, the reverse is true. Usually there is no chill and little, if any fever. Permanent recovery from asthma is very rare. Paroxysms occur and recur at very indefinite intervals, depending largely upon the causes above mentioned. Rarely does the disease (uncomplicated) result in a fatal termination. Remedies, well selected, may give some temporary relief.

See indication in *Materia Medica*, under *Arsenicum*, *Ipecacuanha*, *Stramonium*, *Veratrum Album*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISEASES OF THE HEART.

In a work of this character it would be practically impossible to enter upon the technical details of all of the diseases of the heart and unless presented thus, I know of no other way to make it of any great value, either to the trained or untrained minds. Again medical treatment, the chief object of this book, is not of such supreme importance in diseases of the heart, as in diseases of other organs of the body. The most judicious management especially preventative measures are of first importance in affections of this organ.

Only a brief summary of the more prominent symptoms of impending or existing heart disease will be considered here, and that largely to direct the attention more intelligently to the *importance of having a thorough physical examination made*, after which all instructions regarding exercise, physical and mental excitement, diet, etc., should

be scrupulously followed, for it is quite doubtful whether there is any disease in which this is more important. Difference of opinion about the more *obscure* abnormalities of the heart is very common. It is well to realize in a general way that the action of the heart may be disturbed by a *multitude of causes* outside of, and remote from the organ itself; often secondarily and from causes which the physician can *determine and remedy*. Thus many are unnecessarily burdened with the thought of being sufferers from some incurable heart disease. Simply a disturbance of the heart action is far from *full proof* of any organic disease. Again, it is true we may have primary heart lesion with *symptoms* not unlike those from sympathetic disturbances. However, in primary lesion or *organic disease* of the heart the symptoms are much more *persistent*. For instance, a *persistant and increasing difficulty of breathing* on any rapid exertion, especially ascending a hill or flight of stairs. Organic disease may follow an attack of rheumatism. Such patients are often obliged to lie on the right side with the head *elevated*, or there may be some *swelling about the ankles*. A combination of some or all of these symptoms is *too significant* to be safely overlooked.

Persons suffering from organic or even functional disturbance of the heart should avoid extremes of all kinds, especially in eating, over-exertion or excitement of mind. Frequent fatalities occur from such causes as in running, climbing stairs, swimming, etc. Sudden fright and excitement have claimed many victims. Safety lies in moderation in all things—a serene state of mind and a minimum amount of vexation and worry.

For indications for some of the remedies that might be useful in an emergency, see Part III. under head of *Acon.*, *Apis.*, *Ars.*, *Bry.*, *Cactus.*, *Rhus* and *Verat.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISEASES OF THE DIGESTIVE SYSTEM.

Some of the affections or abnormalities of these parts are symptomatic only, while others have a local origin. The following familiar facts may aid in diagnosis and prescribing.

LIPS.

Bluish lips are often noticeable in *faulty circulation*, *heart disease*, *asthma*, etc. *Dry, parched lips with dark, blackish crusts covering the teeth as well*, are often a forerunner of typhoid fever, or fever of low type.

Fever blisters on the lips are often present in *pneumonia*, *severe colds and intermittent fever*.

Persistent sore on lower lip, spreading and *refusing to heal*, may be a form of cancer, particularly in the case of those who smoke tobacco.

MOUTH.

Mouth hygiene plays an important part in preventing various infectious diseases as well as the maintenance of bodily health. The dental profession has done much to establish these facts which are no longer matters of dis-

pute. The following facts are important as concerning children especially.

The mouth in normal condition should generally remain closed, except when eating or using the voice. The open mouth, especially at night, is generally due to some *stoppage in the nose*, and when persistent, resulting in "*mouth breathing*," should be remedied. It may be caused by enlargement of the tonsils, adenoid growths, or some deformity in the nasal passages. A spasmodically closed mouth may be due to general spasms or to "lock-jaw," (tetanus) a form of spasm generally caused by some injury about the feet or hands.

GUMS.

The gums, although capable of resisting nearly all forms of harsh treatment, are seldom found without some defect or abrasion, which doubtless is the *point of entrance* for many of the contagious and infectious diseases. In the case of children with teeth often decayed below the line of the gum attachment, there is necessarily a raw or bleeding surface. The same may be true with the adult, and in addition thereto is the almost universal tendency to the accumulation of tartar on the surface of the teeth, to which the normal gum refuses to unite, hence another raw and bleeding surface, itself *proving a foul, suppurating sore, a culture bed for every form of bacterial life*, which should be remedied.

The appearance of the gums may be greatly changed by the use of drugs or the presence of disease. Large doses of *Mercury* will cause the gums to become *soft*, spongy and bleeding. This, with profuse secretion of saliva, is

called "Salivation," and was at one time considered both legitimate and necessary. Bleeding gums, as a rule, are due to disease, or accumulations on the teeth as above referred to. Ulcerations about the gums are likewise generally from the same cause, so that when the condition of the teeth become abnormal, a train of sequences follows.

An abscess or so-called "gum boil," is generally due to disease of the root of the tooth. This may heal up spontaneously, or may remain an open sore or sinus, until the tooth is either treated or extracted.

DENTITION.

There are really two periods of Dentition. One extends normally from the seventh month into the second year, during which time the commonly called "milk teeth" appear. During the sixth year they begin to disappear, and the second period of dentition begins, continuing from eight to ten years. During this period the "permanent teeth" take their places, excepting the "wisdom teeth" which may be deferred ten or twenty years longer.

Normally, the two central incisors should make their appearance between the sixth and eighth months, and the two upper incisors a month or two later. The upper, lateral incisors come next and by the end of a year, the upper, anterior molars. A month or two later, the lower incisors and soon after, the lower molars. The canine, or "eye teeth" do not appear with much uniformity, but usually by the 16th to the 18th month and by the end of the second year, the lower molars, making a complete set of "milk teeth."

THE TONGUE.

The varying appearance of the tongue in sickness will often, when *rightly interpreted, aid in diagnosis* and in the selection of the remedy. The following clinical facts have long been established by practical observation. At the outset it may be well to bear in mind that the tongue is seldom seen without some slight coating, especially on the back portion. This is particularly true in the case of those suffering from loss of sleep, slight indigestion, or habitual tobacco-smoking. A dry tongue and mouth at night only, indicates obstruction in the nose which may be from enlarged tonsils or adenoids. A dry tongue that gradually changes to moist, especially after an acute febrile disease, is a most favorable indication. The tongue is red in scarlet fever and acute gastritis; sometimes whitish and red or "strawberry" like. Often coated or furred in constipation and indigestion. When yellowish-white it indicates *gastro-hepatic catarrh*. When coating is dark, or brown and dry with similar coating on teeth and lips, typhoid or low fever may be threatening. The same also in septic conditions. In quinsy, the tongue is heavily coated and difficult to protrude; often in a lesser degree the same in diphtheria and severe sore throat. The tongue that is dry, protruded tremblingly and with much difficulty, may indicate disease of the brain, or some low form of fever, typhoid, etc. If the tongue is protruded to one side, it may indicate paralysis.

A thick white coating often indicates some form of *indigestion* and, in children, worms. If the dry tongue gradually becomes moist, or the coated tongue clears slowly beginning at the tip and edges leaving the natural

appearance visible, a recovery has begun. The diet, which of course has been restricted while the tongue continued dry and coated, may as a general rule be gradually increased, as with this change the appetite will probably increase.

Where the appearance of the tongue is marked, the following hints may point to some remedy in the *Materia Medica*, Part III. which upon careful reading may be found well indicated by many other symptoms.

The "strawberry tongue" white dotted red, *Bell.*, *Arum.*, *Hyos.*; red tip, *Rhus.*; red, shining, protruded trembling, *Lach.*; red tip and edges, *Bap.* and *Sul.*; bluish tongue, *Ars.*, *Dig.*; white, thick coated, *Anti. C.*, *Bry.*, *Cina.*; dark or brown coating, *Bap.*, *Bry.*; tongue soft, swollen and much saliva, *Merc.*, *Hep.*; clean tongue with gastric disorders, *Cina*, *Ipec.*, *Nux.*; thick coating and bad taste in morning, *Puls.*

The foregoing "observations" on the tongue are simply given as an *aid to diagnosis and treatment*.

THRUSH.

This is an affection confined to the *first weeks* of infant life. It is not preceded or accompanied by any marked constitutional disturbance. The mouth and tongue may be slightly inflamed, followed by *isolated patches of whitish points* which spread and coalesce until in some cases the surfaces are nearly covered with a milky white coating. In some instances it disappears and a new crop forms. In all it may last from one to two weeks. In

the more severe cases there may be some fever, vomiting and diarrhea. Seldom dangerous except in the case of feeble infants.

The remedy must be chosen according to existing symptoms. *Acon.*, *Cham.*, *Merc.*, *Hepar Sul.*, and *Sul.* may be called for.

CANCRUM ORIS.

(Canker of the Mouth.)

Canker of the mouth is generally due either to some constitutional defect, or some organic derangement, especially such as affects the digestive tract. However, some individuals apparently in perfect health seem predisposed to frequent visitations of this annoying trouble. The so-called "canker" is essentially a *tiny ulcer, primarily*; after which it spreads and deepens, giving it the appearance of an "open sore." It matters not whether it begins on the gums, tongue, or cheeks, the progress and treatment are the same. No age is exempt. It is quite as prevalent with children as adults. The affected parts are quite painful, attended with an increased flow of saliva, and offensive breath. The condition of the patient as a whole should first receive attention, thus looking towards prevention.

Nux Vom., *Hepar Sul.* and *Merc.* also *Hydrastis*, which may be used internally and locally, by directly touching the canker with a drop of the tincture.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

NAUSEA AND VOMITING.

Vomiting, although a symptom, is of such frequent occurrence that it deserves a word here. The stomach as an organ, can bear witness to more abuse than any other. It is assumed to be ready at all hours of the day or night, to receive all sorts of improper food and drink, in quantities that are appalling. It is the receptacle for the most nauseating drugs administered solely for the benefit and cure of other organs of the body.

The stomach is supposed to receive and dispose of all contents after a physiological ideal, all of this without any knowledge or discomfort of the possessor. Vomiting as a negative function of the stomach is often an *intelligent protest* against outrageous treatment. It is often an object lesson of nature of how she cares for herself by promptly rejecting or ejecting poison, tainted or indigestible food, and a multitude of things harmful to the whole system.

In diseases of the stomach, such as cancer, ulcer, acute indigestion, nausea and vomiting may become persistent and the predominant symptoms, even when the stomach is quite empty. Also in the beginning of acute diseases. *A reflex* nausea and vomiting occurs in *pregnancy, brain and kidney diseases*, also from mechanical causes, such as obstruction of the bowels. To rightly interpret nausea and vomiting or nausea itself, it becomes necessary to associate it with other concomitant symptoms and conditions. It may mean little or nothing, and again it may help to point the way to a correct diagnosis. It is sometimes a *hint to cease feeding too much or too often especi-*

ally during or after any acute disease. However much there is to condemn there certainly is much to admire in the methods and action of the stomach both in health and disease.

CLINICAL NOTE.

Without a knowledge of the cause back of nausea and vomiting together with *concomitant symptoms* disappointment would be liable to follow a prescription. *Prescribing on a single symptom is seldom if ever necessary.* Very many drugs produce nausea and vomiting but *like most disease there are accompanying symptoms which make the selection of the right remedy well nigh a certainty.*

See *Acon.*, *Ars.*, *Ipec.*, *Podo.* and *Verot.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DYSPEPSIA.

Although most medical writers on diagnosis have failed to give "Dyspepsia" a special place in the list of diseases, it seems quite necessary to do so in a treatise like this, whose aim is to be practical, rather than technical. Again, for all practical purposes of treatment, indigestion, especially of the more chronic type, as well as the milder forms of chronic gastritis, may be grouped together. The causes, symptoms and pathology are very similar, often identical.

Briefly, we may assert the causes of the above ailments

to be one or several of the following combined ; too much, or unsuitable food ; haste in eating and its twin destroyer, imperfect mastication ; *too much fatigue or too little exercise ; excessive mental work or emotional disturbances ; the improper use of drugs, coffee, and alcoholic beverages.* The continued operation of one or more of these causes results in, first, a functional derangement of the stomach which, if not removed by diet and remedies, may result in an organic and chronic disease ; or, again, if not remedied, the *intestinal tract* becomes involved with a legion of minor disturbances. The liver seldom escapes torpor and derangement when dyspepsia has been present for any length of time.

SYMPTOMATOLOGY.

The individual in perfect health should not be conscious of the normal process of digestion or of having a stomach.

The patient with dyspepsia feels very sure of it, not generally on account of acute pain ; but because of sundry "bad feelings" which vary according to the descriptive powers of different people. Sensations of *weight, heaviness, fullness, burning and weakness, are common, generally worse from one to three hours after meals.*

The mouth and tongue are foul and clammy, with a sour, or bitter taste. Gas is belched from the stomach. The bowels are usually costive, with stool defective in character or undigested. Gas accumulates in the stomach and bowels, often resulting in distention, with consequent palpitation and suspicion of "heart disease." The complexion is dull and sallow. The mental condition is

touched, from a mild case of "the blues," to a full-fledged hypochondria.

With the marked mental disturbance, there is often headache and vertigo. Fortunately, these conditions can be removed, provided the patient, knowing the cause, will avoid the same and co-operate with the one who is selecting the indicated remedies.

CAUSE AND PREVENTION.

In noting the more frequent causes of dyspepsia, it is plain to be seen that some are avoidable, and that others can be corrected by the patient; for instance, the neglect in the proper mastication of food, which is easily the most common cause of indigestion. There are minor causes, not mentioned, but they must be sought out before a perfect cure can be accomplished. Questions of the quantity and quality of food cannot be elaborated here. However, it must be said that over-eating when fatigued, and at late hours of night, is opposed to good digestion. As to quality of food, it must be said there is no rule applicable to *all* cases. As a general rule it is well to avoid all foods which produce either pain, discomfort or much belching of gas. This is the more important from the well-observed fact that dyspeptics are prone to indulge in unsuitable food, and unwilling to discontinue habits which have made them dyspeptics. Reasonable fasting, or two light meals a day, preceded by drinking a free allowance of warm water, will contribute towards a cure. Homeopathic remedies, properly selected and allowed to act without interference, will cure cases which have not

passed from the functional stage to some serious organic disease.

MEDICAL TREATMENT.

Arsenicum—Pain and burning in the stomach. Nausea and vomiting *soon after eating, or drinking* the least cold water. Loss of strength and weight. Derangement from eating ice-cream, *tainted meat or alcoholic drink*. The thirst and prostration with burning in the stomach are marked indications for Arsenicum.

Bryonia—After eating solid food it is belched up a *little at a time*. Stomach very *sensitive to touch, worse from motion*. Tongue coated *yellowish white*.

Calcarea Carb—Craving for chalk, coal, salt, and *indigestible things, especially with children*. Distention over the pit of the stomach. Low spirits with constant fear of losing reason. Pressure in the vertex. Perspiration about the head and face at night, with great sensitiveness to *cold air*. Persons “fat and flabby” inclined to *poor circulation*, with cold feet and hands.

Carbo Vegetabilis—Persons who have been ill and not fully recovered. *Low vitality*, face pale, *blue, haggard*. *Eructations of gas* and food which is *sour and rancid*. Worse from tainted meats or *too rich food*; after dissipation. Distention of stomach and abdomen.

Chamomilla—Useful in young children. Pain and distention of stomach and abdomen, with the mental symptoms of *great irritability and impatience*. Cannot endure the pain.

Ignatia—Useful in a form of “Nervous dyspepsia” often caused by *grief and disappointment*. A sense of great *weakness or “all-goneness” over the region of stomach*, with constant inclination to take a *deep breath*. Patient is often changeable, tearful and silent.

Ipecac—The frequent nausea with every slight disturbance is a call for *Ipecac*, especially after *sweets, confectionary*, etc. The tongue *clean, saliva increased*.

Lycopodium—Much flatulency with sense of *fullness after eating a small amount of food*, constant sense of *fermentation in the stomach and bowels*; chronic derangement of stomach and liver, with *red sand* in the urine.

Nux Vomica—In cases that have been dosed with *crude drugs, patent medicines and cathartics*, *Nux* should be given to begin the treatment, unless some other treatment is very clearly indicated. *Nux* is often the remedy where *alcoholic drink or strong coffee* has impaired the digestion. The mental symptoms in such cases often duplicate those of *Nux*. *Irritable, morose* and mentally unfitted for any duty. *Drowsy by day and wakeful at night*, with all the symptoms worse in the *morning*. Headache, vertigo and nervousness, all aggravated by any *mental effort*. Discomfort and pain in stomach, *after meals*. *Constipation or Diarrhea*.

Pulsatilla—Useful in cases caused by, or made worse by eating *fat food, especially pork or pastry*. Regurgitation of food and gas. Usually no thirst or appetite. Tongue coated, with extremely *bad taste in mouth in the morning*. Patient craves open air instead of the warm

room, yet inclined to be chilly. Most symptoms worse towards evenings. Puls. seems to do best for persons of a *mild*, yielding disposition, inclined to be *gloomy and tearful*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ACUTE GASTRITIS.

CAUSES.

This is an acute inflammation of the mucus membrane of the stomach. The causes of acute gastritis are mainly those associated with errors in diet, irritating or tainted food, alcoholic drinks, unripe fruit, too free use of ice-water, etc.

SYMPTOMATOLOGY.

The severity of the symptoms often depends upon the cause of the attack. Those from eating tainted meat or from use of alcohol are the most violent; whereas those resulting from over-eating and the milder causes, are often slower in appearance and milder in character.

Usually within a few hours, or at most *a day or two*, after the causative agent has been in operation, there is *dull pain* and sense of *pressure* in the stomach, followed by nausea and vomiting. The substance ejected from the stomach will often explain the cause of such an attack. It may be undigested food which has remained for many hours in the stomach, together with sour, offensive mucus. This gives *temporary and partial relief from pain*. A chill often precedes or follows the vomiting, which is

followed by fever and *great thirst*. There is considerable prostration, with pale, cold face and perspiration. The tongue becomes coated, with increase of saliva and foul breath. There may be diarrhea, or constipation. Careful inquiry should be made as to the *cause of the attack*, for this may enter into the *selection of the right remedy*. Again, the duration and severity of the attack will depend upon the nature of the cause. In mild cases, where vomiting ensues at once the case often fails to develop inflammation, and is more like acute indigestion.

The severe, fully developed cases may continue for several weeks.

TREATMENT.

If there is a history of *recent indiscretion* in eating, with *distress* and nausea, it is well to imitate nature by using such means as will best get rid of the stomach's contents. A simple and harmless way is to administer a large quantity of *tepid water* after which, press the finger well down in the throat. This will generally be followed by vomiting. It need not be repeated, if the offending substance makes its appearance. If it does not, and the pain continues, the process may be repeated once more, using as much water as can be swallowed.

Nature's method of rejecting the offending cause is followed by another indication to be regarded as of greatest importance. The *desire for food is taken away*, and experience has taught that for a period of *24 to 48 hours, little or no food should be taken into the stomach*. The digestive process should have absolute rest. After

this, light broths and gruels may be given, and water in small quantities, when desired. The early administration of the right remedy will do much towards the relief of pain and checking the course of the disease.

MEDICAL TREATMENT.

Aconite—If, following chill and fever, there is great thirst, nausea and vomiting; the skin hot and dry, the pulse full and fast.

Arsenicum—When the nausea and vomiting are followed by great *prostration and diarrhea*. Burning in stomach with thirst for water, but *takes only a swallow*. After *alcoholic drinks, ice cream, ice water, tainted meats or rancid food*. Nausea and vomiting *after taking water*, very restless, cannot remain quiet; patient thinks death is near, with great fear of being left alone.

Carbo Vegetabilis—*Belching of sour, rancid food and gas*. Burning in stomach with bloating of the abdomen, *craves acids and aversion to meat*.

Bryonia—Very sensitive to any pressure about the stomach or abdomen, cannot move or be moved without pain, sitting up causes fainting or nausea. Attack caused by drinking ice water after being heated, in hot weather.

Ipecac—After eating sweets, and unripe fruit, with colic pain and *nausea, severe clawing pain* about the stomach with vomiting.

Nux Vomica—Attacks following dissipation, over eating and *heavy drinking*. Severe pain extending from the stomach to the back. Patient extremely *irritable and*

sensitive to all impressions and opposition. (See Anti, c. Cham. Colyc.)

Pulsatilla—After errors in diet, especially fat, rich food. Tongue coated and bad taste in mouth, *no thirst*, inclined to chilliness, and vertigo. Heat of room unbearable, craves the open air.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CANCER OF THE STOMACH.

This disease seldom occurs before the age of forty. In its duration much depends upon the vitality of the patient. It seldom proves fatal within one year, but nearly always so before the end of the second. The early symptoms may be easily mistaken for indigestion. As the disease progresses, *pain, generally of a burning, stinging character follows, also nausea and vomiting* of food and mucus. In the later stages the dark "Coffee-Grounds," composed of blood and mucus are vomited. The face becomes *pale, sallow and cachectic* with increasing *weakness and emaciation*, and the patient succumbs to a process of *slow starvation*, owing to the inability of the stomach to digest any food. It is generally possible, in the middle or later stage of the disease to discover a *firm, round tumor* in the region of the stomach. In cancer of the intestines or liver, the general appearance of the patient and the course of the disease is much the same as cancer of the stomach. The local symptoms vary *according to the organ involved*.

DIET AND TREATMENT.

When the question of the *diagnosis* is well decided, the case becomes one for *palliation* or for the surgeon. Very recently, surgeons have demonstrated by practical results that if taken in time, many cases of cancer of the stomach can be saved by an operation. This is a clear gain when we consider that formerly *all* cases were *practically hopeless* and fatal. In considering the comfort of the patient the question of diet is important. Easily *digested* or *pre-digested food*, mainly in liquid form, should be the rule. Experience will soon teach that there can be no rule for all cases. Some may digest or tolerate milk, beef tea, etc., while others will do better on arrowroot, cornstarch and gruels. The rule is to give such nourishment as causes the least pain and vomiting. The homeopathic remedies which have given most relief from suffering are *Arsen.*, *Bry.*, *Ipec.*, *Lycop.*, *Phos.* and *Nux.* See *Mat. Med.*, Part II. for guiding symptoms.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ULCER OF THE STOMACH.

This disease is apt to occur before middle life, in this respect the opposite of cancer. *Hot food, sweet or salty, causes pain.* Vomiting of bloody mucus in small quantities may be rather frequent, which differentiates it from chronic gastritis. There is emaciation but not so rapid as in cancer, neither is the appearance so aenemic. In the beginning these cases should be considered medical. Some will respond to remedies, provided the "*rest cure*" is

adopted, that is, three weeks in bed and all nourishment by nutrient enema.

If medical treatment and conservative measures fail to give good results, the case should be placed in the hands of a surgeon. Delay in this particular may result in sudden perforation, hemorrhage and death.

See remedies for dyspepsia and cancer of the stomach.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

COLIC.

CAUSE AND VARIETIES.

The different varieties of so-called colic constitute no small part of the average medical practice and by no means the most desirable. The call often comes at the most inopportune time, at night, or during a busy office hour and is of the "hurry up" kind. Generally one is confronted, not with a disease but rather a condition where nature is struggling to overcome some mechanical interference with her normal operations. It may be a stomach distended with indigestible food and gas which must be ejected to get relief from the pains. The accumulation and fixation of gas in the intestines gives rise to a form of suffering called flatulent colic, often mechanical in its origin, as in obstruction. The presence of a gall stone in the bile duct may prevent the normal flow of bile and obstruction results, thus giving rise to gall stone or "bilious colic."

The same is essentially the case when a "gravel" or

foreign body is passing from the kidney to the bladder, resulting in an obstruction in the ureter, giving rise to the term renal colic. Many cases of uterine colic are doubtless due to some phase of obstruction. These several forms of colic will be treated more fully elsewhere. Brief description is made here for the purpose of giving a better understanding of the term colic, so often and so vaguely used. In the presence of intense suffering it is sometimes confessedly difficult to determine what variety of colic is being dealt with. The agony of pain is often so great and so many reflex symptoms are common to all kinds of colic, together with the anatomical fact that the seat of nearly all attacks is within the abdominal cavity, that an off-hand diagnosis is perplexingly difficult and can only be made certain by associating with the colic pains, those unique symptoms which are present and characteristic in different kinds of colic. (See Index.)

The following remedies should be selected according to the symptoms of each case. The remedies are named in the order of importance.

For Colic from indigestion, *Nux Vom.*, *Puls.*, *Ipec.*, *Colo.*; Flatulent Colic, *Lyco.*, *Nux Vom.*, *Colo.*, *Puls.*; Gall-Stone Colic, *Bell.*, *China.*, *Nux Vom.*, *Bry.*; Renal Colic, *Lyco.*; Infantile Colic, *Cham.*, *Nux Vom.*, *Colo.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CONSTIPATION.

HISTORY, CAUSE AND PREVENTION.

Delay or infrequency in the evacuation of the bowels, with a tendency to abnormal scantiness, dryness and hardness of stool are the conditions which characterize and are comprised in the term *constipation*. Such conditions may exist with or without any pre-existing disease. In other words, they may be the result of disease or in due time may cause it. However this may be, there is no more frequent source of bodily discomfort, and none that the physician is called upon so often to cure. The vast variety of causes need only be mentioned here. Heredity, faulty and negligent habits, sedentary habits, faulty diet and abuse of digestion, improper use of coffee and cathartics, disease or abnormalities especially about the sphincter ani, all, with other minor causes, contribute to the procession that is moving to and from the physician's office, seeking aid not only for constipation but for the many evil effects growing out of this imperfect elimination by way of the bowels. It must be obvious that no treatment can be successful that does not take into consideration the patient as a whole, which must include history, habits, etc. Medication, important as it is, in many cases plays but a minor part in the cure, and in some instances may be omitted altogether. The *indiscriminate* use of cathartics in chronic constipation has done a vast amount of harm, resulting in the necessity of taking larger doses and creating a sort of *drug habit in the end*. This has no reference to the proper use of a cathartic in acute cases; when there are special reasons why one should be administered. By referring

to the index under the head of "Cathartics" and "Enema" an explanation will be found as to when and how they should be used. Retarded action of the bowels in most cases is apt to be followed by headache, dizziness, flatulence, abdominal discomfort and mental sluggishness, with many other minor symptoms. Doubtless this picture represents a mild, though typical case of auto-intoxication.

The whole truth compels the statement that not a few people go through life from childhood to old age, suffering little or no ill effects from a mild form of constipation. Such constitute a small minority. After acute diseases of the bowels, such as diarrhea and dysentery, the bowels may remain inactive for several days with *no ill effects and no occasion for interference*. After sea-sickness the same is true. It is not an unusual thing for people at sea to pass an entire week or more without inclination for a movement. Doubtless the most frequent cause of constipation is the *neglect of timely attendance upon the calls of nature* until at last the call grows feebler and finally ceases to make itself known. Gradually and unconsciously that subconsciousness of our being is dealt a blow which may be the first step towards an incurable disease. Nature when not interfered with, works in the most orderly way and any violation of her laws is sure to be followed by ill consequences. The function of the bowels is no exception. *Perfect regularity of habit is fundamental* to those who seek relief from constipation. Definitely, it should be stated thus. Every day, at about the same hour, usually after breakfast, the patient should seek the closet and whether with or without an inclination

for movement, a sufficient time and effort should be made until, as is generally the case, nature's call does the rest. It may take time, even weeks and months to *cultivate the "call"* but for many, this is the *quickest and only way to recovery*. Observing physicians agree that this is of first importance. Besides, it is a remedy available for every one who is willing to comply with nature's demands. For those of sedentary habits obliged to be much indoors, with more or less worry and care, a change to exercise in the open air with freedom from mental effort will generally result in prompt relief and great benefit to the general condition.

It is easy to be discovered that in constipation, the remedy often lies with the individual rather than in a medicine.

Regular habits, change of diet, proper food, outdoor life and exercise, all should be considered in connection with medicine, for they are all remedial when properly applied. Improper diet may lead to constipation. A history of such cases will determine that. Some people have accustomed themselves to a condensed diet which leaves little waste; as meat, milk and eggs, in which case a change should be made to coarse food, fruit and vegetables, graham, corn bread and oatmeal, also to apples, oranges and fruits in season. Stewed fruits, prunes, peaches and apples are both remedial and wholesome. There can be no question as to the value of using plenty of pure drinking water, especially in the morning before eating. For some, the use of strong coffee and tea may prove a serious obstacle to the cure of constipation. Their use should be discontinued.

CATHARTICS.

The habitual use of the "cathartic pill" for constipation is altogether too common which in the majority of cases is the result of improper diet, indolent habits, in fact disregard of the fundamentals of good health. As a short cut to "feeling better" it may be considered a success, but the final outcome, if it results in a fixed habit, is a lamentable failure. Fortunately many of these cases can be cured by diligently observing the suggestions under the head of constipation.

Of course, conditions arise where the timely use of a prompt acting cathartic is very necessary but this seldom leads to any fixed habit.

The use of enema seldom results in any fixed habit. In not a few conditions it is preferable to a cathartic and is less objectionable, especially in the case of children, or where very prompt action is desired. Whenever water is to be injected into the bowels, it should first be boiled and allowed to cool to a little below blood heat. It is generally safe to use all that can be comfortably retained.

MEDICAL TREATMENT.

Bryonia—One of the first remedies thought of. The patient is often troubled with headache, *vertigo on rising*, irritable and despondent, not unlike *Nux Vom.* *Stool dry, hard, like so many balls*, characteristic of *Bry.* Often useful after oil, or in those inclined to be rheumatic.

Chelidonium—Torpid liver with *pain under right shoulder-blade.* *Stool like Bry.* Abdomen distended, high-colored urine.

Hydrastis—General condition similar to Cheli. Gastric disturbance, with weak, gone feeling in stomach. Fainting spells with some fever. After purgative medicines.

Lycopodium—With the constipation there is a tendency to *fermentation throughout stomach and bowels*, with distention of abdomen and *sense of fullness after eating a few mouthfuls*. Patient is often “run down,” irritable and restless. Urging and painful contraction of sphincter ani, for hours after stool.

Nux Vomica—Similar to Bry. and Hyd. Often the remedy *after much dosing with cathartics*, etc. Patient drowsy, irritable and disinclined to *mental work*, or for those who have already done too much. Useful for cases resulting from *dissipation and loss of sleep*. Constant urging for stool with little or no result. Piles, and soreness about the anus. Patients who use *strong coffee or alcoholic drink*, who feel worse in morning and cannot sleep after 3 A. M.

Sulphur—A deep-acting remedy which may be given if others fail, or when no other remedy is clearly indicated. A few “Key-Note” symptoms, such as faint, gone feeling every day at ten or eleven A. M. burning in the feet at night, or cold feet with rush of blood towards the head, may guide the prescriber in the selection of Sulphur.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under “Directions.”]

CONSTIPATION OF INFANTS AND YOUNG CHILDREN.

Although most that has been written in the previous chapter on constipation is applicable here, still there are some special features particularly in infants, which call for additional information and emphasis. Constipation is of very common occurrence in young infants. It seldom results in anything serious, is usually temporary. The use of the indicated remedy, together with an enema and other minor aids, in charge of a competent nurse will in a short time overcome the trouble; after which all tinkering with the baby should cease. Normally the young infant should have from two to four movements daily. After six months it may decrease to two, and at the end of the first year, one daily may be considered enough. In bottle-fed babies there is generally less regularity, owing chiefly to lack of perfect uniformity of nourishment.

With older children up to and during the school age, constipation is prevalent and in some cases a cause of permanently impaired health. No one except the observing physician has opportunity to learn its prevalence and consequences. The parent, thoughtful enough about the external appearance of the child, also the care and general welfare, seldom knows or seeks to know the condition of certain bodily functions. In most cases this may be well and excusable; but when the child gives evidence of defective or increasingly poor health, such ignorance is inexcusable. As far as the children are concerned it is fair to say that, owing to lack of instruction or any sort

of appreciation of consequences, they may be considered irresponsible. By far the most common cause of constipation in children is *bad training, or rather none at all*, in reference to the necessity of regular habits of obeying the "call of nature." What is said of adults is equally true and important in child life. It requires patience and perseverance on the part of those responsible for the health of the child to overcome the ignorance and indolence of some children, but the result will pay well for the effort. As a matter of fact, many children eat in such haste that their food is not masticated at all. This leads to constipation, indigestion and kindred ills and should be corrected; but the question is "Who is sufficient for such a task?" Whenever errors of diet exist, they should be reformed. The free use of "meats and sweets" will often destroy the desire for more proper food, as well as lead to constipation. Children will soon learn to eat the coarser articles of food if placed before them when they are hungry; the same of fruit and vegetables, all of which tend to regulate the bowels. The *abominable practice of creating an appetite for strong coffee cannot be too strongly condemned*. The free use of water, pure milk, cocoa and the best cereal coffee is far preferable.

TREATMENT.

Again it must be said that a perfect cure and restoration must come both through management of the individual and medical treatment. Through the former many can be cured, but through the latter *unaided* but few can be permanently relieved. The remedies named in the chap-

ter on constipation are applicable here and should be selected with the greatest care. The general condition of the patient, as well as the fact of constipation, must be reckoned with in selecting a remedy. *When the patient is relieved or very much improved, the medicine can be discontinued without fear of relapse, or of the necessity of continuing on indefinitely as in the case where cathartics are used.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

OBSTRUCTION OF THE BOWELS.

Few maladies present greater obscurity of diagnosis or more uncertainty of treatment. Few are attended with *greater suffering*, and none more difficult to relieve. The character of the suffering is somewhat like the cause, *similar to the average case of colic.* (See Chap. on Colic.)

Persistent constipation precedes the more violent symptoms, although this is not an invariable rule. Pain in the abdomen with vomiting, first of the contents of the stomach and later the contents of the bowels. Distention of the abdomen follows. Local evidence of obstruction is rarely present, except in cases of fecal impaction or morbid growths. All ordinary efforts to obtain a passage of fecal matter or even gas may prove futile. The appearance of the patient becomes alarming; the face cold and pinched, with symptoms of collapse; the vomiting grows more persistent and characteristic of obstruction and, without relief, the end is near.

TREATMENT.

It must be obvious that medicines can do little in any case that is due to mechanical obstruction. When the diagnosis of intestinal obstruction has been well made out, no cathartic medicines are to be given. This may seem irrational, but observation teaches that purgatives are positively harmful. The free use of warm water enemata, repeated if necessary, followed if need be by injections of *Sweet Oil*, are both harmless and often effective. The insertion into the bowel of a rubber tube (resembling a bougie or stomach-tube) through which warm water or oil may be delivered *high up in the colon*, has relieved cases that have come under my observation. Too much time is often given to these expedients, or trusting to medicine, so that a surgical operation promises but little. When should an operation be performed? This is the great problem, and all the circumstances must enter into a final decision. Approximately not more than 24 to 36 hours should be consumed in ineffectual efforts for relief, and during this time, a competent surgeon should be in consultation with the physician, for the case is really more surgical than medical.

Looking backward, I recall some sad and fatal cases growing out of neglect in this particular; notably one, a young and brilliant physician in a country town, to whose bedside I was called in his dying hour. His first words to me were,—“I realize it all, it is too late. During the first day of my suffering, my judgment was to send for a surgeon, but my colleague in attendance made light of it and afterwards neglected me. I am dying.” And so he was! Considering the limited time available for

treatment and the acknowledged obscurities in the way of an early and accurate diagnosis, it must be apparent that every case with the foregoing symptoms demands the greatest promptness and the best of council. Admitting the uncertainties of a diagnosis and the immense possibilities of the action of a well indicated remedy, it is right to give the patient the benefit of a most careful selection which will only supplement but not interfere with other efforts being made for relief. Such remedies as *Bell.*, *Nux.*, *Lyco.* and *Verat.* may be thought of. See chap. on Colic.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

APPENDICITIS.

HISTORY, PREVALENCE AND MANAGEMENT.

No medical topic has proved so fascinating to the daily press during recent years as appendicitis, and none has been so diligently exploited. Its frequency and mortality furnish sufficient explanation for this. The end is not yet, for the greatest diversity of opinion prevails as to what is the chief cause of its prevalence, and what should be done when the disease occurs. No doubt this agitation of the public mind by the press has resulted in some useful information, as well as a great deal of confusion of thought. Looking backwards thirty or forty years to cases that came under my observation, it is easy to comprehend that many which were diagnosed as "inflammation of the bowels," etc. were really appendicitis. During this time most authors describe conditions in the abdominal organs which closely resemble, in all particu-

lars, a genuine case of appendicitis. Considering the real nature of the disease, it is wholly improbable that it is anything new, or that it has not always existed as now. Medical authorities simply failed to recognize the true condition, and were content to call it "inflammation of the bowels," etc, so that, until recent times, the word appendicitis does not appear in any medical text-book.

Much has been published both as to the disease and its treatment, which was visionary and positively dangerous and *misleading*. It is generally the extremists who rush into print with some sensational "cure-all" and oppose any operation whatever. Over and against this stand those who urge to operate every case, regardless of the condition of the patient or the history of the attack. Either course is contrary to the judgment of the majority of the most capable and trustworthy physicians and surgeons.

Seldom in the practice of medicine has any problem been more forcibly presented than in these cases of appendicitis. Three urgent questions often demand *immediate decision*. First—Is it a case of appendicitis? Second—Should an operation be performed? Third—If so—When?

Much, *very much*, depends upon the circumstances in every case, and there is no other safe and sane ground for deciding for or against an operation. A physician with plenty of experience, and a *competent surgeon should be associated in these cases*, and their *combined judgment* should decide the right course of procedure. The consensus of opinion among the most trustworthy physicians and surgeons is that *to refuse to operate any case, or to postpone an operation unduly, is to sacrifice a human life;*

and to operate every case at the earliest moment is not justified by every-day experience. Somewhere in every case, there must be a "Golden Mean."

HISTORY AND SYMPTOMS.

The history and symptoms of an ordinary case of acute appendicitis are brief, indeed. Pain in the abdomen is usually the earliest symptom. At first, it may be general; but within a few hours, if not at first, it becomes localized in the right side and lower portion of the abdomen. The pain is often sharp and excruciating, with now and then *intervals of ease* between the paroxysms. Nausea and vomiting often accompany the severe pain. Soon, if not at first felt, there develops a marked, *circumscribed sensitiveness to firm pressure over the region of the appendix*. Under such conditions, there should be no trifling with "*home remedies*." The best medical and surgical aid should deal with such an emergency.

Another type of appendicitis, which differs mainly in degree of suffering, and which may occur and *recur at intervals of weeks, months or years*, and is sometimes termed chronic appendicitis, is one which has elements of danger. In these milder cases, by the aid of medicines and applications, sometimes even without either, not a few recover from an attack; only to find it followed, after an indefinite interval, by another. This, too, may be overcome as before. In such cases operation is very often deferred, sometimes wisely, sometimes otherwise; judging from the divergent results, as demonstrated by fatal cases in the final analysis, and the cases of final recovery without an operation.

In this milder form, the chief danger is from the continued existence of mild inflammation, later suppuration and finally perforation of the appendix. Also, in the meantime, the patient's condition gives evidence of some *systemic contamination, due to the toxic material passing from the local disease into the general system*. There is generally loss of flesh and weight; the face is pale, even anemic, with loss of appetite and general indisposition. It is needless to say that *such cases demand the same prompt attention as those of the more sudden and violent character*.

MEDICAL TREATMENT.

Opiates and cathartics, formerly used by some practitioners, are now generally discarded. The former, (opiates), simply mask the danger; the latter often aggravate pain and are considered a disadvantage where an operation is to follow. The use of external applications of heat, the hot water bag, often ameliorates the pain.

In mild cases and in the early stage, *Aconite*, *Belladonna* and *Bryonia* seem to afford much relief.

Aconite—Chill, fever and thirst, with nausea and vomiting, fear and restlessness; pulse full and rapid. Skin dry and hot.

Belladonna—Gripping, clutching pain; cannot bear jar or noise; face fiery red; head throbbing with pain and excitement.

Bryonia—The pains are sharp over the appendix; *cannot move or be moved*. Nausea on rising; begs to be

left quiet. *Bryonia* has proven a valuable remedy in many cases.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

PERITONITIS.

(Inflammation of the Peritoneum.)

This disease is often due to the extension of an inflammation existing in that portion of the peritoneum which covers some organ in the abdominal cavity; for instance, liver, spleen, kidneys or uterus. It may develop with appendicitis. It may also occur primarily from colds, and injuries. A history of the case from its inception will usually clear up the diagnosis.

SYMPTOMATOLOGY.

The pain is of the most *acute character* and may be local, or diffused over the whole abdomen. Greatly aggravated by the least *pressure or motion*, which is the opposite of colic. The patient *lies quietly on the back with the legs flexed*. Vomiting and constipation are generally present, which might lead to a suspicion of obstruction. Distention of the abdomen may occur as a later symptom. A slight chill is followed by fever, the rising temperature generally accompanied by *rapid but rather weak pulse*. The prognosis depends much upon the severity of the primal causes; as wounds, appendicitis, and post operative.

DIET AND MEDICAL TREATMENT.

The patient will need no instructions about quiet and rest, for this is, above all, what he desires. During the acute febrile stage the rule is the same as in all such conditions, *not to tax digestion* with anything more than light, liquid nourishment and that in moderation. Hot applications often mitigate the severe pain. Remedies well-selected will, except in cases of some serious complication, generally relieve much of the pain and result in perfect recovery.

Aconite—Hot, dry skin with great thirst. Pulse quick, hard but small. Hands and feet restless yet cannot move the body. Mind full of *anxiety and fear of death*. May follow from exposure to cold.

Arsenicum—Later developments such as great *prostration, nausea and vomiting* with symptoms of collapse, great thirst, restless, must have *head elevated*, anxious look, *cannot be left alone*.

Belladonna—Burning hot skin and throbbing headache. Cannot endure jar or noise. May be used after *Aconite*.

Bryonia—Some fever, but less than with *Acon.* or *Bell.* Cannot *move or be moved* on account of sharp pain. Tongue white, mouth dry.

Cantharis—May be used in case involving inflammation of the bladder with constant inclination to void the urine.

Lachesis—Septic Peritonitis with great tenderness of abdomen. Cannot bear the weight of the sheet. All

symptoms seem much worse after a short nap. Flushes of heat. Disposition to throw all clothing from neck and chest.

Nux Vomica—After debauch or alcoholics involving the liver and stomach. When patient has been drugged with *narcotics and purgatives*. Irritable in extreme, cannot endure noise or excitement. Constipation with *frequent desire for stool or to void the urine*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DIARRHEA.

CAUSE AND COMPLICATIONS.

Simple diarrhea, if in its beginning and ending is uncomplicated with other diseases, is one of the minor ills; in fact in the average healthy individual it is often nature's method of removing the result of some transgression in diet, and requires no more treatment than a little quiet and a restricted diet.

Occasionally, what seems an ordinary diarrhea, when not properly managed may develop into a case of dysentery. Diarrhea may be the precursor of typhoid fever or symptomatic of a catarrhal inflammation of the bowels. Diet and drinking-water, especially the latter, may cause a troublesome diarrhea. During the first year of infant life, diarrheal diseases are very common and may be due to improper milk, summer heat, cutting teeth, etc. The foregoing are only a few of the more common forms of diarrhea, but sufficient to show the necessity of inquiring into each case before any rational advice or treatment

can be suggested. In spite of the best of care or on the slightest irregularity, some individuals are so predisposed to diarrhea that it becomes semi-chronic. Such cases require good management and well-selected remedies to accomplish a permanent cure.

Cholera morbus in a mild form may be confused with diarrhea, but in the former the attack is more sudden and is attended with vomiting and great prostration, with watery stool. In all cases of looseness of the bowels, the character of the stool should be ascertained, both for purposes of diagnosis and selection of remedy. The gradual change in increase of mucus and bloody stool indicates dysentery, which calls for *rigid rules and suitable remedies*.

DIET AND MEDICAL TREATMENT.

In the matter of absolute quiet and rest in a severe attack there can be little difference of opinion. In the more severe forms the patient should be placed in bed for a day or two at least. Ordinarily, with proper remedies the disease is of short duration, during which time a light diet is in order. There is no occasion for supporting the patient by diet as in a lingering illness. The moderate use of water is permissible. A too early return to normal diet before fully convalescent, causes a complete relapse. When the bowel trouble is well under control the patient may begin with lamb broth, soft-boiled eggs, boiled rice and milk toast, all to be taken in moderation.

Aconite—After dry, cold wind or in summer with cold nights, resulting chill fever and diarrhea, may be

nausea and vomiting. *Skin hot and dry with much thirst.*

Arsenicum—Diarrhea with nausea and vomiting. *Prostration* after stool, which is dark, watery and offensive, carrion-like. *Worse after eating, or drinking water.* The restlessness and great *thirst for water taking only a swallow*, are true characteristics of *Ars.* Worse from eating ice-cream, cold food, tainted meat or fruits, resulting in sudden attacks which resemble ptomain poisoning. Burning sensations in parts involved.

Baptisia—The bowel trouble is generally accompanied by a low type of fever, with soreness and bruised feeling in muscles, especially in the back. Tongue dry and brown except edges which are red. The mental condition is dull even to mild stupor with marked tendency to typhoid.

Bryonia—Not one of the oft-used remedies, but when indicated it cures quickly. Generally *worse from hot weather and the use of ice-cold water.* Worse in morning and on attempting to *move about.* Obligated to lie down and keep perfectly quiet. *Vertigo and headache on rising, with faintness.* Patient, if delirious, talks about the day's business or wants to get home again.

Calcaria Carb—Children who are slow in teething and generally backward. Sweating about the head at night. Face pale, craving for chalk, salt and sweet things. Child longs for eggs. Stool clay-colored, watery or undigested. *The condition of the patient is a better guide in selecting calcaria than the character of the stool.*

China—After acute disease, or long-continued attack of diarrhea where the patient seems weak, inclined

to profuse perspiration, emaciation and exhaustion. Worse after eating, at night and after *loss of blood or vital fluids*.

Cina—Stool whitish, mucous-like. Children suffering from worms. Exceedingly irritable, *will not consent to be touched or looked at*. Urine often white or turbid. Constantly *picking or rubbing the nose*. Tossing and crying out in sleep.

Colocynth—Intense griping, cutting colic pains in the intestines, especially after eating fruit, errors in diet, extreme vexation and grief have very often been quickly relieved by *Colo*. Stools yellow, bilious and bloody. Patient only finds relief by pressure on the abdomen by *bending double*.

Chamomilla—Ailments of children, with diarrhea. Stool green and watery with colic pains *worse at night*. Redness of cheeks or of *one only*. Child very irritable and peevish, crying much, only quieted by being *carried about*. Often palliative during the teething process. The *mental symptoms* of *Cham*. are of chief importance and when present with other symptoms the choice is certain.

Dulcamara—The first remedy to be thought of for diarrhea which is caused by *sudden changes in the weather from hot to cold*, or hot days and cold nights. For colds with diarrhea or dysentery, with slimy mucus in bloody stool, *Dulc.* is indispensable. Also for troubles growing out of *working in cold, damp places*, with rheumatic tendency (*Rhus Tox.*) with heat of surface and prostration.

Gelsemium—Diarrhea which precedes or follows

some mental or emotional ordeal; as the *fear of personal danger or injury*, the dread of appearing in public, fright, bad news, in fact depressing emotions from any source. (*Ign.*) Muscular weakness and trembling, with languor of mind and body.

Ipecac—Stool of Ipecac mucous, dark, pitch-like, often “green as grass,” frothy or fermented. If *persistent nausea*, with or without vomiting is present, *Ipec.* will make a quick and brilliant cure. There may be some colic with the nausea; after indigestible *food, veal, sweets, green fruits*, etc.

Mercurius—A remedy often indicated in dysentery, but less frequently in diarrhea. Increase of saliva, even profuse salivation, with swelling of the tongue, which is *soft, flabby, taking impressions of teeth*. Tongue coated with thick, yellowish or whitish coating, gums *swollen* and inclined to bleed, *breath offensive*. Stools watery, greenish, mucus or bloody-mucus, much urging or violent tenesmus which continues on after each movement. Sticky offensive perspiration *worse at night* and on exertion. All symptoms worse at night. (*Cham.*)

Nux Vomica—Patients inclined to dosing, dissipation, intemperance in eating, with general violation of the laws of health. Loss of sleep from night work or “Spreeing,” resulting in irritability and mental depression. In Jaundice and low fevers with *alternating diarrhea and constipation*. Stool often small, thin, or bloody mucus, *with frequent inclination for movement*, after which the *pain and tenesmus ceases*. (Opposite of *Merc.*) bad effects of alcoholic spirits and coffee.

Phosphorus—In chronic cases always worse in the morning (Sul.) watery and involuntary. Relief of stomach by taking *cold* things, water or ice-cream but is rejected as soon as it *becomes warm*. Often useful in the “bowel complaints” of the consumptive or tubercular subject. Emaciated, feverish and thirsty for ice-cold water, sense of “*all gone*ness” *in the abdomen*. Phos. acts best on slim, lean, flat-chested subjects.

Podophyllum—In painless diarrhea or cholera infantum with thin, watery yellowish, meal-like stool, Podo. is the remedy. In severe cases with brain symptoms, *rolling of the head from side to side*. With children during dentition, *frequent gagging or retching, without vomiting*. Stool often profuse, with the odor of carrion and generally worse in the morning.

Pulsatilla—Derangement of digestion from eating fat food, ice-cream and fruit (Ipec.) followed by diarrhea, worse at night or towards night. Stool mucus, green and changeable. Chilliness is marked, some heat but *no thirst*. Often useful in young girls with Puls. temperament, with aggravation *from getting feet wet* and from hot room. Always craving fresh air.

Rhus Tox—May be indicated in cases that have run on, taking typhoid form with fever-flushed face, dry, cracked, red tongue, intense *restlessness, backache, headache, drowsiness, full of dreams of tiresome work, hurrying to and fro*. The diarrhea is troublesome and exhausting, the stool may be scanty or profuse, often bloody, watery mucus. The condition of the patient will guide to the remedy that will cure the diarrhea and its concomitants.

Sulphur—In chronic cases, generally painless but urgent, *worse in morning*, driving one out of bed, Sul. will cure. Cases of the so-called chronic “Army diarrhea” yield at once to a few doses of Sul. Patient often speaks of a weak, faint, hungry feeling that occurs regularly about ten or eleven A. M. Sul. patient averse to bath, especially children. This remedy has a wide range of application, especially in scrofulous subjects. It may be given when other remedies fail to act or where no definite symptoms call for other remedies.

Veratrum Alb—The symptoms of this remedy are clean cut, and greatly resemble those of cholera infantum, or cholera morbus. In either case, or in diarrhea when the stools are *profuse and watery* with great *weakness, cold perspiration on the forehead*, cold, pinched expression on the face, Verat. will relieve nausea and vomiting with severe colic pains during stool, and exhaustion to faintness after it. Cramps in the extremities. *Skin cold and blue, with indications of total collapse.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under “Directions.”]

CHOLERA INFANTUM.

Of all the diseases popularly known as “summer complaint” or “bowel complaint” whether of adults or infants, none that has come under my observation has seemed so serious to deal with as real cholera infantum. The suddenness of attack, occurring as it usually does during the heat of summer when the vitality of the infant is often greatly impaired, together with the rapid course of

the disease, which may prove fatal within 24 to 48 hours, all contribute to an explanation of its large mortality.

SYMPTOMATOLOGY.

At the very first, the symptoms of all so-called "bowel complaints" have *much in common*, so that an early diagnosis is not always possible, but this fact does not in any way interfere with the success of the prescriber who is seeking the homeopathic remedy. Cholera infantum may begin with, or seem to develop out of, an attack of diarrhea or indigestion, but frequently the case is ushered in with *severe vomiting, copious, watery stool and rapid prostration*. The temperature may rise rapidly, or remain nearly normal. The stomach soon refuses to retain anything, rejecting its contents with force. The stool which was at first yellowish or green and watery, soon becomes almost odorless and like water, and is passed with force like water from a syringe. As the disease advances, the appearance of the patient changes rapidly, resembling that of a severe case of colera morbus. *The face becomes pale or livid, skin cold, eyes sunken and expressionless*, cold perspiration and symptoms of collapse multiply. The patient, unless relieved by a well-selected remedy, must soon succumb. If life continues on for a few days with no amelioration of the disease, the little patient gradually passes into a state of stupor from which it is not easily aroused. This latter condition is accompanied by rolling of the head from side to side with low, plaintive cries, the eyes open and motionless, the hands clenched, and finally general spasms and death. The case which began with cholera infantum, has involved

the brain, and the patient has passed into a hydrocephaloid state.

CAUSE, PREVENTION AND TREATMENT.

The avoidable causes which lead up to the prevalence of this disease should be well understood. In fact, ignorance on the part of those who care for infants is nothing less than a crime. Of course some of the contributing causes are beyond our control; for instance the long, hot days and nights of July and August, together with the fact that during such time, unless facilities are well-nigh perfect, there is great difficulty in the proper keeping of milk and food. Again, the process of teething which must be endured, is often such as to provoke attacks of bowel trouble. This period is during the second six months, which corresponds to the age when most infants are attacked with the disease.

Shifting now to the avoidable causes, mention of the most common will be made first, namely, defective food supply. To better appreciate the importance of this feature, it should be understood that the direct cause of cholera infantum is gastro-intestinal infection due to the presence of a micro-organism introduced into the system chiefly through food and water. These statements apply to bottle-fed infants. *Breast-fed infants, nursing healthy mothers, are quite exempt from cholera infantum and kindred ills.* A wide observation extending over a period of forty years leads me to make the above statement, *in the interest of the generations to come.* If an infant must be fed from bottle or cup there is but one ideal way of *minimizing the danger.* Although this is

not always practicable with people of scanty time and means, it is of such vital importance and the principle so well established that it seems inexcusable to disregard it. *Thorough sterilization* of bottles, cups, milk, water, in fact all that enters into the food, is fundamental. This takes time and care, and of course must be repeated daily.

Pasteurizing of milk on a large scale, and afterwards delivering to consumers, *after the commercial fashion*, has doubtless accomplished some good, but it has not proven a perfect success and can not be relied upon to eliminate infection. The utensils and articles entering into the preparation of the *food should be Pasteurized in the home*, after which it must be kept on ice or cold water. The many details are simple, quite well understood, and need not be detailed here. If after all precautions and the use of medicines, the case fails to respond or has a *constant tendency to relapse*, it may be well to make an *entire change in the milk*, or suspend the use of it altogether, substituting other forms of nutriment, such as *lamb broth, the white of an egg*, etc. During the hot days and nights much can be done by removing the little one from the heat of the city to the country, the lake-side or the mountains. The prompt reaction and permanent relief that comes from such a change is often most remarkable to witness. Through these improved hygienic and *preventive measures*, the enormous infant mortality in the great cities has been revolutionized. Ten years ago, during the months of July and August, cholera infantum was one of the most prevalent diseases. To-day such cases are rare. In this vast life-saving service, the credit belongs rather to *prevention than medication*. Yet

it must be understood that despite all efforts to prevent and at any time during the whole year, genuine cases of cholera infantum will occur, requiring the most prompt and painstaking prescribing. Owing to much uniformity of symptoms and conditions in most cases, only a few remedies have been called for, from which number the one best indicated will speedily change the case for the better.

The following remedies, named in the order of importance, should be considered. Indications for each have been fully given in the chapter on diarrhea, also see Section III. *Materia Medica*. *Verat*, *Alb.*, *Ars.*, *Podoph.*, *Ipec.*, *Sul.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CHOLERA MORBUS.

This very alarming name seems to have become attached to a disease which is very seldom fatal. The attack appears suddenly, without premonition, and is generally of very short duration.

SYMPTOMATOLOGY.

Nausea and vomiting, first of food and later of watery, yellowish fluid. This is soon followed by frequent, *profuse, watery stool*. Some pain and occasionally *cramps* in stomach, bowels and limbs. Little or no fever, but instead, *coldness of surface and cold perspiration on the face*, with indications of *great weakness, approaching collapse*. It seems to prevail in warm weather as a rule.

The direct causes often are indigestible articles of food; as unripe fruit, tainted meats, etc.

In the early stage, the disease resembles in some respects a case of ptomaine poisoning, or a mild case of true cholera; but the difference in causation and termination is vast. Ptomaine poisoning, is due to the presence of a specific micro-organism of the most virulent type. The same is true of cholera, which is also highly infectious. Neither is true of cholera morbus.

CARE AND MEDICAL TREATMENT.

The patient should at once be placed in bed, where warm applications can be best employed to *restore heat to the cold surface*. As the proper homeopathic remedy usually brings very prompt relief, there is as a rule no need of the use of stimulus, or of forcing down nourishment, which is generally rejected. Great thirst is often present, but water should be given sparingly, at first.

Veratrum, *Arsenicum*, *Ipecac* and *Carbo Veg.*, are remedies often indicated. *China*, *Croton Tig.* and *Podo.* may be called for.

Veratrum—Oftener used than any other remedy, for the reason that its proving affords a very complete picture of cholera morbus. The nausea and vomiting, the purging and the watery stool, the *cold surface and cold sweat on the face*, the pain and *cramps* find quick relief from a few doses of *Verat.*

Arsenicum—Has the nausea and vomiting, but it is attended by constant *thirst for cold water*. It has the marked *prostration*, but the surfaces and perspiration are

not, like *Verat*, cold and clammy. The *Ars.* patient is very *restless* and full of fear; fear of death and of being left alone. If the attack is caused by *tainted meat, or ice-cream and salads*, *Ars.* is among the first remedies to be thought of.

Ipecac—Where the *nausea is very constant*, with some vomiting and clutching pain about the stomach and navel. May have been caused by eating *green fruit, candy and sweets*.

Carbo Veg.—If during collapse there is the absence of the profuse cold perspiration of *Verat.*, the patient gasping and craving *for cold air*, the face cool, *often livid*, *Carbo Veg.* will reach the case better than *Verat.* or any other known remedy.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DYSENTERY.

(An Infectious Disease.)

Recently, some of the most trustworthy authorities have classed this among the infectious diseases, which fact should lead to caution in the management of such cases. Again, it must be admitted by all who have had practical experience, that during the autumn season there are constantly occurring sporadic cases due to climatic conditions and also not a few attacks clearly traceable to errors in diet, abuse of drugs, and constitutional predisposition.

SYMPTOMATOLOGY.

Dysentery often begins like an ordinary diarrhea with more or less colic, small traces of mucus in the stool, abdominal pains which increase with more frequent stool and increasing tenesmus. As a rule, by the second day the stool becomes mucous and bloody, gradually becoming clear blood very small in quantity but very frequent, with constant inclination for stool, which is attended with painful tenesmus and colic. General symptoms of more or less fever, thirst and prostration. In protracted cases typhoid symptoms may develop.

DIET AND MEDICAL TREATMENT.

Perhaps few, if any, diseases require more absolute quiet than dysentery. The patient should be *placed in bed at once and in a warm room*. The amount of nourishment should be very limited; broth, lamb, clam and chicken being preferable to milk. Water in small quantity is permissible. The following remedies are most frequently indicated.

Aconite—*Chill, fever, pulse full, quick. After sudden check of perspiration, fever, thirst, dry, hot skin, great restlessness and anxiety, stools frequent and bloody. Acon. often useful in very first stage, when it may arrest the further progress of the disease.*

Arsenic—Exhaustion, especially after each stool with anguish and restlessness, craving for water but *takes only a swallow, vomiting after drinking, worse from eating ice-cream or rancid, spoiled food as salads or meat, pulse weak with threatening collapse. Worse after midnight.*

Belladonna—May be indicated, especially with children when the brain becomes involved.

Bryonia—In hot weather after drinking excessively of cold water which is craved in large quantities. Cannot be moved or rise without aggravation, faint, vertigo on rising.

Colycinth—When with the Dysentery there is intense colic, griping in bowels causing patient to scream with pain, pressing abdomen and doubling up in agony, aggravated by eating or drinking. May be caused by eating unripe fruit.

Dulcamara—After sudden changes from *warm to cold weather* or after taking cold. After working or going in damp, cold places.

Ipecac—Occasionally useful when there is continual nausea or vomiting, with stools that are greenish, mucus and blood, worse from eating unripe fruit.

Mercurius—Frequently indicated. Stool bloody, mucous, very frequent with *agonizing tenesmus and straining, even after stool*. Worse at night in cool, damp weather. Perspiration sour and offensive, worse on least motion and at night, tongue coated, *much saliva* with offensive breath.

Nux Vomica—Thin, bloody mucus stool with *constant urging* and tenesmus which *ceases after stool* (being the reverse of Merc.) After *prolonged drugging*, debauchery and abuse of alcoholic drinks. Considerable backache, patient irritable and averse to all noise and light, worse two or three A. M. The cause of disease, and

condition of patient must govern in selecting the remedy. Also see remedies under head of Diarrhea.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

HEMORRHOIDS.

(Piles.)

They are divided into the external and internal, according to their location; and again, into dry and bleeding piles.

SYMPTOMATOLOGY.

At first, a sense of fulness and pressure in the rectum. Later soreness and pain, much aggravated during or after stool; at which time small, round, livid tumors are discoverable about the anus. Occasionally there is a rupture of the pile tumor, resulting in what is termed "bleeding piles." Sometimes the internal piles are forced out during stool and, unless promptly pressed back, they become exceedingly painful. There can be little difficulty in making a diagnosis. However, complications may arise, in the way of ulceration, fissures, etc., which render an accurate diagnosis most difficult. Such complications grow out of neglected cases. Early attention cannot be too strongly urged.

CAUSATION.

Persistent constipation often precedes piles, and must be considered the chief predisposing cause. Also hereditary tendencies, long sitting or standing, misuse of purgatives, over-lifting and, temporarily, pregnancy.

TREATMENT.

This should be both local and general. The use of Calendula cerate and other simple applications will afford some relief to the local suffering. They should not only be applied on the external parts, but as well as possible on the internal surfaces. Hamamelis, (cerate or tincture) may be very useful as a local application, and the same remedy may be taken internally. The bowels should be kept regular if need be by the use of warm water enema, and proper remedies. Cathartics should be avoided. In acute cases, rest and proper treatment may cure promptly. Chronic cases, require time and not a few are incurable, except by a radical surgical operation. This is preferable to allowing the disease to prey upon the nervous system until, worn out with suffering, the patient gives way to despair.

Whatever contributes to good digestion and normal regularity of the bowels, will hasten the cure. If an unfortunate occupation has had to do with causing the piles, at least a temporary change should be made.

In addition to the internal remedies described under "constipation," see *Puls.*, *Bell.*, and *China*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

PARASITIC DISEASES.**WORMS.**

There are many species of worms that inhabit the gastro-intestinal tract, all producing more or less symptoms in common. Two of these outnumber all others by a large majority, and their treatment in some respects will serve as a guide to others. For instance, in any case of worms where the diagnosis is clear and positive, there are three things to be considered and accomplished if the cure is to be radical and permanent. First, to expel the worms present; second, to adopt such changes in diet and habits as will prevent re-accumulation; third, to make a careful selection of a homeopathic remedy to correct any abnormalities or predisposition of the digestive tract which may have contributed to their presence.

TAPEWORM.**SYMPTOMS AND TREATMENT.**

The presence of tapeworms is doubtless more prevalent than is generally supposed. Not infrequently the first evidence of their presence is the appearance in the stools of the flat, whitish, tape-like segments of an inch or more in length. The symptoms which may have preceded this evidence have generally been attributed to flatulent indigestion, vagaries of appetite, and general unreasonableness about hours of eating, etc. The flat segments, often several hundred in number, are connected with the head by smaller, narrower links. The whole length of the parasite may be from ten to forty feet. The symptoms may be numerous but easily misinterpreted. Some are

as follows, and if found in combination are quite characteristic. *Voracious, unreasonable appetite between meals or even at night*, yet losing flesh, and a sense of *uneasiness or even motion about the abdomen*, resembling the effects of gas, both of which seem suddenly better *soon after eating*. There may be *faintness, nervousness*, even spasms, also *itching of the nose and anus*.

The introduction of the parasite into the system is due chiefly to the eating of *uncooked meat*, especially fresh beef and pork. *Thorough cooking or thorough salting kills the parasite*. This applies not only to tapeworm but to other parasites, especially trichina. Among the *safest and most effectual* means of expelling the tapeworm is the very painful use of pumpkin seeds, as follows: After a day and night of fasting eat a pint of the shucked seeds, to be followed within a hour or two by a large dose of castor oil. A decoction of the seeds, if more palatable, will answer the same purpose.

PINWORMS.

Sometimes called threadworm or "seatworm" is by far the most common and the most annoying of all intestinal parasites. It is most prevalent with children. In appearance it resembles a piece of the *finest white thread one-fifth of an inch in length*. They may often be discovered *about the anus*, their presence being announced by a persistent itching which the child or adult finds most tantalizing, often *worse in the evening* or at night. The embryo deposited about the anus may contaminate the finger nails and bed-clothing, so that the parasitic germs

are easily transmitted to a companion or bed-fellow. Thus the whole family, children or adults may become victims of the parasite.

TREATMENT.

The daily use of warm salt water injections appears to be a prompt relief and doubtless destroys the eggs about the anus and rectum. The younger worms often reach the small intestine, so that an active saline cathartic repeated several days in succession will help to accomplish the expulsion and destruction of the worms. Santonin given in the lower triturations, followed by an occasional laxative, has been found useful in many cases. The diet should consist of plain, nourishing food *avoiding candy and all sweets.*

Aconite—For the restless, feverish condition especially at night attended with thirst and itching about the anus, *Acon.* will give temporary relief and may prevent more serious developments.

Cina—A most useful remedy which is characterized by great *irritability* (similar to *Anti. c.*) and constant *rubbing and picking at the nose.* Child looks pale, sickly, with dark rings under the eyes, wakens from sleep in fright and terror; restless and feverish in sleep, with grating of teeth.

Chamomilla—Mental symptoms similar to *Cina.* Always worse at night, wants to be carried about the room, one *check red and the other pale.*

Sulphur—Pale, sickly appearance, skin unhealthy, *inclined to eruptions.* Child complains of faintness be-

fore noon, may be morning diarrhea. Very *averse to any kind of a bath*, even screams with dread or fright when water is applied to surface of body.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISEASES OF THE LIVER.

GENERAL CONSIDERATION.

In the majority of cases where abnormalities of the liver become evident it is due to causes outside of the liver. The diseases of stomach and bowels, the *mechanical interference with the flow of bile* through the bile ducts are the most prevalent of these. Also, general malarial infection, the prolonged use of Quinine, or of alcoholic liquors, are frequent exciting causes.

Not infrequently diseases of the liver occur *primarily*, followed by an involvement of other organs. In nearly all affections of the liver there soon follows a failure to secrete the *normal* quantity of bile, giving rise to conditions which are essentially the same in different diseases of that organ; such as *jaundice*, light or "clay-colored" stool, dark yellow, saffron-colored urine, with great inclination to sleep. To differentiate and enlarge upon all the rare and more obscure disorders of the liver is the work of a complete text-book. Only the more prevalent forms of liver affections, with their treatment, will be mentioned here.

Again, it can be affirmed that the Homeopath is not handicapped in treatment by want of a name. The

totality of the symptoms, both subjective and objective, form a safe guide to the selection of the curative remedy.

ACUTE CONGESTION OF THE LIVER.

This is the most common liver ailment and is often the result of excesses in diet or exposure to cold, especially in hot weather, or a hot climate with more or less malaria. At first, the symptoms are sense of weight and pressure, sometimes pain in region of the liver, the pain extending under the right shoulder-blade. Later nausea and vomiting may occur. Stool often light-colored, urine dark. Headache, vertigo and drowsiness. The eyes take on a yellowish-green appearance. Later the surface of the body assumes the same jaundiced look, the latter continuing for some time *after all other symptoms disappear*.

CHRONIC CONGESTION OF THE LIVER.

CAUSE AND COMPLICATIONS.

It often happens that badly managed cases of acute congestion fail to clear up, or that mild cases are neglected and recur from time to time, resulting in chronic congestion. Again, persistent errors in diet, and dissipation, also a residence in a malarial region, may gradually develop a chronic congestion of the liver with essentially the same symptoms, although less pronounced than those in acute congestion. The *mild jaundiced* appearance, the sense of discomfort in the right side and under right shoulder-blade, the persistent high-colored urine, depres-

sion of spirits, vertigo, poor digestion, are generally present.

INFLAMMATION OF THE LIVER.

(Hepatitis.)

This affection of the liver, like congestion and abscess, is most common in tropical climates, but may occur in any. Many of the symptoms are the same as in congestion. In addition there is marked tenderness on pressure or any movement. Slight chills with a persistent fever, high temperature, thirst, vomiting and diarrhea. When such symptoms are present they are scarcely distinguishable from abscess of the liver, in fact the latter may follow the former if proper remedies are not used early. In the event of an abscess forming, the chills will continue, the fever increase, the pulse becomes more rapid, with copious perspiration, exhaustion, emaciation. The temperature fluctuates daily; in fact all the usual symptoms of suppuration follow. Acute inflammation of the liver may follow an injury, but the symptoms are essentially the same. The history of the case will throw some light on the diagnosis and treatment.

JAUNDICE.

(Icterus.)

As already stated, many of the affections of the liver may induce jaundice, although in some it may be entirely absent. In daily practice it is generally seen as a *symptom*; yet it *has* prevailed as an epidemic, especially in

tropical climates. In the U. S. army during the Civil War, in malarial districts, there were over ten thousand cases in a single year. When uncomplicated, jaundice has few preliminary symptoms, and is very seldom fatal. The whites of the eyes become tinged with yellow, and later the face, neck, trunk and limbs become sallow. The urine *dark porter-color* (due to the elimination of bile by the kidneys) *stains linen yellow*, stools are light *clay-color*, persistent itching of the skin etc. The causation of jaundice in different cases may be very dissimilar, but the resulting pathological condition is essentially the same. Jaundice is traceable in each case to the *non-removal of the biliary coloring matter from the blood by the liver*; or if removed, re-absorption takes place and the bile is thrown upon the skin and other organs. The jaundice of young infants is common, usually of short duration, with no serious results. The liver is often the seat of incurable diseases in the case of those who are given to persistent use of alcoholic drink. In such cases the jaundice may not be so marked. There may be either atrophy, enlargement, or fatty liver; *abdominal and general dropsy* follow in succession.

TREATMENT OF DISEASES OF LIVER.

DIET AND MANAGEMENT.

In the diet, medical treatment and general management of acute diseases of the liver, there is much that is applicable to all cases. If in any case there is fever, the patient should be placed in bed at once and remain there until the temperature is normal.

In all non-febrile cases the patient should be kept quiet and avoid the outlay of physical strength, although it may not be necessary to remain in bed or even indoors; much depending upon the strength of the patient and the severity of the symptoms. Without exception, the *diet should be light*, consisting of articles of food easily digested; generally in the liquid or semi-solid form. *All rich food, coffee and stimulus to be avoided.* The quality and quantity of food cannot safely be increased until the urine assumes a *lighter color* and the normal appetite returns. (See index "use of drinking water"). A daily movement of the bowels is desirable. The therapeutics may properly be grouped under one head. Each case or each patient must be treated as a whole. A remedy must be selected which best covers the cause of the disease and the condition of the patient. There are no specifics for diseases of the liver. In addition to the following remedies those for indigestion and kindred ills might be considered.

MEDICAL TREATMENT.

Aconite—In the early stages of congestion or inflammation. After the chill or without a chill, if there is a *high fever* with rapid, full pulse, much thirst, sometimes vomiting, skin hot and dry, *patient very restless.* Pain and tenderness over the region of the liver; may have been caused *by cold and exposure or fright and anger.* A few doses of *Aconite* will result in a free perspiration, quiet the patient, relieve the pain and hasten perfect recovery. *Aconite* relieves the jaundice of new-born infants.

Arnica—Often the remedy when the trouble has

been caused by an *injury, fall or blows*. The parts are intensely *lame and sore*.

Arsenicum—Chiefly indicated in connection with cases of malarial fever or in those suffering from the effects of *alcoholic drink*. The patient seems *very weak*, and prostrated by *slight effort*. The *thirst is very great* yet drinks but little at a time. Very restless and full of fear of death, and even of being left alone. *Burning* pain in right side greatly relieved by application of heat. All symptoms worse after midnight.

Belladonna—Occasionally indicated, especially when associated with *severe pain from gall-stones*. *Pains come and go suddenly*. Patient is flushed with heat and redness about the face and head. Cannot tolerate the *least jar or noise*.

Bryonia—Sharp, stitching pains in the liver, much worse from pressure or *motion*. Patient inclined to lie on *painful side*. Pain in limbs, obstinate constipation. Thick white coating on tongue. Vertigo and *faintness* on attempt to rise and move about. Dislikes to be moved.

Calcarea Carb—In chronic cases with enlargement and torpor of liver. *Distention over the stomach* and abdomen with constipation, stool of whitish *clay-color*. Cold, damp feet, with poor circulation and constant *chilliness on exposure to cold air or to drafts*. More apt to be the remedy with persons inclined to grow “fat and flabby.”

China—In somewhat prolonged cases with much debility or after *loss of animal fluids*, night-sweats, etc.

Affections of the liver in malarial regions. (See *Ars.*, *Gels.* and *Eupator.*) Great languor, and out of humor. Muddled condition of the mind, with severe headache worse at night. Tongue coated yellowish, no appetite, great aversion to meat, sour eructations with distention and oppression about stomach and liver. Useful after *frequent attacks* of gall-stones, said by some to prevent formation of the same.

Chelidonium—More or less pain in liver with a constant *pain beneath the right shoulder-blade, a reliable indication.* Also the clay-colored stool, the jaundiced skin. Has been curative in both *acute and chronic cases.*

Chamomilla—In children after errors in diet, after taking cold, bad effects from anger; or the patient may be in an angry, irritable mood, generally worse at night. Often the remedy for jaundice of infants.

Gelsemium—In the early stages when there is some fever without thirst, much prostration and headache. A remedy of value in "*bilious fevers,*" intermittent, and fevers in malarial regions. (See *Materia Medica.*)

Hydrastis—Gastric disturbance is marked, with a sense of "*all-gone*" feeling in stomach. A remedy of first importance in *catarrhal inflammation.* Bitter taste with raw, smarting sensation in mouth and throat. In elderly people with cough, catarrhal and bronchial trouble.

Lachesis—In the more chronic cases occurring during the climacteric period, with hot flushes and inability to endure anything tight *about the waist or chest.* Wakeful nights, or if able to sleep all symptoms seem much

worse afterwards. Cannot tolerate the weight of clothing or having anything about the chest and neck.

Lycopodium—Especially indicated in chronic cases *with incessant annoyances from flatulence*. Gas is rumbling in stomach and abdomen *like an yeast-pot*, or it is belched up as soon as patient eats even but little, which gives rise to a sense of *fullness or distention as after a large meal*. Abdomen is also distended with gas, with pain running *from right to left* (See Mat. Med.)

Mercurius—A remedy much abused but occasionally indicated. Soreness in the liver with some pain, *profuse sweats especially at night*, which afford no relief. Tongue *heavily coated* and flabby or swollen *taking imprints of the teeth*. Breath very *offensive with increased flow of saliva*.

Nux Vomica—This remedy may be used to begin homeopathic treatment after excessive use of *drugs and especially purgatives*. Also after over indulgence in highly seasoned, rich food, or in those given to the use of *alcoholic drinks and dissipation*. Excessive use of strong coffee, and persons of *sedentary habits*. Headache in morning with irritability. *Nothing goes right*, cannot endure the slightest contradiction. *Pressure in stomach*, nausea and vomiting after eating. Constipation or occasional diarrhea, with constant inclination to stool. Patient generally worse in *the morning*. Often worse at *3 A. M.* *Cannot rest or sleep*. Particularly useful for men who, from over work, or dissipation have become very nervous and irritable.

Podophyllum—Often indicated and used when the

symptoms resemble those of *Merc.* In addition there is generally much more *nausea* and an inclination to *gag without vomiting*, with weak, *gone feeling in abdomen*. Jaundice of infants, with watery, *painless stool*. Torpid liver without fever, stools *light color*, yellow, pasty. A low trituration 3x often used with excellent results.

Pulsatilla—May be useful in case of indigestion of *long standing* which has resulted in *derangement of the liver*. The stomach symptoms predominate. (*See chap. on indigestion.*)

Sulphur—In chronic cases where the indications are not clear for any one remedy, or where remedies well-chosen have failed to give *results a few doses of Sulphur*, and later proceed with the treatment in the usual way.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISEASES OF THE GALL-BLADDER AND GALL-DUCTS.

Under this head most medical authors include biliary colic and gall-stone colic. Formerly gall-stone disease was treated medically only, but in these latter years modern surgery, with its improved methods, has made claims for recognition and demonstrated that surgical operations on the gall-bladder are comparatively safe and successful. This triumph of modern surgery has made relief *possible* in one of the most painful diseases to which flesh is heir. It is a sound principle in practice, confirmed by a majority of the most capable physicians and sur-

geons, that all cases, for a reasonable time at least, should be considered as subjects for medical treatment, *unless urgent indications arise for early operative measures*. The co-operation of a surgeon with the physician in these cases often becomes quite as necessary as in appendicitis.

SYMPTOMATOLOGY.

The presence of gall-stone or other insoluble formations in the gall-bladder is first made known by some or all of the following symptoms. An excruciating pain of a *sharp, boring* character is felt in the region of the *curved portion of the right lower rib* and pit of the stomach. The pain may extend to the back and to the navel and sometimes through the chest, causing palpitation and dyspnea. *Pressure over the gall-bladder cannot be endured*. Nausea and vomiting are persistent and in severe cases exhaustion and symptoms of collapse may follow. As a rule the pulse and temperature do not seem to participate in the violent symptoms, except in the later developments. The pulse is occasionally small and very rapid. The presence of a foreign body in the *bile duct* (causing these violent symptoms) and *obstructing the normal flow of bile* will of course soon result in jaundice and high-colored urine. The duration, severity and recurrence of similar attacks depends mainly upon the number and size of the gall-stones, which vary from that of a millet seed to that of a hen's egg. The formation of these various biliary concretions undoubtedly requires months and years, during which time their presence is not often recognized. Modern research has made it plain that the presence of these foreign bodies in the

gall-bladder often results in the *bacterial infection* of the entire *biliary tract*, which often interferes with the normal flow of bile resulting in so-called "bilious attacks," and "stomach troubles." In these latter cases (semi-chronic) the paroxysms of pain are not marked, sometimes entirely absent, yet the unmistakable symptoms of defective secretion and flow of bile are present. In such cases a line of treatment directed towards the regulation of the action of the liver and the normal flow of bile, is fully as important as in those characterized by great pain and more violent symptoms.

MEDICAL TREATMENT.

For those who have suffered from an attack of gall-stone colic, or who give evidence of infection of the biliary tract, a course of treatment should be directed against a recurrence. The formation of normal bile and its transmission through the ducts can be greatly promoted by proper management, which includes not only medicines but exercise and diet. For those who are suffering from overwork, worry and indoor life, nothing can be suggested as of greater importance than plenty of *exercise in the open air*. Walking, golf, and in some cases, horse back riding. Those who have indulged in "high living," especially in the excessive use of fatty foods and sweets, should change to moderation or abstinence. All alcoholic beverages should be discontinued. The normal action of the bowels is most desirable. Hygienic management and diet should be the main dependence. The free use of pure drinking water (see index "use of drinking water") is always in order. If possible, put aside

worry and everything depressing, for the penalty is often paid by the liver.

Perhaps no one remedy has received so much commendation as olive oil. For many years I have used for this purpose (and all domestic purposes) an olive oil obtained from the Boericke & Tafel Homeopathic Pharmacy, 145 Grand Street, New York City. The purity and consistency of the oil is a matter of no small importance. Various theories have been advanced concerning its mode of action. My own observation has convinced me that the oil enters the duct and *as an oil* facilitates the passage of the gall-stones into the intestinal tract. This conclusion is the result of observation made in fatal cases of complete obstruction or *impaction* of stone in the duct where the oil had reached the point of obstruction but was unable to do more for a case which had become purely surgical and finally fatal. Olive oil is no specific, and those who have enthusiastically claimed so much for it have paved the way for some one to make the fatal blunder of waiting results until the life of a patient is lost. In my estimation it is one of our most valuable aids and can be used without prejudice, in connection with the homeopathic remedy, but it should not be depended on to the exclusion of other means. In acute cases with much pain, it may be given in doses ranging from two to six ounces, of the pure olive oil. Smaller doses are to be given and repeated in mild or threatening attacks; or as a preventive of frequently recurring attacks it may be used in doses of one tablespoonful per day. No harm can occur from the use of the oil even in the larger doses, except a slight indigestion which will disappear when

the oil is discontinued. Of course it must be obvious that in cases where the mechanical feature so predominates as in the passage of gall-stone and renal calculi, the usual prompt, definite action of the well-selected homeopathic remedy cannot always be depended upon. However, there is not lacking an abundant clinical experience to prove that in many cases the indicated remedy does in some way overcome mechanical defects and hasten relief. The patient as a whole must be considered, just as in the ordinary way of prescribing. The remedy should be given often until relief follows, and in severe cases a change of remedies should be made after an interval of an hour or more.

Aconite—After much suffering. If the patient becomes *feverish* with hot skin, great thirst, *extreme restlessness* with great fear of death. Mental and physical agony. Very sensitive to pressure, with nausea and vomiting.

Belladonna—Often indicated. The pains about the gall-bladder and stomach are *clawing and clutching* in character. They come and go *suddenly* and are greatly aggravated by the least *jar in the room*. The face is suddenly flushed, with throbbing in neck and head; the pupils dilated, great aversion to any light or noise.

Bryonia—The pains are generally sharp and piercing, all much worse from motion. Patient *cannot be moved without screaming*, prefers to lie on *painful side*, cannot endure the least pressure or touch about parts involved. Sudden change in color of face with vertigo and *faintness on rising*.

China—By some physicians regarded as a most valuable remedy in the frequently *recurring mild cases*, with evidence of interference in the normal secretion and flow of bile, the jaundiced skin, and periodicity of recurrence.

Colocynth—Twisting, cramping pains relieved by pressure, patient unable to sit or stand erect; bent over and knees drawn up. Pain *intense*, driving to madness.

Ipecac—Constant nausea with cramps and clutching pain about *naval*.

Lycopodium—Of importance in the more chronic cases, with bloating, fermentation and pain about stomach and liver. Constant sense of fullness, cannot drink or eat on account of same.

Nux Vom—After much dosing with crude drugs or in case of those who are *given to excesses in diet or to use of alcoholic drink*. Patient irritable, cannot tolerate the least interference.

Podophyllum—Torpid liver, jaundice, clay-colored stool, urine high colored, nausea and gaging but cannot vomit.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISEASES OF GENITO-URINARY ORGANS.

GENERAL CONSIDERATION.

It is safe to say that there is a great deal of uncertainty still prevailing as to all the processes that go on in the kidney. This is true of the kidney in health as well as when diseased. The one predominant function of the elimination of toxic material from the system is well understood. Many diverse and dogmatic assertions have been made by specialists, which have led to confusion rather than definiteness of diagnosis and treatment. There has been no lack of endeavor to obtain better results. The anatomical location of the kidney is not favorable to a physical examination either during health or disease; so that much that is known has been gained from urinalysis and post mortem examinations. Most of the organs of the body are so located that during life their normal functions and pathological changes can be ascertained with much exactness. This it seems to me will explain much of the difference between our definite knowledge of diseases of the kidney and those of other less important organs.

ACUTE BRIGHT'S DISEASE.

(Acute Nephritis.)

This is by far the most prevalent disease of the kidneys. The disease is considerably more common in males than in females. Abuse of spirituous liquors and exposure to

cold and dampness may be considered the chief exciting causes with men. The one condition that most characterizes this disease is albuminuria.

During pregnancy, albuminuria is of frequent occurrence. It is in this form that it generally attacks women. Infectious diseases especially scarlet fever and diphtheria are sometimes attended or followed by acute nephritis, or Bright's disease. This has been pre-eminently true with scarlet fever. Occasionally it is seen after measles, whooping cough and mumps. Urinalysis in all cases of tardy convalescence should be resorted to, for much depends upon the care and treatment of a case complicated with albuminuria. Bright's disease in the acute form makes rapid progress and is *often* unrecognized in its *early stages*, resulting in dangerous exposure and needless aggravation.

SYMPTOMATOLOGY.

In the most acute form there is chilliness followed by some fever, headache, backache and nausea. The urine becomes scanty and dark in color, sometimes bloody. The usual tests with heat and nitric acid will show considerable albumen. The face and limbs become pale, puffy, and pit on pressure. Dropsy may become general. Without proper care and remedies such cases are generally fatal. With care and remedies most cases will recover. Some will pass along, making a partial recovery, and take on the form of "chronic Bright's disease," which is simply slower in progress and more difficult to cure.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

URINARY ANALYSIS.

The urine should be examined at reasonable intervals in health and frequently during the course of disease. The sample of urine to be sent to the physician is important and should be the entire 24 hours quantity and should be collected in the following manner. At the hour at which it is desired to begin, the bladder should be emptied and this urine thrown away; then all the urine passed in the succeeding 24 hours saved and the bladder emptied at the expiration of this time. The total for the 24 hours should be measured after which a four ounce bottle of this mixed urine should then be suitably labeled and sent for examination. The total amount for the 24 hours should be marked on the label also. The early and definite diagnosis of Bright's, diabetes, and kindred diseases is made by examination of the urine.

As a result of a thorough urinary analysis the diet can often be changed to great advantage, also the kind and amount of water that the patient should drink can thus be determined, all of which is of equal importance to the medical treatment.

CHRONIC NEPHRITIS.

The chronic form of this disease may approach and continue for months and years without detection. The symptoms are so slight and obscure as to attract no attention, and it may not be preceded by any acute illness. Gradually the pale face or swelling about the ankle arouses suspicion and leads to urinalysis which estab-

lishes the diagnosis. Later developments, unless checked by treatment, are essentially the same as in the acute form. The hygienic management of these cases is of the utmost importance. In the case of children after infectious diseases they should not be exposed to cold too soon after recovery, and with any signs of kidney trouble they should not go in the cold at all. Intemperance and excesses of all kinds must be discontinued. Great fatigue, nervous excitement, and exposure to cold chilling the surface are all to be avoided. (See index "indications for use of drinking water.")

MEDICAL TREATMENT.

Aconite—If after exposure to cold, chill and fever follow, with *dry, hot skin*, and restlessness, a few doses of Acon. may be given as a temporary remedy.

Apis—Several cases occur to me where Apis cured promptly. No remedy presents so complete a picture of acute Bright's disease. The *pale, puffy face* with swelling about the *eyes* resembling a blister; general dropsy with *scanty, bloody, albuminous urine*. Difficult breathing and inclined to *stupor*. Burning pain with frequent urination.

Arsenicum—Some similarity to Apis. The face is pale and waxy-looking, but less swelling about the eyes. The *Apis* patient may be very weak but less so than *Arsen.* Very restless and anxious, cannot be left alone. Thirst, nausea and vomiting follow drinking. *Cannot lie down*, must have head high. Urine scanty and *dark with frequent urination*. *Exhaustion* after the slightest effort

Belladonna—In some cases where the brain symptoms predominate, *throbbing* in the head and *carotids*, with *flushed face*. Constant *drowsiness* but cannot sleep. The head and face very hot, with cold feet and hands. After scarlet fever.

Bryonis—After measles when the chest organs become involved. *Premature* disappearance of the eruption with cough and painful breathing. Child cannot *move or be moved* on account of pain, faintness and *vertigo*.

Calcarea Carb—In the milder, slower cases with *Calcarea* constitution, inclined to grow “fat and flabby,” with tendency to curvature of the bones, large head with faulty development of teeth and bones. Distention of the abdomen, *perspiration profuse, especially about the head at night*.

Cantharis—Where there is frequent severe, burning pain on urination *Canth.* should be considered. Also bloody urine with mucus and albumen. The mental symptoms resemble *Bell.* Mania with rage and excitability.

Gelsemium—Cerebro-spinal system may be involved, with drawing the head backward, considerable fever but no thirst. Patient weak, *drowsy and listless*. Eyes partly closed, with great heaviness of lids.

Kali Carb.—Especially after whooping-cough; the face, especially about the *upper eyelid, looks puffy or blister-like*. Pain in region of kidneys. Cough and other symptoms *worse 3 A. M.*

Lycopodium—Gastric derangement, with gas and

distention of abdomen. Pain in Back before urinating, ceases after. Red, sand like sediment in urine. Patient worse 4 to 8 P. M.

Lachesis—After or during severe case of diphtheria or scarlet fever. The general symptoms should be considered. The kidney and bladder symptoms may be absent. In some cases the urine is dark, blackish and albuminous. Patient always *worse after sleep.*

Rhus Tox—May follow strains, over-lifting, getting wet, with pain and general lameness in all muscles especially *the back.* Tossing about, *intensely restless,* with fever, dry mouth and tongue. The face is swollen, *especially about eyes and nose,* urine scanty and high colored. Dropsical condition following scarlet fever, especially after exposure *to damp room or from getting wet.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

URAEMIA.

HISTORY AND SYMPTOMS.

Uraemia often forms the last chapter in the fatal ending of most cases of diseases of the kidneys. In health the normal kidney excretes from the blood a certain toxic element or elements formerly thought to be urea, hence the name uraemia. It has been definitely ascertained that the poisonous element is not urea, yet the name of the disease continues. When, from any cause, the secreting function of the kidney ceases, this toxic element is retained in the blood, giving rise to the so-called Uraemia. Much patient research has been expended in the effort to

determine the nature of this poison but as yet the problem remains unsolved. The symptoms develop in the order mentioned. Headache, ringing in the ears, dimness of vision, vomiting, convulsions, stupor ending in deep coma and death. During the early symptoms, the urine may become very scanty or entirely suppressed.

MEDICAL TREATMENT.

In cases developing out of some acute disease or where the function of one or both kidneys remains in action, treatment may be resorted to with a good degree of confidence; whereas those of a chronic character or growing out of chronic disease of the kidneys are well nigh hopeless. The bowels should be flushed repeatedly with warm water injections. Liquids should be given freely when the stomach can tolerate. Water, (See index "drinking water,") milk or lemonade, all may be helpful. Few remedies seem to cover the ordinary case.

Apis—Apis is among the first. Urine scanty or suppressed. Dull, drowsy condition with occasional *piercing screams*. *Face bloated*, with puffness about the eyes. Mouth and tongue *dry* but no thirst. The *stupor* with startings in sleep is characteristic.

Arsenicum—Stupor not marked. Instead, great restlessness and tossing from place to place. *Thirst with nausea*. Face swollen but pale, sometimes pinched, anxious, full of fear. Urine scanty, albuminous, with burning in the kidneys and bladder.

Belladonna—After acute disease, scarlet fever or measles. The urine is scanty. Feet cold, head and face

hot. Drowsy but constantly starting up in sleep. Dread of noise or light. Pupils dilated.

Gelsemium—Head drawn back, with stupor and spasms. Prostration. After injury or disease of the brain and spinal cord.

Opium—Painless, heavy sleep with loud breathing, total *loss of consciousness*, eyes half-closed, pupils much *contracted*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CYSTITIS.

(Inflammation of the Bladder.)

CAUSE AND SYMPTOMS.

Acute Cystitis is characterized by a few definite symptoms which taken as a whole ought to prevent any doubt or confusion as to a diagnosis. The frequent, almost constant desire to pass water which causes intense burning pain is always present. The region of the bladder is very sensitive to pressure, with sensation of heat, pressure and pain; all worse from exercise. The disease is now associated with, or by some good authorities claimed to be caused by the presence of septic micro-organisms, the results of their action on the mucous membrane constituting cystitis.

There are several factors which favor infection of the bladder, as for instance the presence of stone, partial or complete retention of urine, or anything that may irritate, weaken or injure the mucous surfaces, as the unskillful

use of an infected catheter, etc. In fact, the same causes and conditions that bring about bacterial infection elsewhere, will lead to infection of the bladder.

CHRONIC CYSTITIS.

The causes that bring about acute cystitis, if not removed, will in due time establish chronic cystitis. The symptoms of the latter are less severe but far more persistent. The character of the urine becomes turbid and soon throws down a thick, whitish sediment composed largely of mucus and pus, with traces of albumen.

The microscope reveals bacteria in abundance, also blood and bladder epithelium and pus. The chronic form is subject to acute exacerbations due to some special irritating cause. The disease is far more frequent after middle age and is one of the most persistently prevalent of all in old age, hence the prognosis of complete and ultimate recovery is unfavorable. Much depends upon whether the patient is so situated that the extremes of exposure and fatigue can be avoided, also intemperance and extremes of all description.

MEDICAL TREATMENT.

In the acute form the patient should be placed in bed; in the chronic form, moderate exercise is permissible, *walking often proving less irritating than riding*. In chronic septic cases with characteristic urine the patient should drink freely of water.. (See index "drinking water.")

Aconite—In acute cases where after exposure to

cold chill and fever follow, with thirst and restlessness. Urine scanty and high-colored.

Apis—Urine very scanty with dark, smoky look. Constant urging, with burning, stinging pain during and after passing a few drops.

Arsenicum—Burning pain, frequent urging and distress, causing exhaustion and cold sweat. Bladder distended from retention. *Thirst, restlessness and anxiety.* Urine scanty, turbid, *mixed with blood, pus and mucus.*

Belladonna—After Acon., if patient continues feverish, skin hot, throbbing pain, all symptoms worse from noise, light or jar. Bladder very sensitive to the slightest touch.

Cantharis—Oftener used than any other remedy. The *intense burning, scalding pain* that follows the passing of a few drops of urine; the *constant urging*, with spasmodic pains about the parts; the fever and thirst, and yet the sight of water increases the pain. Urine often *bloody and scant.*

Dulcamara—After exposure to cold, damp weather, or when symptoms are always worse when the weather changes from *warm to cold.*

Hydrastis—In chronic cases with much mucus and pus in the urine, especially in *old people with cough and catarrhal affections.*

Lycopodium—Much relief after voiding the urine, especially in cases inclined to *gravel*; uric acid in the urine is abundant. Inclined to *flatulence* and distention of the stomach and abdomen.

Nux Vomica—Painful, ineffectual but constant urging for stool and to urinate. Cannot endure excitement. *Nervous and irritable*, with those inclined to *dose and dissipate*. Bad effects from loss of sleep and the use of strong coffee.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DIABETES MELLITUS.

In recent years this disease has generally been classed with constitutional diseases rather than disease of the kidney. Diabetes is a disease twice as prevalent among men as among women. It occurs principally during childhood and middle age. Occasionally it seems to be hereditary.

CAUSATION AND SYMPTOMS.

Among the exciting causes mention may be made of intemperance, excessive use of sweets or saccharine food, exposure to cold, violent emotion, etc. The beginning of the disease is so insidious and the symptoms so few that it is doubtful if it is ever recognized until somewhat advanced. The slight loss of flesh, with loss of, or excessive appetite, and thirst, may precede many ailments without a thought of diabetes. However, at a later period, when all these symptoms become greatly increased, together with *excessive flow of urine, dry, parched mouth and throat*, the suspicion of diabetes becomes a practical certainty. Of course, analysis of the urine is required to make it absolute. The presence of sugar in the urine

when detected, even varying quantities but extending over a considerable time, will establish the diagnosis.

There are *three* characteristic features about every case of diabetes which seldom if ever occur simultaneously with any other disease, viz; The presence of *sugar in the urine,—the excessive secretion of urine,—the dry throat with intense thirst at night*. The complications growing out of chronic diabetes are of the gravest sort. I can readily recall some distressing cases of gangrene.

The prognosis in acute cases or a relapse in chronic ones is often fatal in a few weeks or months; whereas in the milder chronic form and under the best of management, they may continue twenty-five years. Such cases are now under my observation.

DIET AND TREATMENT.

A prescribed diet with all its limitations is not without objections. It often results in loss of appetite, strength and flesh, all good adjuncts to a normal condition. However, in diabetes some general principles are important. From "time out of mind" gluten bread and foods with the minimum amount of starch or sugar have been prescribed for all diabetics. Eggs, fish, and some meat are allowable. Pure drinking water should be taken freely. Spirits, wine and beer should be avoided. The disease may be held in check for many years, provided the patient is so situated as to avoid great physical fatigue and exposure, and what is quite as important, persistent worry of any sort whether about the disease or business cares. Exercise in the open air to a reasonable extent is far preferable

to the office or store. The disease is said to occur very seldom in the country.

MEDICAL TREATMENT.

No specific for diabetes has ever been found or ever will be; for the very good reason that no two cases are alike. This is practically true of every disease. The diversity of conditions requires a diversity of remedies. The therapeutics of all schools seem to be barren in this disease. As a homeopathist, my confession is that I cannot recall a genuine case that remained cured. A considerable number have been managed and instructed in such a way that average health has been maintained for many years. If the disease was caused by the use of alcoholic drink and related excesses, the facts and prognosis were made known to the patients, thus gaining their co-operation in treatment.

Nux Vomica, first low and later in the higher attenuations, aided by an entire change of habits and a proper diet, starts a case on a new lease of life. *Arsen.* is quite as often indicated in cases of this kind. If the patient's mental condition called for *Nux*, or if the case was one that had been dosed with all sorts of nostrums, *Nux.* would have the preference. If, added to the diabetic thirst, the patient gave evidence of decided weakness, with involvement of the stomach and bowels, *Ars.* could fairly claim the preference. So much in the way of illustration. Other remedies, for instance, *Pho.* and *Dulc.* might be properly compared, both in regard to the cause and symptoms of the disease. Putting the name of diabetes out of mind as a disease of the kidney, (which

some good authorities have done) would be the first step in the search for a remedy. The patient as a whole must command attention, and every case of diabetes has a right to expect *some benefit* if not a speedy and permanent cure.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISORDERS OF MENSTRUATION.

AMENORRHEA.

Menstruation, the "monthly period," is a normal function of women between the ages of 15 and 45. Any marked deviation from this normal function is expressed by one of the following names; amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia.

Amenorrhea, or absent menstruation, may be due either to *non-appearance* or to *suppression*. The age at which the first menstrual period occurs, is far from uniform, ranging from 12 to 18. If during this time the young girl is in good health, there is no occasion for worry or for medication, but if there is a tendency to anaemia, cough, lack of development and general nervousness, the case should be under treatment. Occasionally, the menses are delayed by some congenital defect which does not materially affect the health and is without a remedy.

The second form of amenorrhea in which the menses have appeared and subsequently failed to reappear at the proper time. Such a case may require care and medical treatment. The cause of the suppression and its effect upon the patient should be considered. If the

suppression is sudden, from a cold, fright or excitement, it may develop immediately some acute form of disease, and should be remedied as soon as possible. Proper management and the right remedy will accomplish this, in most cases.

Another form of amenorrhea, more common and not so easily cured, is the gradually decreasing and finally ceasing menses, which often precedes or is so associated with some deep-seated disease as to render it difficult to determine whether the suppression is the cause or result of the existing disease. Sometimes the one and sometimes the other may be the case. Such cases are often the victims of neglect until the system becomes deteriorated, *especially the lungs*, making an attractive culture-bed for the tubercular bacillus. This form often occurs from too close confinement *indoors*, as with school-girls, or those of the store and factory. The acute form, if neglected, may develop into the chronic state. A great variety of symptoms follows such suppression, depending largely upon the predisposition of the patient. In one it may be hysteria, in another incipient tuberculosis, in others profound anaemia. A partial amenorrhea *may* exist with some without serious menace to health, yet it is not always thus and, if possible, it should be corrected.

As an outgrowth of delayed or suppressed menses some forms of vicarious hemorrhage may occur, it may be from the nose, lungs or elsewhere. This *vicarious hemorrhage* may happen without organic disease, and is not necessarily of serious import, yet all such cases should be promptly treated for, when morbid symptoms and con-

ditions appear it is never right or safe to stand too long on the ground of the conservative physiologist, willing to trust all to the power of unaided nature.

Homeopathic remedies have won many an easy victory in amenorrhea.

MEDICAL TREATMENT.

Remedies selected with care and *discontinued when their work is done is the rule.*

Aconite—In plethoric, full-blooded young women, exposed to *chill, cold wind, fright, or checked perspiration.* Tendency of blood to the head, with fever, thirst and nervousness.

Arsenicum—In cases of long standing, anaemic and debilitated, *least exertion* fatigues and causes rapid respiration. Inclined to nausea and *thirst.* *Burning* pains, yet inclined to chilliness. *Puffiness of face and ankles.*

Belladonna—For acute symptoms following sudden suppression, with some excitement, *flushed face and throbbing headache,* pain across the abdomen, cannot *endure jar or noise,* very excitable and even delirious.

Bryonia—After suppression, especially in slow cases there is a frequent *nosebleed,* patient irritable and averse *to motion.* *Vertigo on rising up or moving about.*

Calcarea Carb—Inclined to “fat and flabbiness,” the Calc. constitution, cold, damp feet, with heat about the head, bloating about the stomach. Chronic cases with much headache in young girls.

Chamomilla—Irritable and impatient about everything. Worse after checked perspiration or fits of anger. One cheek red and the other pale. Symptoms worse at night.

Colocynth—If with suppression there is severe colic the patient bending double with agony.

Dulcamara—Suppression from sudden change to cold, damp weather.

Ignatia—Hysteria develops with laughing and crying, constantly sighing. Suppression from grief and trouble, cannot sleep.

Lachesis—In middle aged, or women approaching the climateric. The *hot flashes* are distressing, heat on *top of the head*, aggravation of all symptoms *after a short sleep*. Considerable nervousness and disposition to talk constantly.

Natrum Mur—Melancholy at time of menses, with intense headache. Worse every day *at 11 A. M.*

Pulsatilla—Often indicated. Suppression from getting the feet wet. Patient becomes nervous, *weeping at trifles*, inclined to be *chilly*, yet craves the open air. Digestion deranged, with coated tongue and bad taste in mouth every morning.

Sepia—In delicate, feeble constitutions with sallow look about the face and nose. Feeling of *weakness* in the *abdomen*.

May be useful after Puls.

Sulphur—A few doses may be given when other

remedies fail to act, especially in scrofulous subjects or those subject to eruption, or from suppressing the same.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DYSMENORRHEA.

Painful menstruation in some degree at least, seems to be the rule up to child-bearing, which generally results in permanent relief. Such cases are doubtless due to *mechanical or obstructive* causes which are often relieved by dilation of the cervix uteri.

This is accomplished by a simple and harmless operation which should be performed *when remedies fail* to relieve the pain. A functional form of dysmenorrhea is more common and one which remedies alone can cure. In the early or congestive stage of menstruation, the ovaries suffer most. The sympathetic nerves involving the uterus and abdominal organs feel the shock of this congestion and suffering. Whatever the cause of dysmenorrhea, the subject of it should avoid being too much on the feet for a day or two before the monthly period. See remedies under amenorrhea.

MENORRHEA.

Excessive menstruation may be of two kinds; its occurrence *too often*, or too great amount at the right time. This affection is most common in the anaemic, or they may become anaemic in consequence of it. Absolute quiet and rest at the time of the periods has a beneficial effect.

METRORRHAGIA.

This term is used to signify a uterine hemorrhage *not connected with the menses*. This may be somewhat active or it may be slight, passive and long continued. The causes are many. It may occur from sudden fright or shock, it may be a precursor of a miscarriage or follow the same, it may occur before, during or after confinement, or from disease, especially cancerous, during and after the change of life. Regardless of the cause of the hemorrhage the patient should be placed in bed and the utmost quiet maintained. Recalling the cases that have come under my care and observation, few have failed to respond to the Homeopathic remedy, and I remember none that proved fatal.

MEDICAL TREATMENT.

Aconite—With the pain and hemorrhage there is apt to be *mental* and physical agitation, pulse full and fast or small and fast, mind filled with fear and apprehension, predicting death when there is no danger. *Exposure to fright*, to chill which has checked perspiration causing fever and thirst. Vertigo and faintness on rising up. Particularly suitable *for full blooded, robust habit*.

Arnica—In cases that occur after fall or injury, with much soreness and lameness about the body. Heat of the head and cold extremities. *Shock, with nausea and vomiting*.

Arsenicum—General appearance of anaemia with exhaustion on slightest effort. In cases during or after the climateric, with *burning pain* in the parts involved.

Worse after midnight, cannot rest or lie down except with *several pillows to raise the head*.

Belladonna—Pressure and bearing down pain is severe and constant. Pain comes *suddenly* and *disappears* in the same way. Flow of *bright red blood*, with much vascular excitement, throbbing of head and *carotids*, *hot, flushed face*.

Bryonia—Blood is dark in color and not profuse. Aching in the limbs and back, all worse from the *least motion*. Patient asks to be quiet. *Vertigo and nausea on rising*.

Carbo. Veg.—In cases of long standing when the end seems near. *Surface cold and livid*, patient *begging for air*, *pulse very weak*.

Chamomilla—Violent pains labor-like extending to the limbs. Flowing profuse, with after pains. Patient very irritable and impatient with the pains and with attendants.

China—Already much blood lost, patient looks bloodless and near collapse. *ringing in the ears and dimness of vision*, colic and distention of the abdomen. After labor or miscarriage *China* has held and cured the most *desperate cases*.

Colocynth—The dysmenorrhea causes the patient to draw the lower *limbs up to the abdomen*, which *affords some relief*. *Pains severe* and worse from eating or drinking.

Ignatia—Dysmenorrhea in nervous, hysterical subjects full of weeping and sobbing alternating with laughter. Bad effects from *grief* and disappointment.

Ipecac—Often indicated and very potent when, with *constant nausea* and cutting pain about the umbilicus, the patient is flowing profusely a *bright red blood*. An *active hemorrhage* after confinement or miscarriage.

Nux Vom—Pain in the abdomen, with constant urging for stool and to urinate. Patient intemperate and high liver, inclined to dose and dissipate. Very sensitive and irritable over everything.

Phosphorus—Tall, slim, frail women inclined to bleed profusely from every cut or injury. Complaint of weak, gone feeling in abdomen. Deep-acting remedy with definite symptoms and temperament. The predisposition to hemorrhage is characteristic.

Pulsatilla—Painful and sometimes delayed menses causing *cramps*. Patient tosses about in agony. *Chilly, yet averse to hot room*. Young girls of mild, yielding, tearful temperament, or those passing through the critical age.

Veratrum Alb—For dysmenorrhea associated with a watery *diarrhea, cramps and cold sweat on the forehead, Verat.* is well nigh specific. Such a combination of symptoms is not uncommon.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CLIMACTERIC PERIOD.

(Change of Life.)

The climacteric period is extremely indefinite in duration and character. It is intended to include not only the cessation of menses, but also such symptoms and conditions as develop before, during and after the cessation. The average age may be considered as about 45, but in this respect great variation also prevails. It may take place before 40, or continue until after 50, depending somewhat upon the age when the menses first appeared. If at the age of 40 the menses occur with irregularity as to time and duration, it is fair to assume that it is the beginning of the end of menstruation.

With many women in good health, such a condition of irregularity may be about all that is discoverable, while with others the general health and local symptoms may be such as to require the best of care and the most accurate prescribing. A persistent, excessive flowing is one of the local conditions to be treated, and remedies described under the head of menorrhœa or metrorrhœgia should be considered here. During this period, the uterus becomes prone to various diseases, some even malignant, and special care should be taken to discover the same at the earliest period, while treatment may be successful.

The general health in many cases becomes considerably impaired, owing to the shock of this "change of life." In some, the symptoms are more marked after the cessation of the menses and it is at this point that remedies are most frequently called for. Much depends upon the

temperament of the individual. In some, melancholy settles down upon the mind like a black cloud. Others become extremely sensitive, even hysterical, while others are "generally miserable." Such are the varied experiences which may extend over a period of a few months, or four or five years. The bright side is that when the change is once well past, a woman may settle down to a new form of life, and with good reason look forward to "a new lease of life." If during this change and readjustment the mental and physical *resources can be spared from special strain, all risks will be reduced to the minimum.*

SYMPTOMS AND TREATMENT.

As has been said, the symptoms vary with the individual temperaments, yet there are a few which are common to all. *The flushes of heat coming and going quickly,* are perhaps the most troublesome of all. Sometimes perspiration breaks out suddenly, with a *rush of blood to the head and face.*

In those of a nervous type the mental equilibrium is in danger. The anxious gaze, the tearful eye, the mind and conversation full of forebodings, are often met with. It is not always easy to convince such that the condition is only temporary and that remedies will do much to relieve.

The remedies which are often called for are named in the order of importance. *Lachesis, Puls., Ign. and Sulphur.*

After noting the symptoms and conditions carefully,

turn to the *Materia Medica*, Part III. and select the remedy.

Others will be indicated according to special developments, and reference is made to remedies described under the head of amenorrhœa, dysmenorrhœa and metrorrhœgia. *Bell.*, *Calc. Carb.*, *China*, *Ipec.*, *Lyco.* and *Rhus.* are remedies to be thought of.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

THE DIAGNOSIS OF PREGNANCY.

The first sign of pregnancy is usually the suppression of the menses and this sign is of great practical value, as it affords the earliest and most reliable datum upon which to determine the day of confinement. Of course menstruation may be interrupted by other causes than pregnancy, (see index, amenorrhœa) but the suppression of the menses in perfectly healthy women who have been *previously regular* is a strongly presumptive sign of pregnancy.

Among the early and more characteristic symptoms of pregnancy is the persistent nausea (occurring usually in the morning) which has been termed "*morning sickness.*" This nausea is always worse from the odors of the kitchen, especially of cooking food. The stomach of the pregnant women is proverbially capricious and fanciful and the mental symptoms or disposition may be even more strikingly so. Minor signs or symptoms are numerous; but the above are especially characteristic and common.

DISORDERS OF PREGNANCY.

Fortunately most of the disorders of pregnancy are comparatively trivial and self-limited. The nausea and vomiting seldom continues after the third or fourth month. Occasionally there occurs a persistent and uncontrollable vomiting which continues through the entire period of gestation; Such cases are rare, due doubtless to mechanical and reflex causes, not easily overcome by remedies or diet. Constipation during the early months is common, which in the later months is often associated with piles, all of which as a rule disappear after confinement.

Toothache during pregnancy is sometimes persistent; even without any structural defect of the teeth; more frequently it is from decay or a defective tooth which should be remedied in the easiest, quickest way by the use of temporary fillings. One of the most serious disorders of pregnancy is the development (towards the later months) of acute Bright's disease. A full description of this disease has been given elsewhere. It should be said here that an analysis of the urine should be made every month during the period of gestation and whenever there occurs swelling of the face, hands and feet, the urine should be examined often, for the fluctuation in the amount of albumen in this form of Bright's disease is very marked. Bright's disease as a rule strongly predisposes to abortion or premature labor.

THE HYGIENE OF PREGNANCY.

This may properly include the following topics: food and drink, clothing, bathing, air, exercise, rest, and the mental condition.

After an observation, extending over a period of forty years and including all kinds of cases, I have not been able to discover any virtue in the extreme or exclusive methods of diet. A rational hygiene is always in order and anything that involves a radical change of habits is seldom necessary and occasionally does harm. There is, I think, some advantage from a moderate diet which should include plenty of vegetables, fruit and water, with a light allowance of meat. During a portion of the nine months the appetite is abnormally increased and when indulged to the full extent the results are not good. Women of active habits, with plenty of physical exercise in the open air seem to go through all stages better than those who are inclined to be indolent or of sedentary life. Working women not used to high living, but quite used to work and daily activity, who have no occasion for the use of tight corsets but dress comfortably, are the ones who seem to pass through the period of gestation and specially the time of confinement with the least inconvenience and suffering.

I think it is beyond dispute that the mental condition demands some attention, and yet if I could I would dispel many of the popular illusions which needlessly harass the pregnant woman, but only general principles can be stated here. Anything that seriously disturbs or diminishes the mental and moral equilibrium should be

avoided. It would seem that the natural instinct would keep one from appearing in places of excitement and public places where deformities of all kinds are most apt to meet the eye. There are ways and places of amusement which are harmless, and with a natural tendency to despondency, there should be introduced into daily life such influences as will cheer and promote a happy disposition throughout; while there is much that is but the purest speculation, there is enough evidence to show that the mental and moral status of the pregnant woman exerts an influence upon the foetus in utero.

For the medical treatment of the various disorders incident to pregnancy see Index under Nausea and Vomiting, Constipation, Toothache, Bright's Disease, etc.

CARE OF INFANTS.

Volumes have been written on the care of infants, and the diseases of children. To the latter, due consideration has already been given under different divisions. (See index). The care of infants, (first year of life) although of very great importance, cannot be treated at length here; nevertheless, the experience of a life time should contribute something of practical value in the interest of the helpless, defenseless new-comer, whose limited vocabulary consists chiefly of a "cry" for help and the best interpreter of that language is the best friend of the baby.

The mortality of infants, although considerably less than in former years, is still too great. This is especially true in the crowded localities, in cities where poverty, ig-

norance and all sorts of uncleanness are most apt to be found, so that the new born infant is at once handicapped by surroundings and dangers with its resultant fatalities. My observation extending over a considerable time, and including both the city and the country districts, is that infant mortality is very small in families where in all essentials the infant of one or two years of age is properly cared for. Of course, this not only includes proper nourishment, the most important of all, but sleep, clothing, pure air, bathing, cleanliness, etc.

INFANT FEEDING.

No argument is needed as to the wisdom of every mother nursing her infant when practicable. It is safe to say that the infant nursing a normal mother is sure to be protected from a legion of dangers that come from artificial feeding, and so has a better chance to live, which of itself should be a compelling motive to the true mother. All other methods of feeding are properly called substitutes and artificial. The first and best substitute that is available is cow's milk, providing it can be obtained fresh and pure; but this in cities is confessedly difficult, however much has been done, and more will be done, to make it easier and safer for infants using cow's milk.

The question of diluting the milk depends upon different factors, as for instance, the richness of the milk, the age of the infant, etc. In using cows milk, especially with very young infants, it is the safest plan to dilute freely on the start and by degrees diminish the same provided the milk is well digested, thus guarding against the baby's "cry for food," which is sure to come if the

supply of nourishment is insufficient. Pure sugar of milk when added in a small quantity simulates mother's milk, both in quality and taste. Whenever the quality of the milk or water supply is in doubt, both should be sterilized, thus reducing risks to the minimum.

As to other substitutes, which are sometimes very useful, as well as always available, should be mentioned condensed milk, and malted milk, especially for those who are traveling, changing about, or far from the base of supplies; also they may be used when cows milk fails to agree. In a case where all food disagrees, or is rejected, the white of an egg well beaten up will temporarily meet the demands of the case without taxing the digestion.

In connection with feeding the question of weight, its increase and decrease at different ages, furnishes a presumptive guide as to whether proper nourishment in sufficient quantity is being supplied. Of course, slight variations must not be taken too seriously for the reason that other causes may be operative, such as teething, impure in-door-air, etc., etc. The following chart as constructed by Dr. Holt furnishes a good approximation as to the proper ratio between age, height and weight.

AGE	HEIGHT	WEIGHT
Birth	20 inches	7½ lbs.
5 months	24 inches	15 pounds
1 year	29 "	21 "
2 "	32 "	26 "
3 "	35 "	31 "
4 "	38 "	35 "

5	''	40	''	40	''
6	''	43	''	44	''
7	''	45	''	48	''
8	''	47	''	53	''
14	''	60	''	100	''

INFANT SLEEP.

No function of infant life is more interesting or more essential than perfect sleep. Beginning with eighteen hours out of the twenty-four, and decreasing gradually each succeeding month is the normal infant life. Early training by the mother or nurse may greatly modify the amount of sleep. If regular hours of sleep are encouraged, nature will soon do the rest, greatly to the benefit of all concerned. After an infant is 6 months old, it is unnecessary to feed between the hours of 10 P. M. and 6 A. M., at least an interval of six to eight hours may elapse at a single time for continuous sleep, with possible exceptions from illness, etc.

No doubt the newborn finds the greatest comfort and protection in the soft woolen garment, and with the beginning of out-door life, it should be well supplied. Emphasizing some of these fundamentals, now fairly well understood, is all the space will permit. Not only should the nursery be well ventilated and sunny, but the child should have a daily airing. Of course, it is assumed that proper clothing for all kinds of weather will be provided, and due protection from draughts will be regarded, the neglect of which has in these days of open air enthusiasm, caused the illness and death of many an infant.

Another matter of importance is the early training of the child to regular habits of stool. This in the majority of cases can be accomplished by perseverance and regularity as to time. The occasional use of an enema of warm water, either in health or sickness is not objectionable. Of course the daily bath is never neglected, except in case of illness. Only the purest soap should be used, and that in moderation. Following the bath nourishment and sleep should follow.

DISEASES OF THE NERVOUS SYSTEM.

(Brain and Spinal Cord.)

The nervous system with a function that has to do with every organ and tissue of the body presents a most intricate subject for even the specialist to explain or comprehend, and to consider the same except in the most practical way would seem quite out of place and unprofitable for those who are supposed to make practical use of this book. For instance, any speculation as to what constitutes "brain or nerve force" or how the nerves perform their function, interesting as it is, has thus far been largely speculative. The same is quite true of the "sympathetic nerves," and "nerve reflexes," or disturbances in the system from reflex action.

Of course nothing less than an exhaustive treatise by a specialist can satisfy the physician who is making a careful differentiation of all the diseases of the brain and

spinal cord, but such might seem somewhat chaotic to the average laymen or even the busy practitioner. Only the more common diseases with the early symptoms and conditions quite common to all acute brain and spinal diseases will be briefly considered, and the remedies hereinafter described will be in proportion to their frequent use and *definite indications and not according to name of disease*. The early use of the indicated remedy is very important. Acute brain and spinal diseases often follow an acute attack of some other disease. Especially is this the case with eruptive fevers and other diseases common to children. Many result from prolonged and intense application of the brain to study and business, or to causes which interfere greatly with the required amount of sleep.

Preliminary to the attack there is generally a persistent wakefulness, pain in the head and back with more or less fever and later by delirium, sometimes of a very violent type, which still later may be followed by drowsiness and ultimately coma. In the early history of such cases, the proper homeopathic remedies will not only give much relief, but may prevent the farther development of a very serious disease.

SLEEP AND INSOMNIA.

ITS RELATION TO HEALTH AND DISEASE.

Sleep as a normal function of all animate creation is one of the unexplained mysteries. That it should come unbidden with the regularity of the setting sun but deepens the obscurity; that it disappears when its normal

function has been accomplished is equally inscrutable. That the child or the adult in perfect health, should settle down in an unconscious state and remain thus for 8 hours out of the twenty-four is one of the marvels of Creation; then arousing to full consciousness and activity for the sixteen remaining hours is none the less so. The most contradictory explanations are on record; but the primal fact or facts cannot be explained. Likewise, the nature of brain action and nerve force is practically unknown. Let us accept these facts as we must so many others, as wise provisions of a Beneficent Intelligence. "The gift of God." This much we *know*, that sleep is nature's great conservator of health, and in sickness sleep comes to us as "nature's sweet restorer;" therefore the following premises must stand undisputed. Whatever interferes with normal sleep will, in some degree at least, *interfere with perfect health*; and whatever promotes normal sleep will prove a potent influence in *regaining health when lost*. This brings us naturally to a consideration of the topic. Sleep and insomnia.

These two opposite conditions are yet so correlated that the lesson of this chapter can be best presented by considering the two together.

SLEEP.

Sleep, to be absolutely normal or ideal, should come to the individual with reasonable *regularity as to time* and continue with slight if any interruptions, for a *reasonable period* say from seven to nine hours, depending somewhat upon the individual case. It should be free from vivid

dreams, at least such as *agitate the mind and weary the body*. It should, with returning consciousness, give a *sense of rest* and vigor both to mind and body, a condition delightful to experience but impossible to describe. The luxury of perfect sleep is confined largely to children and a minority of adults. How to promote sleep or to overcome wakefulness can best be ascertained by a careful consideration of the more common causes of insomnia.

INSOMNIA.

This term is used by many to include all forms and all degrees of sleeplessness, but it should apply more specifically to those extreme cases where *persistent loss of sleep* is the rule. In dealing with any case of sleeplessness, it would be most irrational to give medicine or advice until after a careful hearing of the case and a determination of the cause. It is well to understand that insomnia generally exists as a result rather than a cause, in other words is symptomatic. It might be indigestion from too much, too little, or improper food, in which case both remedies and advice should aim to remove the cause, after which the insomnia will disappear. Another form of sleeplessness, quite different in causation and more difficult to overcome is that which proceeds from *prolonged mental strain*. For such a case medicine will afford some relief but the essential thing is, such an entire change as will afford the most quiet and rest to the brain; such for instance, as passive or active exercise in the open air, and cessation from the *usual brain work*. Using the above as typical, many details can be omitted.

Taking the case, or *determining the cause* is the most difficult part. Many cases of insomnia when the cause is known can be cured without medicine, by proper regulation and conforming to the laws of nature.

To summarize, it may be said that wakefulness whether acute and temporary or chronic and persistent, is often a penalty that comes directly or indirectly from a known *transgression* of the laws of health including errors both *negative and positive*.

The abhorrent practice of resorting to opiates and hypnotics is very often the first step to more serious trouble. My own practice for a lifetime has been opposed to it. The Homeopathic remedy, with proper advice will accomplish a cure in the great majority of cases, and will not strew the pathway of the prescriber with "drug fiends" or wrecked lives.

While the value of sleep cannot well be over estimated, yet there are many conditions worse than an occasional wakeful night. Not a few people are plunged into wakefulness by the use of coffee and tea, especially the former. For such, I know of no remedy but to abstain from their use. For all those inclined to insomnia the evening hour should be spent in reasonable quietness, or at most in some mild form of diversion. Excitement, prolonged reading, dwelling upon business or upon annoying subjects is a very poor preparation for sleep. The body may recline at will, but the brain already aroused to action, goes on and on with an increasing momentum. If natural sleep follows soon after the administration of a homeopathic remedy, even a single dose, it is a most favorable

sign and as a rule the sleep should not be interrupted by a repetition of the dose.

Aconite—Tossing about with heat or feverish restlessness, such as often precedes acute diseases. Skin hot and dry, with some thirst.

Arsenicum—The wakefulness worse after midnight and after dissipation, with nausea and gastric derangement, exhaustion, fear of death or of being left alone. Cannot remain quiet in bed, changing about.

Belladonna—Constant drowsiness with sudden starting up, cannot get to sleep. Head hot and *throbbing*, with great aggravation from noise and light. Often useful in children, when *Acon* fails. Skin hot and flushed.

Chamomilla—Teething children, worse at night, want to be taken up *and carried*. Cheeks *one* or both hot and red. Very *irritable* and hard to please. Gastric and bowel disturbance.

Coffea—Mind over active, quick to think, hears every slightest noise. Nervous excitement *with no inclination* to sleep. May follow excitement *of joy*, or from *mental strain*, or during dentition.

Hyoscyamus—Drowsy, or sleepless with tossing and throwing aside of all control, semi-delirious.

Ignatia—Especially indicated where *grief* and depressing emotions predominate, or after great exertion of the mind similar to *Nux*; *sighing and weeping* or semi-hysterical mood in case of women or young girls.

Lachesis—Particularly at the climacteric period with frequent hot flushes and heat about top of the head.

A little sleep is often followed by wakefulness and aggravation of all symptoms.

Nux Vom.—Mental strain of business and professional men, or after *night watching*, loss of sleep, dissipation with much *irritability* and over sensitive nerves. After use of drugs, *liquor*, strong *coffee* and tobacco.

Pulsatilla—Mild, timid women, always worse, at time of menses, with constant chilliness, also from indigestion, craving for cool air.

Rhus Tox—*Extremely restless*, with *backache* and general soreness, after taking cold from *getting wet*, with rheumatic symptoms, aching in *eyeballs* and in *left shoulder*, worse at night and from rest, better from *exercise*. Sleep full of tiresome dreams, of walking, and climbing, etc. Early symptoms of typhoid, scarlet or other fevers characterized by wakefulness and restlessness.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

HEADACHE.

A vast variety of causes result in a great number of so-called "headaches." An intelligent search after the cause is the first step, the avoidance of that often the quickest and only cure. For instance, headache from eye strain or defective vision can not as a rule be cured by medicine, but a very prompt relief may follow the use of properly selected glasses. From the above cause, headache is usually worse after using the eyes, is often confined to the base of the brain, with dull aching through

and about the eyeballs, vision blurred and indistinct. The general health may suffer from reflex disturbance which cannot be helped until proper glasses are used.

The most common and most difficult to cure is the so-called "sick headache;" often hereditary, semi-periodic, worse from mental excitement and worry, often preceded by abnormal hunger and accompanied by nausea and vomiting, prostration and drowsiness. The frequency and severity of the attacks may often be lessened by avoiding as much as possible the causes above mentioned.

A form of headache less severe but more constant often comes from the excessive use of strong coffee and tea. Something depends upon the natural temperament of the individual, the occupation and habits. The indigestion, nervousness and headache caused by coffee will often disappear when coffee is discontinued for a reasonable length of time, that is for three or four weeks. An experiment of one or more days duration will prove nothing. In fact, temporarily the symptoms of headache will get worse.

Headache from overtaxing the brain with either study or business, especially where attended by wakefulness, should not only be treated with remedies but needs an interval of rest and quiet, the duration of which depends upon the nature of the case. Indigestion causes headaches which are generally amenable to treatment and diet.

Lastly, a persistent and frequent form of headache may come from ovarian and uterine disturbances, also from the climacteric period. Such headaches are often characterized by being confined to top of the head or base of brain, usually much worse before or during menstruation.

In some cases medicine may fail to bring the desired relief, for, as in the most of the foregoing forms, the headache is secondary and sympathetic, a reflex from derangements existing elsewhere in the system, all of which must be considered in making the prescription.

The headache of school children and brain workers is quite general, and may be due to defective eyesight or to an overtaxed brain. In either case, unless the indicated remedies bring relief within a reasonable time a specialist should be consulted. A most common symptom of an impending acute disease especially with children is headache. Aside from these more specific cases there are many of the nameless sort which can often be cured by giving a remedy which is well indicated by all symptoms and conditions of the patient. This is axiomatic in all cases of correct homeopathic treatment.

TREATMENT.

Aconite—If with the headache there is fever, thirst and great restlessness as in impending eruptive fevers, measles and scarlet fever.

Bryonia—Vertigo on rising with a bursting headache. Sharp pains worse on slightest *motion or stooping*. Irritable, constant talking of business in sleep.

Belladonna—Throbbing and heat in head with *cold feet*, sleepy but cannot sleep, constant *moaning, face flushed and pupils dilated*, headache greatly aggravated by the least noise, light or jar.

Gelsemium—Headache from cold and congestion about the eyes and forehead, eyeballs feel sore and *lids heavy*, pain in base of brain, dull, *languid weakness*.

Lachesis—Heat and pressure on vertex, head always worse after sleeping, heat flushes over body and head, worse climacteric period.

Nux Vom.—Headache that follows dissipation, loss of sleep, too much *study and mental exertion* with vertigo and irritability, exacting, impatient, generally worse in the morning, bad effects from *drugs, coffee and liquor*, with general derangement of digestion and persistent constipation.

Puls—In derangement of stomach from rich, fat food, with vertigo and pain in the head. Useful in delayed or painful menstruation with much chilliness yet averse to hot rooms, craving fresh air. More useful in women of mild temperament, inclined to shed tears over trifles. The opposite of *Nux Vom.*

For other remedies see *Calc. carb., Chino, Glon., Iris.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

INFLAMMATION OF THE BRAIN.

HISTORY, CAUSE AND SYMPTOMS.

My own observation would compel me to say that this disease *seldom occurs* except as secondary to others, yet in a primary form it does occur. The early symptoms of different acute diseases of the brain may vary, *yet there are many in common.* The *intense, throbbing headache, the sleepless, restless nights with excitement and delirium, the extreme sensibility to light or noise,* all point to brain

involvement in some form. In addition, there is apt to be a *flushed face, heat about the head,* and cold feet.

After a variable time of one to three days these symptoms gradually change, so that the patient, instead of being sensitive to impressions and restless in body, *becomes indifferent and later unconscious,* with heavy breathing simulating apoplexy. Pressure from an effusion of serum may continue for some days, accompanied by very *slow pulse, irregularity of breathing* and finally, convulsions. If proper remedies are used in the *early stage* of the disease the later stages may be *eliminated.* Many specific causes might be mentioned which lead to this condition of the brain, but only the more common will be stated here.

Excitement of the brain from persistent *mental strain, worry and overwork,* from *alcoholic drink* and loss of sleep, from persistent high fever during any of the *acute febrile diseases,* may be sufficient to develop a condition of the brain which may become more *serious than the original ailment.* Whatever may be the cause or whether the inflammation of the brain is *primary or secondary,* the management is all important and in each case is essentially the same.

MEDICAL TREATMENT.

The patient should be separated from all excitement and noise, in fact everything that *aggravates the pain in the head.* Absolute *quiet and mental and physical rest* in the early stage are indispensable. The head should be cool and the feet kept warm.

Aconite—If given early and as indicated will often quiet the disturbance in a wonderful way. If the fever is attended with *rapid, full pulse*, pain in the head as though *hot water was passing* through the brain. The body and extremities *on the move* with excitement, *mental agitation* and great fear, *predicting death*.

Arnica—After *blows and concussion*, with clear history of injury or *violence*. Useful even in later stages with tendency to *stupor and involuntary discharges*.

Belladonna—Sensibility and irritability *extreme*; may bite and *strike* with excitement and delirium. *Face flushed*, head hot, feet cold. *Drowsy but cannot sleep*, constantly starting up in *fright*. *Bell.* is a remedy *often indicated* in acute diseases of the brain.

Bryonia—When there is delirium about *getting home*, or about the day. Patient complains of *piercing pains* in the head, worse on *motion*, with much vertigo on *rising*, compelled to lie still. May occur in complications with measles or in early stage of typhoid.

Gelsemium—Violent pain in head, especially *base of brain*, with tendency to *draw the head backward*. Muscular weakness, the eyelids *droop*. Fever is pronounced but the amount of *thirst and excitement is less than Acon.* Cerebro spinal meningitis.

Glonoine—Pains and throbbing in the head with sensation of heat. Face pale or flushed. Some resemblance to a *Bell.* case. *Bad effects from sun-stroke*. Have never been able to confirm this last indication.

Hyoscyamus—During the second or last stage, when

the stupor, convulsions and delirium have set in. Patient is violent, refusing all clothing, striking the attendants.

Nux Vomica—Slowly developing and less violent than ordinary. Often caused by *overtaxation of brain workers*, with *loss of sleep*, extreme *irritability*, cannot endure anything. Similar conditions may arise from abuse of *stimulants* and *dissipation*. When indicated by the above symptoms in any case, it will *afford sleep, quiet the sensibilities* and prevent the development of a typical case of inflammation of the brain.

Opium—The indications for Opium come in at so late a stage of the disease that the good effects of this remedy are seldom discoverable. I cannot recall a single case where recovery followed the use of *Opium*. The fault may have been in the prescriber.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

APOPLEXY.

There are two varieties of apoplexy, the congestive and the hemorrhagic. Other divisions have been made which are of slight importance to either diagnosis or treatment. The two forms have many symptoms in common, but in the first stage and in their sequelae the *difference is most significant*.

In hemorrhagic apoplexy there is no clear premonition of an attack. Its suddenness doubtless gave origin to the term "*stroke*," for literally such it appears to be, as the patient usually falls suddenly and helplessly to the

floor. Generally owing to the degeneration of the walls of an artery in the brain, it has ruptured, and this is followed by an *active hemorrhage*, the formation of a clot and *compression of the brain*, with the following symptoms as a result. *Unconsciousness for an indefinite period follows*, varying from a few hours to days and weeks. During this period the breathing is *loud, heavy and irregular*, often *interrupted* for a minute or more. The pulse is *slow, often full*, and the face *dark or flushed*. Consciousness may or may not return, but when it does, paralysis, of some form local or general, has taken place. The mental faculties are *temporarily or permanently impaired*, also the power to articulate properly.

In the congestive form of apoplexy, there is often a *brief premonitory period* during which the face becomes *flushed*, the *carotid* and temporal arteries enlarged, with *throbbing and pain in the head*. Stupor and heavy breathing follow. The respiration and pulse, also the appearance of the face, are all essentially the same as in the hemorrhagic form, likewise the embarrassment of speech and inability to swallow. The prognosis in the two forms is quite different. In the congestive form, consciousness returns much sooner, and it is not followed by paralysis. The mental faculties soon regain their power, *except memory*. One attack predisposes to another, with a possibility of the second or third becoming hemorrhagic. In the hemorrhagic form, consciousness is slow in its return, owing to the time required for even a partial absorption of the blood clot in the brain. Paralysis in some form is always present and is slow to disappear. In not a few cases, the brain lesion is such that a mild form of permanent paralysis takes place.

As to a recurring attack of any form of apoplexy, there is little to be said that is definite or worth while. Recalling the cases that have come under my observation, I can only say that the main issue has seemed to depend largely upon the conduct of the patient. Those who have been so situated as to avoid mental strain and worry, and willing to adopt a plan of living which should include temperance in all things especially in eating and drinking, have put a long interval between attacks, or escaped them altogether.

Not infrequently one is called in haste to confront a patient who is unconscious. A diagnosis "*on the spot*" is desired and is desirable, but unfortunately it is not always easy or possible. The diseases and conditions that simulate apoplexy are quite numerous. *Narcotic poisoning, alcoholic intoxication, sun stroke, concussion of the brain, fainting, hysteria,* and others might be named.

Before reaching a conclusion as to diagnosis, the surroundings and circumstances should be quickly noted, facts should be learned, when practicable, from some *reliable member of the family*, and until this is done *no active mode of procedure, no heroic treatment should be resorted to*. If the case is apoplexy, the greatest harm can come from *moving and undressing the patient*. The same is true of using any *narcotic or stimulus*, in a case of apoplexy.

MANAGEMENT AND MEDICAL TREATMENT.

Absolute rest is the rule. No attempt at moving the patient, no violent efforts to rouse to consciousness should be allowed, for some hours. The head should be some-

what elevated, with everything free or loose about the neck. Forcible efforts and haste cannot accomplish any good and often do much harm. The extremities should always be kept warm by external applications of heat.

After selecting the remedy that seems best indicated, it can be placed on the tongue, either in the form of pellets or the same dissolved in a small quantity of water, but make no efforts to force frequent swallowing.

Aconite—With much *agitation of the circulation*, full pulse and restlessness, *Acon.* will quiet and after a few doses should be discontinued.

Belladonna—Recalling several cases of *Bell. poisoning*, each *resembling in a marked degree congestive apoplexy, viz., the throbbing carotids, the flushed face, and coma*, it is a greater satisfaction still, to recall that similar cases have been *benefited by Bell.*

Arnica—A good remedy after *Acon.* It promotes absorption of the blood clot. Useful in cases that seem to follow *after concussion of the brain*, or where there is a *history of an injury*.

Opium—It would seem *Opium* might reach some of these cases, but I cannot recall that such has been true in my hands. Some physicians affirm as much as this of other remedies; admitting as true that apoplexy furnishes a very poor chance for the action of remedies. Still there is a chance that is well worth utilizing, and he will have the best success, who most faithfully and correctly selects the indicated remedy.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

INSANITY.

NATURE OF AND DIFFERENT FORMS.

As a general definition of insanity, it may be said to be a derangement of the intellectual and emotional faculties with loss of control of the will over the same. This is not an all inclusive definition. The forms of insanity are far too numerous to specify, yet for convenience and as a general classification, the following seems the best and is the one generally adopted.

Mania, monomania, melancholia, dementia, idiocy, and imbecility. These separate terms are used to express as nearly as possible, the *mental and physical condition of an insane patient*. As the definition of each is not unfamiliar, nothing further need be said, except that in some cases a patient may be included in two groups as for instance, both a victim of melancholia and monomania.

Far more valuable is the knowledge of the premonition of insanity, which includes the preventive and most curable stage.

EARLY SYMPTOMS AND THEIR IMPORTANCE.

It is true that the early symptoms are by no means uniform, yet there are some well known and quite important guiding symptoms. For instance, if after some trying ordeal, the loss of property, the death of friends, domestic troubles, financial embarrassment or a physical break down, a patient is unable to sleep, turns away from his best friends, becomes dejected and loses all interest in former enterprises, it is evident that a mental crisis may be near. If some, or most of these symptoms

are present, the *time has come to act in the interest of the patient* to prevent what may prove to be a well developed case of insanity. The *reversal* of accustomed conduct and habits is not difficult to discover. If at this juncture the sufferer can be induced to *change environment* by taking a brief journey, or in the *most agreeable way be separated from former surroundings* substituting new friends and new thoughts, it will do more to prevent a catastrophe than any medicine or argument.

The latter often rather aggravates than ameliorates and the same is true of *persistent opposition* to every *harmless unusual act of the patient*. Neither should patients be *reminded or made conscious* of their abnormal condition except it becomes quite necessary. That there is a hereditary predisposition to insanity is too well established to admit of any rational doubt. Where this exists it simply *emphasizes* the importance of prompt action in all threatening cases. If all efforts fail to prevent an outbreak of insanity, the *safe and sane* place for the sufferer is as a rule an asylum where danger to self and others may be prevented and proper facilities and trained experts may contribute most to an early recovery.

HOMEOPATHIC TREATMENT AND RESULTS.

That some mental disorders can be cured by a well selected Homeopathic remedy admits of no doubt in my own mind. I recall most vividly some cases which were declared incurable, that responded promptly to homeopathic remedies and were permanently cured. Slight familiarity with the mental symptoms in our drug provings ought to convince that they are capable of *curing*

what they produce in such a marked degree in the healthy. The law of similars is not confined to what we see and touch physically.

In selecting a remedy the mental symptoms, the cause and concomitant symptoms must all be taken into consideration. For instance, in a case associated with, or growing out of "*the change of life,*" Lachesis and Puls. would be first thought of. The former remedy has cured some of the most violent and apparently hopeless cases, and I know of no remedy that presents so many symptoms common to such a case. Other remedies, such as *Bry., Calc., Ign. and Sul.* may be called for.

If a case can be traced to grief or some saddening experience, *Ign., Hyos., Puls.* may be first thought of and studied in Part III.

When prolonged *mental strain* in business, attended with loss of sleep with *developing irritability* and nervousness, *Nux., Bry., Ign.,* and others should be looked up with care.

The foregoing are suggestions only. Each case with its marked mental symptoms must be considered upon its individual merits; in cases of insanity I know of no good reason for departing from this rule.

It has been the life long endeavor of the writer to follow it as closely in mental as in any other disease, and the result has been many cures of an *affliction more terrible to suffer than death itself.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CONVULSIONS.

CLASSIFICATION AND CAUSES.

Convulsions, although nearly always *symptomatic*, are often of such frequency and character that some special consideration seems in order, Again, the *violence* of convulsions, regardless of the cause, may in some cases *involve danger to a patient* and require some special management. As classified for practical purposes, we have principally infantile, epileptic, puerperal and hysterical convulsions.

The causes of infantile convulsions are numerous, the more common being connected with the alimentary tract; as for instance, slow and *painful teething*, indigestion with *accumulations* in the stomach and bowels of *undigested food*, *stomach* and *intestinal worms*, and excitement of the brain, as by fright. Where there is a hereditary *pre-disposition*, convulsions may precede or accompany an attack of any of the acute diseases of children.

As a rule, the first symptom noticeable is *twitching* of the muscles of the face causing marked distortion of the features, followed by rigidity of the body and limbs. The head is drawn backward. During the fit, consciousness is lost for a few minutes, after which a quiet *sleep* with convalescence follows.

MEDICAL TREATMENT.

Now is the time to seek out the cause of the convulsion and resort to such treatment as will prevent a return. In addition to giving the indicated remedy use, if need be, the *lance* on the gums. If the *history of the*

case calls for it, use an emetic and in some way empty the stomach, or as a safe and sane procedure use free and repeated *flushing of the bowels* with tepid water.

If spasms follow an injury about the head or elsewhere, apply the tincture of *Arnica* to the seat of injury and give a few drops in water internally. Knowing *the cause*, victory is made easy.

Puerperal convulsions are generally associated with the albuminuria of pregnancy, and usually occur during or after delivery.

The functions of the kidneys are interfered with, either by mechanical or other causes, which results in the excretion of a considerable amount of albumen in the urine. Frequent tests for albumen should be made during the *middle and later months of pregnancy*. The convulsions of epilepsy have been treated at length under the head of "epilepsy," and the same is true of the convulsions of hysteria. *See Index*.

MEDICAL TREATMENT.

Avoid everything that excites the *mind or emotions*. The stomach plays an important part in causation, and should not be taxed with any nourishment for some *hours after a spasm* and then only the simplest liquid food should be given.

Aconite—High fever, rapid, full pulse, agitation and restlessness may be the beginning of acute disease. *Spasms from fright*.

Belladonna—*Sudden startings and twitching of muscles*. Head hot, *grinding of the teeth*, with incli-

nation to *strike and bite*. *Pupils dilated and face flushed, skin very hot.*

Cina—Convulsions from intestinal worms. Spasmodic twitching about the *muscles of face* and limbs, child exceedingly *irritable* and constantly *rubbing or picking the nose*.

Chamomilla—Useful in teething when the child is in fretful mood, has to be *carried to quiet, worse at night*. *One* or both cheeks very red. *Cham.* will quiet such a case and ward off convulsions by hastening the teething process.

Calc. carb. and Calc. phos.—May accomplish much in children *backward in teething and in all bone development*. The head may be large and *inclined to excessive perspiration*, face plump, but *pale and flabby*.

Ignatia—If the spasms are brought on by *fright or after grief* and trouble, especially in the case of *women and young girls of a highly sensitive temperament, inclined to weep and laugh at the same moment*, with tendency to hysteria on slight provocation. *No fever and the pulse normal*.

Nux Vom—Spasms of *single muscles* here and there, which are renewed by any *touch or movement*. After *heavy dosing or from excessive stimulation*.

Subjects who are suffering from *too much brain work* and loss of sleep, *irritable* and worse from the least noise or agitation.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

EPILEPSY.

DIAGNOSIS, SYMPTOMS AND PROGNOSIS.

With a sudden *convulsive seizure* followed immediately by *loss of consciousness*, the patient falls to the floor, uttering the peculiar "*epileptic cry*," *moan or scream* which once heard will always be recognized. *Foaming at the mouth* and grinding of the teeth are common. The violent spasms continue for five to eight minutes, followed by a helpless condition and *stupor*. Such is a typical case of epilepsy.

After an interval which is very indefinite, ranging from a few hours to months or even years, another attack occurs. A large percentage of cases can give a history of some nervous trouble in their ancestry. Hereditary predisposition plays an important part, yet a direct and *exciting cause may be discovered by a thorough physical examination*. This is especially true with children and *young women*. A *history of each case is indispensable* for a proper beginning, and this will often direct the examination into a proper channel.

It is rarely the case that a patient dies during a convulsion. Although life may continue indefinitely, yet the life of the epileptic is generally shortened. Gradually in most cases the mental faculties become *impaired*, yet such is not always the case. Caesar, Napoleon, Byron and other noted men were epileptics.

Naturally the marriage or *intermarriage* of epileptics has greatly increased their number. The State of New York recognizing these facts has provided most generously for their care by establishing a home, "*The Craig*

Colony" at Sonyea, N. Y. where the best of care and treatment is furnished the curable ones and suitable provision is made for the incurable.

MANAGEMENT AND MEDICAL TREATMENT.

Very little can be done *during the paroxysm*, more than to protect the patient from *self injury*. Pillows may be placed beneath the head, to prevent blows from spasms. Also a cork or piece of wood may be put between the teeth to prevent biting of the tongue, which often happens. The only cases that can be considered curable are those due to some *reflex irritation which is removable*. When this is done early, before the "epileptic habit" has become fixed, permanent recovery may be anticipated. This may involve some minor surgical treatment or operation.

Emotional excitement often precipitates an attack. Loss of sleep and intemperate eating or drinking with lack of exercise in the open air, are all unfavorable for the epileptic. When practicable, all these principles should be impressed upon the patient, so that *self-management may take the place of "orders."*

The medical treatment of this disease, like its cause and pathology, still remains, quite rudimentary. Those cases due to some known local cause with symptoms growing out of the same may be prescribed for with some degree of confidence, except in such as are *mechanical and surgical*.

See the remedies described under convulsions, and inflammation of the brain.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

PARALYSIS.

There are numerous varieties of paralysis, resulting from lesions of the brain and spinal cord, also from acute disease, several of which have been considered under different heads. For instance, hemiplegia or a paralysis of one side, is generally due to apoplexy and is treated under apoplexy, diphtheria paralysis under diphtheria, of which it is a sequela. Paraplegia or paralysis of both lower extremities, is generally due to spinal disease or injury. *Lcad, mercurial, and syphilitic paralysis* are somewhat rare and are generally found in the *wards of a hospital*.

Facial paralysis may occur *without any central brain lesion*, and nearly all cases that have come under my observation have made recovery. Paralysis agitans, a constant, involuntary shaking of the hands, arms and head, is due to a breaking down of the cerebrospinal system and generally occurs in the aged and infirm individual.

Paralysis of the insane in some degree is apt to follow in the more chronic cases, due to obscure, long continued brain lesions. There are other forms of paralysis which like most of those already mentioned, are *symptomatic of some lesion of the brain or spinal cord*. The cause is *pressure* on the parts, it may be of *blood clot, serum, engorged vessels, or a foreign body*. The management and thereapeutics of each case must stand by itself. Most of them will be considered elsewhere, and any elaboration here would be mainly a repetition.

HYSTERIA.

CAUSE AND CHARACTERISTICS.

The mental and physical features of a case of hysteria are not easy to describe. *Opposite conditions* in the same patient and during the same hour are rather common and *distinguishing features of the disease*. Laughing is followed by weeping. Various phases of mental excitement may be followed by *stupor* and *convulsions*. The patient may exhibit *abnormal* strength of body, only to lapse into feigned *exhaustion* and "*nervous prostration*." *Instability* and a lack of will power predominate.

It is far more common in women, especially in girls from 13 to 20. Is often preceded by the sensation of a *ball in the throat*. If convulsions ensue, it differs from epilepsy in there being less complete *loss of consciousness*. Respiration may be very slow, or rapid. Pulse somewhat irregular, but an *entire absence* of temperature or fever.

The chief predisposing cause of hysteria is, as in epilepsy, heredity. In a large porportion of cases it will be found that the parents suffered from *some form of mental or nervous trouble*..

The *exciting* causes are more numerous. *Fright, emotional excitement, reflex trouble at the age of puberty, grief and sorrow*, especially when *sudden* or not anticipated. The history of a case will often throw much light on a diagnosis, which is not always easy to differentiate. The inexperienced physician or layman must see a few cases and have a good "*fright*" before being able to interpret the *uniqueness of a genuine case of hys-*

teria. Fortunately the cases all recover, except those of exceeding frailty, who may succumb to *heroic treatment often the result of an error in diagnosis*. I recall my first case which luckily I saw with my preceptor, else I fear my hair would have turned white on the spot. The following morning, I had the pleasure of seeing the patient, (a young bride) leave the hotel in good health. It is generally the case that *skilful management* and discretion will do far more for the patient than drugs. In some cases nothing will be more harmful than the manifestation of *sympathy*. Censure and appeals to reason may *aggravate as well*. It is confessedly difficult to foretell just what the effect of advice and sympathy will be in a given case; therefore it is well, while in the presence of the patient, to *avoid much discussion* and see to it that those who are so inclined are excluded from the presence or companionship of the patient. Herein lies the *exciting* cause for which some one must in a measure be responsible; the *predisposing cause* often comes to the patient as an unfortunate legacy which compels our sympathy and best efforts.

With a disease so varied in character, especially the mental symptoms, the remedial agents are necessarily numerous. Only those more frequently called for will be mentioned here.

MEDICAL TREATMENT.

Aconite—For full-blooded, plethoric young women. The mind seems full of fear and anxiety. *Afraid to go on the crowded streets*. Fears death and predicts the day of death. Bad effect from *fright*; prickling feeling

in the *nerves of tongue, arms and hands, very restless and anxious.*

Arsenicum—Apparent exhaustion, breathing hurried, face pale and anxious, nausea, vomiting or diarrhea. Cannot be left alone and fears death is near, yet no danger. Constantly changing about from one place to another, cannot remain in bed.

Belladonna—More violent symptoms, with *striking and biting attendants.* Face red, eyes flushed, pupils dilated, *jumping and starting from spells of drowsiness.* Desires water but *cannot drink.* Throbbing headache and throbbing in the carotids.

Calcaret carb—Young girls inclined to grow “fat and flabby,” yet very nervous with *fear of losing their reason.* Feet cold and inclined to feel damp. Menses too early and too profuse. Much headache.

Chamomilla—For the impatient, nervous and irritable one, fretting at trifles, worse at night. One cheek red, the other pale.

Gelsemium—Much headache about the base of brain, about the eyes, with drooping lids. Inclined to debility, some fever, no thirst. Bad effects from fear, danger and fright.

Hyoscyamus—Many illusions, spasms. Unconscious obscenity, strikes and resists attendants.

Ignatia—A very useful remedy when caused by *grief and sorrow, which becomes a brooding, melancholic sadness.* Cheerfulness for a brief time followed by *weeping and a constant inclination to sigh,* with sensation

of *all-goneness*, which *eating or drinking does not relieve*.

Lachesis—Sensation of *lump or ball in the throat*. *Suffocation*, cannot endure anything about the neck. *Hot flashes and ailments at climacteric period*. Always worse *after sleep*.

Nux Vom.—After loss of *sleep or excess of strong coffee*. *Irritable*, cannot endure *noise, conversation or opposition*. Over study or brain work. *Cannot sleep after 3 A. M.* Always worse in the *morning*. Worse from taking narcotics, cathartics and other drugs.

Pulsatilla—Young girls with scanty, delayed or *suppressed menses*, especially from getting *feet wet*. Puls. is best suited to the *mild, yielding, timid, tearful temperaments* that crave the *open air and feel much worse in warm room*. *Indigestion*, with vertigo and headache.

Sulphur—Flushes of heat, with heat on top of head and soles of feet. Sensation of faintness or hunger at 10 A. M., which comes with great regularity. Dread of water or bath. Eruptions about the face, or from suppression of eruptions.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

TETANUS.

This disease is caused chiefly by *punctured or lacerated wounds* especially those about the palm of the hand or the sole of the foot. Other causes may induce an attack.

The symptom first noticed is a stiffness or spasm of the muscles of the jaw, which later involves the face, neck and extremities, and finally a general tonic spasm. It has been generally agreed that a peculiar irritation of the ends of the sensitive nerves transmitted to the spinal cord produces the spasms.

In these later days the bacillus, that deadly germ, has come forward, laying claim to the causation of tetanus.

The symptoms may appear in a *few minutes after an injury*, or they may be *postponed for some weeks*. They closely resemble those of a case of strychnia poisoning; or it may be mistaken for a case of hydrophobia.

In spite of all treatment the fatality is great. The patient should be placed in a quiet, dark room.

Nux Vomica and *Hypericum* are the remedies of chief importance.

The treatment by antitoxine promises much.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CHOREA.

(St. Vitus' Dance.)

A disease characterized by *incessant movement and twitching of muscles* which have ceased to be under the control of the will, and which disappears *during sleep*.

The hands cannot be regulated to work or write, the speech may be difficult, and the muscles of the face

twitch in such a manner as to destroy all facial expression. It is a disease of childhood ranging from 8 to 16, and more prevalent with young *girls about the age of puberty*. There is generally a history of nervous disorders in the ancestry, which only requires some exciting cause to develop the chorea. Excitement, fright and emotional disturbances, often produce the first symptoms. At first the patient becomes unusually restless, with *inability to sit or stand still*. The twitching of muscles of the face and hands is soon noticeable, varying with excitement and surroundings, often worse when attention is called to the disease. If the patient can be managed and kept from mental excitement and physical fatigue, the outcome is favorable. The disease may continue from a few weeks to six months or more. The diet should be simple, yet nourishing and easily digested. Pleasant and simple diversions are beneficial. All sources of irritation and worry should be avoided. The child should be taken from school.

MEDICAL TREATMENT.

Ignatia—This has been a favorite remedy with me. The mental symptoms are changeable, the muscles on the *jerk with the slightest excitement* or motion. Sighing and crying followed by laughter.

Nux vom—When the muscular twitching is very marked on *touch or motion* with the mental symptoms of *Nux*, *irritable* and *impatient* about trifles and worse in the morning, *Nux* should be helpful.

Pulsatilla—When the disease occurs in *young girls*,

with scanty, or suppressed menses, who are chilly and yet averse to hot room, weeping at trifles.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

NEURALGIA.

Nerve-pain is the literal signification of the word neuralgia, and wherever there is a *nerve fibre* in any organ or tissue of the body, *there pain may occur*. It matters not whether in the face or the feet, it is a live nerve giving a *signal of trouble*.

The different names given to neuralgia are *due to location* rather than to any essential difference in character, whether called sciatica or tic douloureux. All parts of the body are not equally susceptible to pain, owing to the difference in the supply of sentient nerves.

The causes of neuralgia are predisposing and exciting. Hereditary influences constitute the chief predisposing cause. Impaired nerves of any form on the part of parents, begets the same in the offspring, and impaired nerves predispose to neuralgia. Anything which impairs the general health or exhausts the nervous system, prepares the way for neuralgia, requiring only some direct exciting cause to develop a paroxysm of pain. When the neuralgia is confined to *one particular region* it is often due to some local cause. If the pains shift to different parts it is more apt to be due to the *general condition of the patient*.

The exciting causes are sometimes very obscure; as for instance a tiny decay in a wisdom tooth, or prolonged

eye strain. Rectal disorders insignificant in appearance, are yet provocative of the most persistent and painful neuralgia, not always curable with medicine, but sometimes requiring local or surgical treatment.

Although it is not a function of the *dental nerve* to drive people to the dentist's chair, yet how many have preserved not only their teeth but their health, by giving heed to the warning of an *exposed nerve*. A patient, suffering from neuralgia often recurring, is a proper subject for careful investigation, not only because of the suffering with all its ill effects, but because there is generally some *abnormality that is even more serious*, and often one easily remedied.

SYMPTOMATOLOGY.

The pain of neuralgia is acute and piercing, shooting along the course of a nerve, intermittent or a paroxysm, sometimes periodically. As a rule, there is little change discernible on the surface over the seat of pain, except in some complication. The parts are sometimes very *sensitive* to slight touch and again the pain may be relieved by *firm pressure*. As a rule, regardless of the suffering, the *pulse and temperature remain normal*, which greatly aids in a differential diagnosis and in the selection of proper remedies. Before attempting a diagnosis or treatment, all facts in the order of development are essential, and when obtained, the balance of the task may be comparatively easy. The prognosis, except in cases connected with some serious organic lesion, is favorable. The general management is important. In cases of broken health, everything that promotes recuperation,

as generous diet, fresh air, change of climate, removal from a malarial region, will assist in curing the neuralgia.

MEDICAL TREATMENT.

Aconite—Aconite is one of the most useful remedies. If the neuralgia is associated with a cold, or after *riding in the cold wind*, suppressing a perspiration, Acon, will relieve. The pain may be sharp, *tingling*, or burning and so severe as to drive the patient to despair. *Patient very restless* and filled with all kinds of fear, even the fear of death.

Arsenicum—A favorite remedy with all schools of medicine, especially where the patient is pale, *anaemic*, or suffering from malaria. The pains are often *periodic*, *burning* and tearing, often *relieved by heat* or very hot applications. Patient is *weak*, and exercise or pain produces complete *exhaustion*.

Belladonna—Pains about the teeth, face and head, *throbbing* and tearing, worse in evening or at night. Worse from noise, light or jar. Irritable and spiteful on account of the pain. *Face flushed*, head hot and throbbing, *feet cold*. Pains come and disappear *suddenly*.

Bryonia—The sharp, piercing pain, always worse from any motion or on deep inspiration is characteristic of *Bry*. May be in a rheumatic, or one suffering from some acute disease in or *about the chest*. Cold applications ease the pain. The pains may be in face, chest, or abdomen.

Cactus—Acute pain *about the heart* and left side with a feeling of *constriction like a band about the chest*.

China—Somewhat similar to *Ars*. Patient has been *exhausted from loss of blood* or other debilitating causes. Pains return periodically and are sometimes relieved by *firm pressure*, yet very *sensitive on the surface*, and cannot endure *slightest touch*.

Colo—Violent pain in *abdomen*, cannot straighten up, with relief from *firm pressure*, sciatic neuralgia.

Cimicifuga—Pains about the *small joints, fingers and toes*, which may be *rheumatic*, shifting often, in neuralgia, from uterine or ovarian irritations.

Gelsemium—Severe pain in *base of brain and neck*, extending to the face and especially to the eyeballs, with inclination to draw the head *backwards*. From severe colds with marked *weakness*. Some *fever but no thirst*.

Ipecac—In some forms of neuralgia and pain about the stomach and abdomen, where the pain is *clutching and tearing*, with constant nausea or vomiting.

Lycopodium—When the pain is chiefly about the abdomen, associated with excessive *flatulence*; pain about the kidneys, *simulating a passage of renal calculi*.

Nux vomica—Gastralgia with patients inclined to be *intemperate*, with *excessive indulgence* in highly seasoned food and coffee, or inclined to dosing, and *cathartics*. The *mental* condition is often a guide in deciding for *Nux*.

Pulsatilla—Often useful in children or young girls preceding or during menses, when the pain is attended with much *chilliness*, nervousness and *weeping*; the mental symptoms are important. Bad effects from *getting*

the feet damp. The pains of Puls. shift often from one place to another.

Rhus tox—Neuralgia or rheumatism from getting *wet* or working in *damp places*. Pain in *left shoulder back* or *hips*, all worse when *trying to move but better from continued exercise, great restlessness*.

Spigelia—Neuralgia *over the left eye is excruciating*, also through the *eyeballs and about the heart*, preventing motion or deep breathing. Similar to *Catus* in *angina pectoris*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

TOOTHACHE.

(Odontalgia.)

Seldom is Toothache due to pure neuralgia. More frequently it proceeds from disease or decay of the tooth which results in the *exposure of the nerve*. If it were not for the nerve to announce by pain the destructive process going on in the tooth few would possess the necessary teeth for mastication.

Ulceration from disease of the root is often preceded by decay and neglect of the crown, hence the great importance of caring for the teeth so as to prevent decay and, (if in spite of care decay takes place,) having all cavities filled *before it reaches the nerve*. In the case of children with their first teeth, a *soft filling* can be used causing little pain. Not a few cases of toothache in apparently sound teeth fail to be relieved by the dentist, and

homeopathic remedies selected with care often demonstrated their efficacy by giving very prompt relief.

TREATMENT.

Aconite—Pain severe, sharp or throbbing, worse after or caused by *exposure to cold wind*. Feverish and restless. Useful in children. See Bell. and Cham.

Arnica—Pain, soreness and bleeding *after extraction*. Soreness and throbbing *after filling*.

Belladonna—Often useful, especially with women and children. Pain acute or *throbbing*, causing excitement, crying and striking. Severe, *throbbing headache* with much aversion to *noise* or *jar* about the room. Face *flushed and hot*.

Chamomilla—With the pain the child becomes *exceedingly irritable* nothing will pacify except being carried about. *Pain unbearable*, like that of *Acon*, and *Coffea*. Generally worse at *night*.

Coffea—Pain so severe patient becomes *frantic*. Pain is sticking and jerking like, which is momentarily relieved by *holding cold water in the mouth*.

China—Toothache or neuralgia of those *weakened by sickness* or loss of blood, nursing mothers. Pain comes periodically, with pressure and great sensitiveness in the parts. Neuralgia extends to temples. *Surface very sensitive*.

Ignatia—Sensitive, *hysterical subjects*, sleepless and sighing or *laughing and crying* with pain. Worse after mental strain or protracted *grief*.

Pulsatilla—Seems especially useful in the case of individuals of *mild, timid disposition, given to tears*. (Opposite of Cham. and Nux.) Pains always better in open air and worse in *warm room*, also *towards evening*, with inclination to *chilliness* with pain.

Mercurius—Pain worse at night. *Gums swollen and bleeding*, tongue coated, *breath offensive*, with inclination to profuse perspiration.

Arsenicum—Very useful when pains are *relieved by heat*. Pains come periodically and prostrate. Often worse I A. M.

Bryonia—Patient irritable, like Cham. Pains sharp, worse from any exertion. *Teeth feel too long*. Headache and vertigo.

Rhus Tox—Worse after *getting wet from working in water*. Aching all over, with intense pain and restlessness of body.

In toothache, neuralgia or any *case of severe pain*, the remedy may be repeated as often as every 15 minutes. Sometimes the first dose relieves, in which case *defer the second until the pain recurs*. Even if the pain is only partially relieved, it is often better to *defer the second dose as long as the improvement continues*.

In case of *severe pain or emergency* which is not changed for the better by three or four doses, another remedy should be selected.

A tendency to *sleep* or to slight perspiration and quiet may be regarded as favorable, and in such a case the remedy should not be changed but *given at longer intervals, or discontinued*.

The use of local remedies for temporary relief may be suggested here. If a cavity can be located, it may be plugged with absorbent cotton which has been dipped in a little alcohol, chloroform, or cresote. Sometimes one will relieve and again another Cresote should be used cautiously, so as to avoid contact with the cheek or tongue.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

LOCOMOTOR ATAXIA.

This is a disease of the spinal cord, somewhat obscure as to causation. It occurs during middle life and is far more prevalent with males than females. It is a progressive disease, and yet its duration may extend over a *period of from one to thirty years*, averaging about eight. It is seldom recognized during the first year or in the first stage, which is chiefly characterized by acute pains in the lower extremities, which are generally regarded as neuralgic or rheumatic, but are really caused by the condition of the spine. Morbid sensibility of the skin about the feet and legs, or sometimes entire loss of sensibility. As the disease progresses the step becomes *unsteady, often jerky*. If the patient closes his eyes or attempts to *walk in the dark* he is liable to fall down.

Derangement of the vision may occur early in the disease. The pupils become contracted and do not respond to light. The arms are sometimes involved, when the cervical portion of the cord is affected. The disease once well established is classed among the incurable. The fact that it is not often recognized in the early stage (most favorable for treatment) may account

for that. I recall no case of recovery where the disease had advanced to the stage characterized by the unsteady, "jerky" step; yet I have known of many cases that have continued on for ten and twelve years.

It is doubtful whether therapeutics can accomplish as much as good hygienic management. The life of the sufferer can be prolonged and made more comfortable by proper exercise, or rest as the case may require, and especially by a wholesome, nutritious diet.

The occasional paroxysms of *excruciating pain* that attack the extremities had better be endured than to suffer the derangement of the general health which follows from prolonged *use of narcotic drugs*.

See remedies under the head of paralysis, neuralgia and rheumatism.

SCIATICA.

This is a form of neuralgia confined to the *sciatic nerve*, and really calls for no special consideration. Like some other errors it was dignified by a name "sciatic rheumatism," in the early medical text books, which was passed on by the practitioner to the layman, so that even at the present time the error is not generally recognized. Owing to the *size*, location and function of the sciatic nerve, it often becomes the seat of the most *excruciating pain and disability*. The pains are essentially the same as those described under "neuralgia" and the causes, conditions of aggravation and amelioration are similar. It occasionally develops in the acute form, with most *excruciating pain* in hip and limb, rendering the patient

fairly helpless. The more common form is slower in appearance, milder in symptoms, not producing total disability but extending over a *considerable length of time*. In either form the pain is usually worse from motion or prolonged exercise and generally very sensitive to changes in the weather, especially the damp cold at night.

TREATMENT.

The history of a case of Sciatica will often reveal the fact that there has been a sprain, fall, bruise or injury of some sort, resulting in a form of inflammation or mild neuritis. Such a condition demands absolute rest of the parts. Especially is this true of an acute case. The patient should remain in bed until the more acute symptoms are subdued, and until moderate motion can be had *without causing pain*. Ultimate recovery will occur much sooner than when the patient is allowed freedom. Application of dry heat, as in other forms of neuralgia, afford more relief and is less objectionable than any other.

In addition to the remedies described under neuralgia, *Rhus Tox* and *Colocynth*, two of the most useful remedies, should be considered here.

Rhus Tox—If there is a history of a sprain, or if sciatica is caused by *getting wet or working in water*, *Rhus*, is the remedy. Pain severe, *with restlessness and constant inclination to move the limb, which gives pain*. In the milder cases walking and motion relieve for a time, but the pain is acute on *beginning to move*. *Worse in damp weather*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

VIRTIGO.**(Dizziness.)**

Virtigo is not a disease but a symptom. This symptom, which is so often associated with many diseases, calls for some consideration. It is often seen in opposite conditions, as for instance, in the full-blooded, or the anemic subject. It is felt when there is too little or too much blood in the brain. It may occur in the frail, emaciated invalid or in the robust and plethoric individual.

Its underlying causes are so numerous that it would be difficult to enumerate them all. It is a loss of the sense of equilibrium of the body, accompanied by extreme dizziness, with a loss of the power to walk in a straight line, or, in excessive cases, even to stand up, and also by nausea and vomiting. It is a symptom so annoying and even terrifying to those suffering from it that the discovery of the reason back of it becomes one of great importance.

Virtigo is sometimes one among other indications that there is some serious disorder of the brain or spinal cord, and it is also often one of the symptoms of heart-disease. In these cases, of course, the organic disease is recognized, and there is no doubt as to the reason for this particular symptom among the many others. In many instances, however, people will complain of recurring attacks of vertigo who seem otherwise quite well, and it is only by careful questioning and examination that the physician will be able to determine what is the root of his patient's trouble.

It may be gastric in its origin, coming on suddenly after a full meal, and accompanied with headache and sometimes dimness of vision. Gastric and bilious vertigos are relieved by any treatment that enables the system to do its work properly and carry off the poisons that are producing autotoxication.

Vertigo is often one of the symptoms complained of by the nervous or the anemic patient. If there are found at the same time the usual accompaniments of the nervous state, such as a history of overstrain, a lack of nerve force, a constant feeling of fatigue, the vertigo may be safely considered part of the general condition, especially if it is rather mild in type but occurring often.

When vertigo accompanies anemia it is probably cerebral, that is to say, a direct consequence of a poor supply of blood to the brain.

When vertigo is due to eye-strain it is usually not very severe, but persistent, growing better if the eyes are kept shut, and disappearing for a time when they are rested. As soon as the eyes have been properly fitted with glasses this type of vertigo will immediately cease.

Any abnormality in the heart action interfering with the circulation is a frequent cause of vertigo. This is manifest on any strenuous exertion, or ascending a height. Derangement of *digestion*, and a host of other reflexes may cause a troublesome dizziness which cannot in all cases be cured until the cause is known. Very many remedies have this symptom of vertigo associated with many others. In some diseases quite curable vertigo may be the most troublesome of all. For instance, if

the vertigo were from indigestion, such remedies as *Bry.*, *Ipec.*, *Puls.*, and *Nux* would be thought of.

If associated with brain disease, *Acon.*, *Bell.*, *Bry.*, *Calc. carb.*

If from the heart, *Acon.*, *Ars.*, *Bry.*, *Dig.*, *Cactus.*

Determine, if possible, the cause of the vertigo, and *study the remedies for any disease with which it seems associated.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DISEASES OF THE SKIN.

GENERAL SYMPTOMS CONNECTED WITH THE SKIN, WHICH MAY FURNISH HINTS TO DIAGNOSIS AND PRESCRIBING.

The normal skin is smooth, presenting a slightly oily surface, and free from the extremes of color, heat or coldness.

During the presence of fever the skin become hot, dry and flushed. In acute diseases if the skin becomes moist, especially after giving a remedy, it is a most favorable sign.

In sub-acute or chronic diseases when the skin becomes cold, with a perspiration that is cold, clammy and profuse, the situation may be full of danger, especially if the pulse is weak and irregular. The color of the skin in disease often aids in diagnosis and in the selection of a remedy. Thus, the face is red and flushed, especially in scarlet fever and in acute diseases of the brain and lungs. In anaemia, fainting and collapse it is pale. The cheeks near the center are flushed in *hectic fever* and during *prolonged suppuration*. In asthma and heart disease the skin often becomes blue and livid, also in collapse. Yellow-greenish color of the skin is a sign of disease or *torpor of the liver, and jaundice*. A sallow, pale, anaemic skin may indicate some form of cancer, chlorosis, or the worst form of dyspepsia. There are varieties of eruptions on

the face which are characteristic of some diseases, and which have not been mentioned under eruptive diseases.

The frequent, annoying eruption on the face of young boys and girls approaching puberty, in the form of pimples, black pores, or even pustules; the *persistent scabby, unhealable sore* that appears about the nose or lips and, untreated, terminates in epithelioma, a form of cancer; the "copper-colored" spots that like *ear marks*, dot the face of the subject suffering from secondary syphilis; all may serve as pointers to both a diagnosis and a remedy.

It is quite as true that the appearance of the face furnishes evidence of disease, as it is that the facial expression is often a fair index of the individual; The functions of the skin are many and all important, and when kept in a normal condition it is a conservator of health and protection from disease.

The nomenclature of skin diseases is well nigh past understanding. Not a few authorities give different and bewildering names to the same ailment. The number of real diseases of the skin is not large, and only such as are somewhat prevalent will be mentioned here. Many of the so-called "skin diseases" are really nothing more than symptomatic of *some internal, constitutional taint* which must be treated with proper internal remedies before the skin disease will disappear.

Herein lies the fallacy and danger of external treatment, the result of which is often serious because of transferring the disease from the skin to some more vital part, (by no means a cure), where it may in time become the seat of an organic and incurable disease.

Doubtless abnormalities of the skin would almost disappear, if every individual possessed a healthy, normal constitution. This may perhaps even include the skin diseases of parasitic origin, which indeed are few. (See local treatment and its dangers).

The marvelous protection from disease, by the delicate normal skin when fully intact, is one of the wisest provisions of Creative Intelligence. That the normal skin can be safely exposed to almost every form of corruption and disease, with no protection except that given by nature, is equally marvellous.

This much is said to emphasize the vast importance of caring for the skin and guarding against the appalling results that often come from injuries to it, which, however slight, may permit *septic and toxic material* to enter the system, with alarming results.

In prescribing for diseases of the skin, it will often be found necessary to seek for indications that lie deeper than the skin, as for instance, the habits of the individual, diet, constipation, hereditary taint, etc. It is the same principle that has so often been emphasized in this treatise, that the individual as a whole must be taken under consideration whenever the prescriber aims at a rapid and permanent cure.

ECZEMA.

This is by far the most frequent and important of all diseases of the skin. It occurs oftenest in childhood when the skin is delicate and susceptible. It is non-contagious, often chronic in form. It begins with redness or

inflammation of the skin, either in small patches or diffused over the cheeks or hands. Very soon small vesicles or *blisters appear*, attended by *intolerable itching and burning*. This is soon followed by the formation of yellowish or dry, *gummy crusts or pustules*.

In the case of children and even of adults in the more severe cases the itching is so great that no restraint is sufficient to prevent scratching of the parts, which causes a mingling of blood, pus and scabs that produces a most repulsive visage. In this way the disease is implanted in different parts of the body. It is sometimes divided according to the parts affected, but little value or importance attaches to this. The face is most frequently attacked in children, the hands in adults. The prognosis, so far as life is concerned is favorable, but the exact duration of the disease remains an unknown quantity. The question of its cause or causes is still being argued by the best authorities. Some deny that it is hereditary, others affirm that it is to be classed among parasitic diseases, though no micro-organism has yet been discovered.

Some practical facts are established, and only such should find a place in this treatise. *The free use of poor soap, or even too much soaping* and scrubbing of the sensitive skin of babies, will cause an attack. The hands of washerwomen are a good illustration, for it is found that the disease most frequently occurs among them. Over feeding of too rich food, especially the fats, cream, etc., is another cause.

Eczema may follow from vaccination. Where a constitutional tendency is acquired through heredity or

otherwise, it needs only some slight exciting cause to produce the disease.

MEDICAL TREATMENT.

The response from the use of internal remedies is not always as prompt as the patient desires, and the physician, too, may feel the same way. This rather adds to the time required to cure and leads to frequent change of remedies and general confusion. When a remedy has been well selected, it is best before discontinuing the same to change to a higher potency. So far as the external treatment is concerned it should be confined to non-medicinal substances or such soothing articles as powdered starch, or talcum powder. The use of soap and water will invariably *aggravate* and, especially in the case of infants, should be managed with great caution or omitted for a time.

The following remedies have proven most valuable. *Ars.*, *Apis*, *Graph.*, *Hep.*, *Sul.*, *Rhus Tox.*, *Sul.*

Arsenicum—Dry, scaly surface with slight secretion but intense *burning and itching* of the parts; apt to be worse at night and better from warmth.

Apis—Small, watery patches with much stinging and itching, face especially. About eyes may be swollen or puffy.

Calc. carb.—In scrofulous, fat, light-haired children inclined to glandular swellings and disease of the bones. The eruption is dry, and thick scabs on the face and head.

Graphites—Surfaces exude a tenacious, sticky secretion, especially about the ears and face often indicated.

Hepar sulphur—In cases inclined to become chronic or recur after nearly cured. The discharge is often pus and offensive. Worse from being touched or from cold air. All injuries incline to suppuration.

Rhus tox—Surface red, blistered in places, covered with scaly, yellowish-looking substance. Itching and restlessness prevents sleep.

Sulphur—A few doses of Sul. may be given on the start or during the course of treatment, especially if there is evidence of Scrofula or any tendency to become chronic. Similar to Hepar sul.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

HERPES.

VARIETIES AND SYMPTOMS.

Herpes is a cutaneous affection characterized by a group or number of *small blisters or vesicles* about the size of a hemp seed or very small pea. After a period of five to eight days they dry, leaving an irritated surface covered more or less with *crusts* and sometimes pus.

There are several varieties of Herpes, at least in the books, but seemingly more on account of location than of any essential difference. When the disease is located about the mouth or lips, it is called herpes facialis. This is a most common location, and it often follows or accompanies severe colds and especially pneumonia.

HERPES ZOSTER.**(Shingles.)**

This is the most *painful* form of herpes. It attacks the body near the waist line and may involve one or both sides. The small, *pearl-like blisters* make their appearance along the line of a spinal nerve, giving the semblance of a *belt of pearls*. The eruption may be preceded by chills, fever and lassitude. Its eruption lasts from one week to ten days. In some cases ulceration follows, also a most painful neuralgia involving the seat of eruption. The parts become exceedingly *sensitive to the touch*, while sharp pains follow up the spinal nerves.

Another form of Herpes occurs in different parts of the body, always taking a circular form resembling and often confounded with "Ring-worm," which is quite a different disease; the latter being of a parasitic origin, hence contagious, whereas herpes is neither. While all forms of herpes are made most manifest by a disease of the skin, it is likewise certain that in some way it is related to, or caused by some abnormal condition of the nerves distributed over the parts involved.

MEDICAL TREATMENT.

The disease as a rule is self-limited and void of danger. A few remedies have been found useful. Rupture of the little blisters should be avoided if possible, for when this happens the parts are slow to heal and often cause the most painful neuralgia to follow. Some protection of the parts by means of a silk handkerchief, or absorbent cotton, will serve a good purpose.

The remedies that may be of use are chiefly, *Acon*, *Apis*, *Canth.*, *China*, *Crot.*, *Tig.*, *Rhus Tox.* and *Spigelia*.

In the early stage where the fever and restlessness require, *Acon.*, or *Ars.* may subdue the force of the disease.

If the blisters burn and sting, *Apis.*, *Canth.* and *Crot. Tig.* will afford some relief.

If about the mouth, *Nat. M.*, *Ars.*, *Hep.*, *Sul.*

For the painful neuralgia, *Spig.* and *China* will often be indicated. Should any relief be afforded by the external application of some dusting powder, like corn starch, talcum, or rice flour, they may be used freely without harm.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

RING-WORM.

This disease is known and often recognized by its circular form; occurring most frequently on the face, neck and head. It resembles the disease sycosis or "barber's itch," both in superficial appearance and causation, for both are very contagious and often spread by careless and uncleanly barbers, also the use in the family of a common towel.

The skin becomes somewhat red and covered more or less *with a fine, dry, scaly* formation which in some cases, especially about the beard, becomes a *thick crust*. There is more or less itching and burning. The treatment as a whole, is not very satisfactory. The *Sulphur*

ointments cure some cases, giving at the same time *Sulphur* in Homeopathic doses, internally.

Sepia has cured some cases, and may follow the use of *Sul*.

As Ring-Worm is a highly contagious, parasitic disease of the skin, it has often been found necessary to use an application to destroy the parasite. This may be done by scrubbing the parts, twice a day, with green soap and hot water, after which, paint the part with a weak solution of *Iodine*.

URTICARIA.

(Nettle-Rash.)

The name of this disease is most fortunate, as it conveys a good idea of its appearance, symptoms and pathology.

The peculiar elevation of a wheel-shaped eruption so resembles that caused by contact with the common nettle that the difference cannot be easily determined. Furthermore, the *burning, itching, stinging* pain bears a like resemblance. There is also a resemblance to a bee sting, or the bite of some poisonous insect, as a spider or flea, etc.

The elevated, wheel-like blotch or eruption, usually appears suddenly and may spread over the limbs and body. It often disappears in the same way, *leaving no trace* of its presence.

The disease is quite common, and its diagnosis will be easily made. Its duration is from a few hours to a few

days, and the prognosis always favorable. Among the direct, or exciting causes may be mentioned the eating of certain kinds of food, which in connection with individual idiosyncrasies will produce an attack. Such articles as *sea food, pungent spices, and strawberries*, are those most apt to do so. Mental excitement, fright, grief and anger may cause an attack.

MEDICAL TREATMENT.

The use of internal remedies *only*, should constitute the treatment.

Apis—Often sufficient. The stinging, burning pains predominate.

Arsenicum—The eruption burns like fire. Patient restless, full of fear and apprehension, cannot rest anywhere, generally worse after midnight.

Hepar sulphur—Useful in frequently returning or chronic form.

Urtica urens—Symptoms similar to Apis, stinging and burning. This remedy approaches a specific, and in the absence of indications for others it may be given.

PRURITUS.

(Itching of the Skin.)

This is a troublesome symptom or condition which often occurs *without any visible eruption*. It may be general over the whole body, but more frequently it shifts from one part to another. In a final analysis, it

may be due to irritation of the terminal branches of the cutaneous nerves.

The troublesome itching may be associated with jaundice, and disease of the kidneys, especially diabetes. Pruritus ani is a troublesome symptom of frequent occurrence. In adults it is often due to fissures, tiny ulcers, or internal piles.

In the case of children and not unfrequently in adults, it is due to intestinal worms, especially the thread worm which at times pierces the membrane and skin about the anus.

In nearly all cases of pruritus, it may be found that other conditions are present which will lead to a right diagnosis, and render the treatment more rational and successful.

PSORIASIS.

This disease has been a *perpetual study*, both as to its origin and cure. It very often prevails in the case of individuals above the average in general health and with no evidence of any organic disease.

The weight of evidence is with those who claim that it is hereditary in its nature and *ancient in its origin*. It seldom develops before puberty, and often continues through middle and old age. Its first appearance is in *small patches of dry, scaly, silvery flakes* which accumulate in some thickness, unless removed by the friction of the clothing or by the *scratching* which is no small feature of the disease. It is often more in evidence about the

exterior side of the extremities, especially the elbow and knee. The obstinacy with which this disease has resisted all treatment is without a parallel. In looking backward, I recall a goodly number of cases that came under my observation, as passing along from one physician to another, but none that I remember left my hands better than they came.

Let us hope that the strides being made by the *anti-toxins* and autotoxins will reach psoriasis.

SCABIES.

(Itch.)

“So naturalists observe a flea
Has smaller fleas that on him prey;
And these have smaller still to bite 'em;
And so proceed ad infinitum.”

—Swift in 17th Century.

SYMPTOMS AND TREATMENT.

This disease, commonly called “Itch,” is caused by an animal parasite which burrows itself through the thinner and outer portion of the skin, where it finds a habitation and deposits its eggs. This in a short time causes pimples, vesicles and pustules to appear, all attended with intense itching that may continue day and night often worse during the latter.

By the process of scratching, the finger nails become charged with the disease or parasite which is speedily transferred to different parts of the body or to a second party. The disease seems to flourish best in the midst

of dirt and filth where there is little disposition or opportunity for giving proper care to the surface of the body. During the late war in this country and for some years thereafter, a disease sprang up through camp life and unsanitary conditions, called "army-itch," which was doubtless true scabies.

In dealing with this disease two things confront us. First, the destruction of the parasite; secondly, the use of such remedies as will best remove or repair the injuries caused by it.

The use of sulphur and mercurial ointments seems to accomplish the former very promptly. The patient should take a warm water bath in the evening and when the surface becomes dry and warm, the ointment should be applied over the whole body and allowed to remain for 24 hours, after which repeat the bath and ointment as before. The third application should be sufficient to destroy the parasite.

The use of the homeopathic remedy should begin with the above treatment and continue for sometime after.

Unless special indications call for other remedies, the treatment may begin with the use of *Sulphur* internally, to be followed by *Hepar Sul.* or other remedies best indicated.

Of course, a person suffering from itch should be supplied with separate towels, handkerchiefs, bed, etc.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

CONSTITUTIONAL DISEASES.

DIATHESIS.

(Constitutional Pre-Disposition.)

“And this is the reason why cure of many diseases is unknown to the physician of Hellas because they are ignorant of the whole which ought to be studied also; for the part can never be well unless the whole is well.”

—Socrates, 400 B. C.

There is so much that is true and of practical value in the following quotation that I insert the same without comment; it would be very difficult to present so large a subject in a more familiar way or in fewer words. The origin or basis for the *individual Diathesis* rests largely upon the principles of heredity; upon marriage and inter-marriage for generations, representing different types with the resultant pre-dispositions so that not a few suffer from a real tyranny in their physical organism, over which they have no control and for which they are not responsible. Homeopathic remedies in the higher potencies, including the “tissue remedies” often meet and overcome some of the worst forms of constitutional diseases and even the predisposition to the same.

“The word diathesis in medicine means ‘a constitutional pre-disposition.’ Certain individuals, or often certain entire families, may be confidently expected to react physically in one way, while other individuals or groups of individuals will react in another way. This is why doctors are interested in the family history of their patients. By finding

out what sort of material people's tissues are made of, the doctors are able to judge what sort of physical strain the patients will prove most susceptible to.

"Some people are physically 'all wool and a yard wide'; others should be marked 'handle with care—this end up.' It is when the stress of life comes that these differences in the texture of people, so to speak, become most apparent, and it is the common, simple, every-day ailments to which all are subject that try people out, and grade them according to their physical class.

"One schoolboy will stub his toe, grumble a minute, and that is the end of it. The next boy will meet with the same accident, and must stay at home for a week and have his toe poulticed. The first boy has inherited sound tissues. He can afford risks that the second boy must avoid if possible. Nature has insured him for a higher sum.

"The so-called strumous diathesis, or tuberculous tendency, is always bad soil for all ailments, even though tuberculosis may never actually develop in it. Its subjects will show a susceptibility to various ailments, such as pleurisy, repeated attacks of influenza, or bronchial weakness—they are constantly reminded that a foe waits at the gates of life.

"It would be hard to enumerate the many ills that are now traced to the gouty diathesis. Among them may be mentioned tonsillitis, asthma, and many forms of skin trouble, such as outbreaks of *herpes*, or eczema. Many people who are of the gouty or arthritic type will suffer from repeated attacks of tonsillitis, or *herpes*, or hay-fever while young, and become the victims of genuine gout in middle life.

"Another constitutional pre-disposition is the neurotic or nervous type, in which, as its name implies, the nervous system is at fault, and will be selected as the point of attack. These are, in fact, the three great types into which all imperfect physical material may be divided—the strumous, the arthritic and the neurotic. In many persons two different types may be found blended and exercising a

modifying influence upon each other—an influence which may be either favorable or unfavorable.”

RACHITIS.

(Rickits.)

This is a disease that becomes manifest, sometimes at birth, but more especially during the *last half of the first year* and the first half of the second, resulting in more or less permanent deformity. It is characterized by tardy dentition, *defective development of bone* and cartilage, especially about the head, trunk and limbs. *General weakness*, unhealthy appearance, much perspiration, distention of the abdomen, etc.

The children of tubercular, scrofulous and syphilitic parents have a predisposition to Rickitis, which is often flamed into activity by unsanitary surroundings. With proper care and medication, very much can be done to overcome the disease. Fresh air, sunshine, cleanliness, proper nourishment, are all indispensable. On account of the faulty development of bone the child is slow in learning to walk or sit upright. This may be nature's remedy of preventing greater deformity of spine and legs.

DIET.

If the mother is not in good health or if her milk is scanty or faulty, it is well to change to cow's milk. Older children, as soon as permissible, should have good milk, some cream, eggs, fruits and meat. Fortunate are the poor city children if they can be taken to the country or to the city park, or upon the roofs to get the *sun and air*.

TREATMENT.

Medication for these cases has accomplished much. A few remedies seem to furnish clear indications, and if properly selected will change for the better the awful destiny that is stampd upon the helpless, blameless little new-comer. Whatever remedy is given, it is well to begin with the lower potency and *go to the higher*, if the lower fails. When the improvement, however slight, seems assured, stop the remedy for a time, and repeat when improvement ceases. The remedy which has been chiefly called for, and one that has cured many cases for me, is *Calcarea Phosphorica*, used in the 3rd and 6th and 200th potency.

Next in importance and very often indicated is *Calcarea Carbonica*. Both are *deep acting constitutional* remedies and it is doubtful if remedies outside of this class will do much permanent good. *Any remedy well indicated* should be given temporarily, and all remedies, constitutional or otherwise, should be prescribed according to homeopathic principles. Olive or cod liver oil are often useful when the stomach will tolerate.

Calcarea carbonica—Best suited to the fair, fat and flabby; inclined to *profuse perspiration* about the head while *sleeping*. *Large head and abdomen with open fontanells* and sutures, slow, *delayed dentition*, slow to walk or stand, swelling and tenderness over stomach with diarrhea, very sensitive to cold air, constantly taking cold.

Calcarea phosphorica—Cranial bones thin, fontanells and *sutures remain open or stationary*, *teething*

delayed, neck weak, unable to support the head; *thin or emaciated*, slow in walking or unable to stand, *sunken flabby abdomen* with tendency to diarrhoea, child is weak, apathetic or peevish.

Hepar sul—May be useful if the Calcareas fail and especially if there is a cough with tendency to much perspiration. The face or body covered with pimples, inclined to suppuration.

Silicea—In thin, poorly nourished subject, inclined to *sweat*; the face pale and pinched; teeth and bones slow to develop; *inclined to constipation*.

Sulphur—When well selected remedies fail to cure, *Sul.* serves to *rouse the system* and prepare the way for other remedies. The child *dreads water*, cries with every effort to bathe; inclined to morning diarrhoea and to eruption on the face.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ACUTE RHEUMATISM.

(Inflammatory Rheumatism.)

The word rheumatism in its general sense is used in such a broad, even vague way by the masses as to mean little or nothing to the scientific mind. (See chronic rheumatism.) Further investigation and more extensive knowledge may give us a new name with a definite signification corresponding to the nature of the disease. The acute form is frequently termed rheumatic fever, acute rheumatism, or inflammatory rheumatism. Few acute

diseases run a more variable course and few have more dangerous complications, the chief of which is rheumatism of the heart, or endocarditis. In former times when external applications were in vogue, quite a large percentage of those who survived the disease were victims of "chronic heart disease" which in due time developed other complications both *distressing and irremediable*. Such results should be very rare with internal homeopathic treatment and proper care. Rheumatism is a disease of children as well as of adults. A predisposition to rheumatism exists in some families, and one attack rather increases the liability to another.

SYMPTOMATOLOGY.

The nature of the disease does not always manifest itself at once. It is often preceded by two or three days of indefinite symptoms such as often precede other acute diseases; general lassitude, sore throat, headache and lameness in general, after which there is acute *pain about the joints with redness over the seat of pain*, all of which is greatly aggravated by the *slightest touch or motion*. A profuse and *offensive perspiration* is always present, with scanty, high-colored urine. Frequently there will be a history of *rash exposure*, as sleeping or working in damp room, checking perspiration, and insufficient clothing. Occupation and climatic conditions are operative in causing rheumatism. Each individual case presents problems of its own. Homeopathic remedies carefully selected will do much to relieve pain and cut short the duration of the disease. Even without any complications the duration is uncertain. The more violent and acute stage lasts from two to four weeks.

Following this there is apt to be a considerable period of disability owing to weakness and sensitiveness of the muscles and joints, during which time undue *exercise or exposure is liable to produce a relapse* quite as severe as the original attack. See remedies after rheumatism.

RHEUMATISM.

(Chronic.)

In the older medical works, chronic rheumatism like the acute form, was accorded a large place; but with advancing knowledge many of the affections called "chronic rheumatism" have been found to be due to specific causes not in any way related to rheumatism. For purposes of diagnosis, prevention and treatment, the real gain by this change cannot be over-estimated. Errors in diet, faulty nutrition and failure of the excretory organs to eliminate toxic material from the system, resulting in auto-intoxication, all give rise to a legion of pains and aches which have no right to a place under the general term "chronic rheumatism." Such conditions usually prevail in persons beyond middle life. Again, there may be other influences operating on the individual constitution such as occupation, climate and environment, so that each case must be considered on its merits. With the selected remedy should go instructions as to causes and conditions to be avoided by the patient, else disappointment will follow any medical treatment. Obviously, the selection of remedies for so-called chronic rheumatism presents unusual difficulties. The following are adapted to both the acute and chronic forms of the disease.

MEDICAL TREATMENT.

Aconite—After exposure to cold winds, or from *checking perspiration*, a severe chill and high fever follows. Thirst and restlessness, pulse *strong, full and rapid*. If free perspiration follows, the remedy should be given at longer intervals and the patient kept in bed safe from all chilling and all exposure.

Belladonna—Symptoms similar to Acon. with throbbing pain in head and neck, sore throat, very hot skin with cold feet. May be drowsy and delirious with pain.

Bryonia—Often follows Acon. which has reduced the fever and restlessness. Pain of *Bry.* is *sharp* and *always greatly aggravated by any motion*. *Cannot be moved* without tense pain, *joints red and painful*, vertigo and faintness on rising from pillow.

Cactus—When the disease involves the heart, with acute pain and cramping, *clutching about heart and chest*, sense of suffocation and palpitation, cold sweat on face. (See *Verat.*)

Gelsemium—In some cases with fever but no thirst. Lassitude and prostration, pain in neck and base of brain with pain and soreness of eyeballs, lids heavy.

Mercurius—Later stages with profuse perspiration which gives no relief, pains all *worse at night*, tongue heavily *coated and swollen, with much saliva* and offensive breath.

Pulsatilla—Pains not so severe but shifting about,

with constant *chilliness*, not much fever, no thirst, gastric derangement with bad taste in mouth, all worse towards evening, constant craving for fresh air.

Rhus tox—One of the first to be thought of in either acute or chronic rheumatism, especially if there is a history of *getting wet* followed by neglect and chilling. The joints and muscles feel lame and sore with constant, aching pains which drive the patient about. Cannot keep *still in bed* or room and worse *from damp weather, strain of heavy lifting*, and bathing. Worse on beginning to move, *better by continued motion*. Lameness in muscles of back, better from pressure or lying on something *hard*. The great *restlessness of limbs* very characteristic.

Radium bromide—This is a comparatively new remedy but it has already furnished both in its careful proving and clinical results, the best of evidence that it is to become a most useful remedy for rheumatism and gout. The clean-cut homeopathic indications are very similar to *Rhus*. Thus far, clinical verifications stamp the provings as up-to-date and most trustworthy.

The following remedies may also be considered: *Arn.*, *Cimicif.*, *Cham.*, *Dulc.*, *Nux.*, *Lach.*, *Lyco.* and *Sul.* See Mat. Med. Part III.

See diet under Gout. The free use of *pure drinking water* preferably the Underwood or Poland Spring water to facilitate the elimination of toxic material from the system (chiefly through the kidneys) is important both in Rheumatism and Gout.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

GOUT.

Gout, in many respects, is similar to rheumatism and is also divided into the acute and chronic forms. Whether acute or chronic, the disease is generally due to excesses in living or intemperate and indolent habits which in time so burden the eliminating powers of the system that toxic substances accumulate, especially about the smaller joints, resulting in the well-known "aches and pains" of the gouty subject. Occasionally there is an outbreak of fever, when local and inflammatory conditions ensue. This is termed acute gout. Such cases, like acute rheumatism, should be placed in bed at once and treated accordingly. See remedies and their indications under the head of acute rheumatism. Chronic gout may be said to be acute gout minus the inflammatory and febrile symptoms, the cause and other symptoms being essentially the same. In this form of gout, moderate exercise in the open air is indispensable except in cases where the strength and pain are prohibitory.

The patient should drink freely of water (see rheumatism) and partake of a light, restricted diet. Many diet lists have been made out, not a few diametrically opposed to one another, owing doubtless to honest but theoretical conceptions in vogue as to the nature of the disease. However, a few rational conclusions are fairly well established.

In the place of so-called "butcher meats" the lighter and more harmless animal foods should be substituted, such as fish, game and chicken, also sea food, eggs,

milk, fruit and vegetables. Liquor of all kinds and strong tea and coffee should not be used. Everything that promotes perfect regularity of the bowels and the free action of the kidneys is important and the same is true in regard to keeping the skin clear and normal by frequent baths, thus promoting a freer elimination of toxic products from the system.

Gout and rheumatism are often so blended as to baffle the diagnostician, but fortunately the homeopath does not treat the "name" of either. The remedies described at length under the head of rheumatism, may be referred to here as the ones chiefly indicated in either disease.

MORBID GROWTHS.

A brief summary of the main facts concerning morbid growths is all that will be attempted here, and this will apply to all growths or tumors about the body or within any of its cavities.

A general division, all-inclusive, must separate all tumors into two classes, *malignant and non-malignant*. The malignity of a growth is determined both by the *local condition* and its *effects on the general system*. If the tumor shows a marked tendency to increase in size and to extend destructively, with or without severe pain, it is probably malignant. A confirmation of this diagnosis is made if the *general health suffers* proportionately, especially if there is marked *decrease in strength* and *weight with loss* of appetite, and anemia. The location of the growth and the local symptoms will contribute something towards an accurate diagnosis, also

the full history of a given case, including hereditary tendencies.

Non-malignant growths may be characterized by conditions quite the *opposite of the foregoing*. The growth is *slow* and for long periods may remain *stationary* with no tendency to destruction of issue; the *local symptoms are not marked*; the general condition of the patient continues fairly good and without loss in weight or strength. The importance of weighing all these facts, and minor ones related thereto cannot be over-estimated. Many a malignant growth that was curative by an *early operation* has been allowed to reach a stage quite incurable. This is especially true of cancer and the more *malignant growths*.

Contrariwise in these days, when the safety and success of surgery has become so well-established, the non-malignant growths may have been *needlessly operated*. In justification of this it must be admitted that occasionally the benign growth takes on malignancy. Very much depends upon all the facts in each individual case; the age of the patient, the location of the growth and the general health of the patient.

The *curative* value of constitutional remedies in some of these cases is no new revelation to the true Homeopath; however, to prolong this treatment *unduly* and jeopardise the life of the patient is a greater responsibility than any honest and competent physician is willing to assume. The specialist or surgeon should be conferred with and the responsibility shared.

Notwithstanding the value of medical treatment in

these cases, it is obviously impossible to enter upon the details of particular cases and remedies, without unduly enlarging the scope of this treatise. It may be said that it is not only safe, but often the best that can be done, to give the indicated remedy and this includes all symptoms and conditions both *local and general*. This may result in *checking the growth of tumors* and occasionally *removing* them altogether.

Unfortunately, the tendency is, in all superficial prescribing, to give undue consideration to the *local symptoms* and neglect the general ones. This local abnormality, tumor or whatever it may be, is often the manifestation of some *constitutional defect* which must be remedied before the local manifestation of disease will disappear.

When good results are obtained from the proper medicine, they are generally quite permanent and far-reaching. This, I think, is especially true of glandular tumors and diseases of the lymphatic glands.

Any one of the deeper acting constitutional remedies may be called for.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ABSCESS.

An abscess is a collection of pus in any tissue or organ of the body, and is usually due to some preceding inflammatory, septic or morbid process. It may follow after some acute disease or injury, causing a serious

complication and protracted convalescence. As a remote cause the scrofulous or tubercular subject should not be overlooked.

SYMPTOMATOLOGY.

The early or inflammatory stage is always attended by local swelling, pain and redness. This is due to the highly congested condition of all the parts involved. The pulse and temperature continue *persistently high until the information of pus is well advanced*, after which the temperature is *apt to fluctuate* during each 24 hours. The general condition also changes. Chilliness follows heat, and *vice versa*. Perspiration is often profuse and exhausting. Special symptoms develop according to the part or organ involved in the formation of the abscess. The liver, lungs, appendix and ovaries are the organs most frequently attacked. Minor cases often involve the glandular system, tonsils, etc. An abscess may develop in any part of the system, from an injury or the presence of some foreign body.

MEDICAL TREATMENT.

The location of the more serious form of abscess renders local applications quite impossible. The application of heat, the hot poultice of flaxseed or anti-phlogistine seems to afford some relief, reduces some congestion and promotes suppuration. In the language of the layman it "brings things to a head" and prepares the way for the use of the lance. The premature opening of an abscess is not considered good practice.

The use of the indicated remedy during the early,

inflammatory period will mitigate pain and in every way facilitate the recovery of the patient.

Aconite—When the fever symptoms are prominent ; pulse full and rapid, patient very restless, pain distressing and unbearable, *Acon*, will reduce the suffering and hasten the convalescence.

Arnica—In the early stage with a history of a blow or injury. Great *soreness of the parts*. Cannot be touched or moved on account of the keen sense of soreness. Parts look dark or mottled as though blood capillaries had been ruptured.

Bryonia—Pains sharp and piercing, greatly aggravated by any motion. Often useful in threatening abscess in chest, or in appendicitis. Fever less marked than *Acon* or *Bell*.

Belladonna—Skin very hot, pain throbbing, least jar causes great complaint. Much headache and drowsiness, yet cannot sleep. *Bell*. may be called for if *Acon*. fails to relieve.

Hepar sulphur—The formation of pus has become evident, swelling and local symptoms persistent, yet the heat and fever may have changed to occasional chills and face looks *dark or livid*, cannot endure *slightest* touch. and unless indications are unmistakable for another, should be given the preference.

Lachesis—In rare cases resembling carbuncle. Surface looks *dark or livid*, cannot endure *slightest* touch. All pains seem worse *after short sleep*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions.]

CARBUNCLE.

This appears principally on the neck, along the spine or buttocks. It begins with soreness, pain and swelling which becomes *hard, red and painful to touch*. The pain increases and a burning sensation is almost constant. Later, the surface changes from a red to a *purplish hue*. After 5 to 7 days, small holes appear in the swelling from which a small quantity of yellowish matter protrudes.

The swelling and hardness may be from one to two inches in diameter. After two or three days, the openings seem to increase and the skin and superficial tissues break down, followed by a discharge of pus and sloughing tissues which is the climax of the disease. Carbuncle on the neck may result in brain complications. The location and extreme suffering often prolonged, may produce prostration and in some severe cases fatal results.

MEDICAL TREATMENT.

As to the earlier treatment of carbuncle there is considerable difference of opinion. Some advocate a free incision of the affected parts or, two incisions made at right angles. Others abhor the use of the knife until the second or last stage, when suppuration has taken place and the acute inflammation has passed. The latter has been my method of procedure and I cannot now recall a fatal case. It may involve more time, possibly more pain, but so far as my observation goes the danger is *less*. *Hot applications* afford some relief and the use of the Antiphlogistine paste as warm as can be borne will reduce the inflammation and hasten the suppuration. It

may become necessary to make a free incision for the evacuation of pus and sloughing tissues, after which the parts should be frequently cleansed with peroxide of hydrogen and a dry dressing of some antiseptic powder. No small part of the treatment is the selection of the *indicated remedy*. The remedy should be changed as the condition of the parts changes and the *condition of the patient requires*. There are three remedies of great value in Carbuncle, *Ars.*, *Bell.*, *Lach.*

Arsenicum—Prostration, yet restless and shifting about. Thirst great yet takes but a sip each time. Burning pain, yet much relieved by *hot applications*. Nausea and vomiting, especially after taking water.

Belladonna—Throbbing in neck and head with *drowsiness*, yet cannot sleep. Face flushed, dread of jar or noise. *Head hot and feet cold*.

Lachesis—Bluish look about swelling. Cannot endure touch or have anything about the neck. *Hot flashes, prostration, dry mouth and tongue*. See Hepar and Sili.)

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under 'Directions.']

BOIL.

The exact cause of boils is not known, but it is generally conceded that they are due to a depraved state of the blood. Large boils usually occur singly and may have considerable depth, discharging a large amount of pus *practically an abscess*.

“*Blind boils*” occurring in groups, recurring often, but

discharging little or no pus, are a source of torture to some who are just recovering from some acute illness.

Every possible attention should be paid to hygienic regulations. Doubtless it is a case of self-infection. Thorough and frequent bathing, daily movement of the bowels, if need be by an occasional saline cathartic, and when possible a free amount of open air exercise, a moderate and simple diet should be the rule.

The treatment both locally and internally, is substantially the same as under abscess and carbuncle.

Aconite, *Bell.* and similar remedies in the early stage, and *Ars.*, *Hepar* and *Lachesis* will often be indicated later on, especially when there is a delay in maturing. See special symptoms.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

STYE.

This is a small abscess which forms usually on the upper eyelid and is due to inflammation of the hair follicle, resulting in *local suppuration*. With some this is quite a common occurrence and is due to defective eyelashes. Two remedies have been found most useful in preventing a frequent recurrence.

Puls. in occasional doses, to be followed by *Hepar Sul.* if necessary. Premature efforts to evacuate the pus often retard recovery. In case the pus is just beneath the skin and slow to "break," a needle or fine pointed knife may be used to open the pus sac, after which a few applications of some simple antiseptic may be made.

HEALTH TOPICS AND UNCLASSIFIED DISEASES.

DRINKING WATER.

ITS USE IN HEALTH AND IN THE TREATMENT OF DISEASE.

The importance of pure drinking water and its proper use in health and in sickness is far from being properly recognized. It is not an unusual thing to find individuals either in health or sickness who are most discriminating as to the quality and quantity of food taken, who are almost indifferent as to either the quality or quantity of water they drink. This, I am sure, is a very serious sin of omission which often leads to new disorders and perpetuates those already existing.

Elsewhere and under the head of "Sources of Infectious Diseases" a considerable space has already been devoted to the dangers that arise from the use of infected or polluted drinking water, hence further consideration of this vital matter can be referred to, (see index) and need not be repeated here.

Another distinct phase of this subject is the use in proper quantities of pure drinking water as a conservator of health; to promote the normal function of all the organs of the body and especially those whose functions it is to eliminate from the system waste and toxic material

and especially the kidneys, liver and bowels. Approximately three pints of water should be taken during each twenty-four hours unless there is some special reason to the contrary.

Again in cases where there is marked inaction (from disease or otherwise) of the kidneys, liver or bowels, the free use of common drinking water is often entirely insufficient to accomplish the desired results and it becomes necessary to resort to some natural spring water having a *specific effect* especially upon the kidneys and liver, promptly increasing the secretion and flow of urine and bile. Several such waters have gained a standing for good results and should be used as an important aid to successful treatment. I am using with the most satisfactory results the "Underwood Natural Spring Water," obtained direct from the springs at Portland, Me. It shows a fine analysis and in competition with many others was awarded the *grande prix*, and gold medal at the Paris Exposition, 1911. In the above and similar cases, and as a table water for travelers, I know of none safer or more refreshing.

NATURAL VS. ARTIFICIAL WATERS.

The question is often asked whether boiled or distilled water will answer the same purpose as a well selected spring water. My own experience compels me to answer no; and I think there are ample reasons for such a conclusion.

While it is true that in the process of boiling, the

water is rendered sterile and safe, so far as being free from disease producing bacteria, the objectional elements so far as mineral and vegetable matter are concerned, remain in the water, although it may be in somewhat changed form. Clinical experience teaches that there is generally a prompt therapeutic action from a well selected spring water which is not the case with water that has been subjected to the boiling point. Boiling of water seems to deprive it of some of its virtues which are not made manifest in a chemical analysis; furthermore, it is rendered flat and insipid to the taste, so that many persons soon tire of its use.

Practically the same is true of the various attempts to produce what may be called artificial mineral waters, for however well and scientifically prepared, they are minus the virtue which characterizes the natural waters they are intended to imitate. It would seem well nigh obvious to any one who has given this matter any serious thought, that the great desideratum is to use if possible a pure natural water, one that can be used without subjecting it to heat or any other treatment, a water free from disease producing germs and one containing little or no vegetable matter. I cannot omit to repeat here a word of caution as to the risks that occur from the use of water taken from wells (adjacent to the barnyard and out-buildings) which in time of a rain storm naturally serve as a cesspool, receiving the surface drainage. Also the danger of drinking from open, running streams, especially in populated districts, for not infrequently they are seriously polluted, and conveying disease, produces bacteria.

COFFEE AND TEA.

THEIR USE AND ABUSE.

The following article by Dr. Harvey W. Wiley, formerly chief of the Bureau of Chemistry of the U. S. Department of Agriculture, which appeared in the Tea and Coffee Trade Journal, is, I think a fair representation of a most important subject. I quote the same because of the recognized authority of Dr. Wiley:

“There are a great many persons who are keenly susceptible to the influence of some of the soluble substances contained in tea and coffee. Most active of these substances by far is the alkaloid caffeine. It has a peculiar effect in general and in many cases has special effects.

“Many parents forbid the use of tea and coffee to their children, and I think this is a wise precaution. I do not think there is any danger of interfering with the health or nutrition of the child by abstinence from drinks of this kind; on the other hand, it appears to me there is danger of permitting the child to form a habit, because coffee and tea drinking are to a certain extent habits, and I think caffeine is recognized as one of the habit-forming drugs. In regard to children, at least, therefore, the word ‘prohibition’ is perhaps a better one to use than ‘temperance.’

“Coffee and tea have become such universal beverages in the last three hundred years as to present a problem which must be faced in some way. The problem is not so acute as in the case of alcoholic beverages, which are not natural products. I use the word ‘natural’ in the sense that alcoholic beverages are not presented for consumption without having been specially prepared by the agency of man. This is also true of coffee and tea, as an extract is made, but in the extract the products are not changed but only placed in a form suitable for drinking, whereas in the preparation of an alcoholic beverage the natural constituents of the product are entirely altered, the sugar being converted more or less completely into two other products wholly dis-

similar in character, namely, carbon dioxid and alcohol. The soluble products of a cup of coffee or tea are those which are contained in the original substances, and it is not likely that they are changed in any marked manner by the process of leaching."

A grown person, Dr. Wiley admits, has a right to choose his own food, but he advises caution in the use of tea and coffee. The moment a man feels that he is becoming a slave to either he should call a halt. If giving up tea or coffee produces malaise, headache, incapacity for work, and a general disturbance of the health, the victim may know that he has gone too far. We read further :

"It is quite impossible to prescribe how much tea and coffee each individual should drink. This is a matter which is left, and should be left, entirely to his own choice. The use of beverages of this kind is not inhibited by the food and drugs laws, even should they prove to be harmful, because that act applies only to added substance in so far as injurious and deleterious bodies are concerned.

"From a commercial point of view it is highly important that tea and coffee should be so used as to work no injury. If, on the other hand, they are abused so as to threaten the health of a community, there is no valid reason why the community should not prohibit their introduction and sale, since the exercise of a police power is wholly within its jurisdiction.

"Those who are interested commercially in the sale of coffee and tea should be the most earnest and enthusiastic to control any possible damages which may result from their activities. It would be desirable, therefore, that trade journals devoted to the interests of these great articles of commerce should from time to time publish articles by competent hygenists and physicians looking to the safer and saner use of these beverages."

The primary action of coffee when taken by a person in health is set forth in Part III (*Materia Medica*) under *Coffee Cruda*. Not a few have experienced or verified this proving many times over. Often there are secondary or cumulative effects that follow from the constant and intemperate use of coffee which are attributed to disease, such as indigestion, constipation, headache, sleeplessness and nervousness. The individual temperament, and occupation both modify the effects of coffee. Those engaged in some active out-door life suffer less from such derangements than those of a nervous temperament who are obliged to lead a sedentary indoor-life. The use of coffee and tea by young children is from every standpoint positively wrong, and with what Dr. Wiley states in reference to the same, also in reference to their intemperate use by adults, I fully concur.

No little difficulty is experienced in every day practice to convince those who are suffering from the ill effects of what they eat or drink, to make the necessary change, and this is particularly true with intemperate uses of tea and coffee. This is doubtless true because caffeine as Dr. Wiley intimates, is one of the habit-forming drugs and this will also account for the fact that when the caffeine is no longer taken into the system the individual may experience many symptoms already referred to—until the system has fully recovered from the habit; this may in some cases require weeks of abstinence from the use of both tea and coffee.

The ever recurring question of what can be used as a substitute must require an answer suited to the individual

case. For children the best substitute is pure drinking water. For invalids or those who think they must have "something warm" with their morning meal, it is well to use cocoa, warm milk, or some of the cereal preparations, changing often on successive mornings until the one most beneficial can be selected for more permanent use.

"Alkettthrepta" is a very delicate and nutritious drink, made chiefly from a high quality of cocoa bean. It has long been a favorite beverage for children and adults. It is suitable for invalids as well, and for those seeking a substitute for tea and coffee, may be obtained from all homeopathic pharmacies.

ACUTE AND CHRONIC ALCOHOLISM.

The term acute is used to designate a condition of thorough intoxication, but not one that has been continued long enough or often enough to fix upon the individual some organic disease or a general disease of all the tissues of the body. When this latter condition has taken place, when the whole system seems saturated or permeated with alcohol which nature finds great difficulty in throwing off, this is termed chronic alcoholism. The line of demarkation between the acute and chronic is a flexible or indefinite one, owing to the varying resistance of different individual constitutions to being overcome by the toxic influence. The liver, kidneys and stomach, in the order mentioned are the first to become diseased. The brain and nervous system are always involved, the will power, the mental and moral faculties weakened, all go

down before the furious passion for drink. But little can be done during an ordinary case of acute alcoholic intoxication. The condition of the individual is not unlike one suffering from an over-dose of narcotics and the "sleep off" stage cannot be cut short. Plenty of fresh air seems to shorten this period. This, with protection from exposure to cold and personal injury, is all that can be done. Later on, or as the digestive organs will tolerate, it is well to provide a fairly substantial meal which often *decreases the immediate craving for more liquor.*

The chronic cases have furnished a vexing problem for physicians, specialists and reformers time out of mind, yet the solution seems about as far away as ever. The deadly diseases which follow in the train of those of alcoholic and drug addiction, should shock into silence their advocates. The mental and moral wreckage and degradation need no words of emphasis, for the commonest observer sees and admits it all. There is a hopeful outlook for a case that has not gone on until the development of some organic disease, provided the mental and moral co-operation of the patient can be depended upon to carry out the plan of a physician. In nearly every case it is not only safe but wise to discontinue all kinds of liquor at once. The mind and body should be engaged in some wholesome (but not too irksome) occupation, preferably out of doors. A free allowance of the most substantial food (such as will dispel all sense of hunger) should be taken with regularity. If practicable, the patient should be separated from all tempting influences, the sight or odor of liquor and the companionship of those who use it. Association rather with those who are in sympathy

with all individual effort to overcome the craving appetite, is also a feature not to be overlooked.

These suggestions are such as appeal to reason and from my observation have been the most potent in controlling the "drink habit," and they have been made from the standpoint of a practising physician rather than of a reformer or moralist. It would seem unnecessary to remind those interested in a patient that the one thing most apt to cause a relapse is some vexation, trouble or worry which a little discretion and patience might often avoid. The more cheerful the surroundings, including occupation and companionship, the more certain the permanent recovery. A few remedies have been of great service in overcoming the tendency to, or beginning of some organic disease, also in restoring the normal functions of the body, shattered nerves, inability to sleep, etc.

MEDICAL TREATMENT.

Aconite—After exposure, where there is fever, thirst and inability to sleep, *skin hot and dry, mental excitement and fear of death*, Acon. will often quiet the storm and prevent a general catastrophe.

Arsenicum—Weakness after slightest exertion, yet restless and changing about, cannot remain in bed. *Nausea or vomiting* especially after taking water, which is craved but taken only in small quantity, burning pain in stomach and bowels, with *great restlessness and anxiety*. *Ars.* has proven a most valuable remedy in cases where the stomach and kidneys were involved.

Nux vom—Both clinical observation and the proving

of *Nux* place it first among all other remedies to combat the *effects of liquor*. By referring to the *Materia Medica* it will be discovered that the *mental symptoms and nervous system* furnish indications not a few, that are common to all cases of acute and chronic alcoholism. Other remedies may be indicated. See Bell., Ign., Ipec.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

THE CIGARETTE, ITS RECORD AND PREVENTION.

The principles of prevention which have been made somewhat conspicuous throughout this book have almost compelled their application here, for I know of no greater need anywhere, if in earnest we seek to conserve the health and welfare of the boys and young men. This is said, not in the way of an apology for introducing the subject here, but as an explanation of a physician's standpoint in all preventable measures and in all diseases.

Early in my medical practice, more than forty years ago and up to the present time, I have in dealing with all physical and mental derangements laid particular stress upon the importance of preventive measures as well as upon medical treatment; in other words, preventing wreckages as well as caring for the wrecks. In applying the principles of prevention it is right and consistent only when it includes all luxuries, habits, and indulgences which are by common consent fraught in some degree with danger to the health and welfare of the individual. As a result of applying this principle early in my medical

practice, I soon found that I had here and there a case of so-called "tobacco heart;" or "tobacco throat" which usually yielded promptly to bread pills and a discontinuance of the tobacco. This was prior to the use of cigarettes, and to the time when it was practically impossible to see school boys and children on the streets smoking either pipe or cigarette, so that I have been able to observe without interruption or prejudice the rapid evolution of a habit or indulgence which to very many thoughtful and capable judges is alarming in its prevalence and rapid increase, and one that will well nigh parallel the opium habit of China or the worst forms of drug addiction in this or any other country.

At the present time a word of warning is coming from many sources, and notably from the educators or those representing our high schools and colleges, those who have a rare opportunity of observing from school statistics, and from students under their care and instruction, as to the fearful consequences of the cigarette habit.

Of the absolute truth of their reports and conclusions I have no reason to doubt for they correspond closely with my own observations. The following quotation is I think a fair statement of facts and statistics, and lamentable as they appear, they are quite susceptible of proof, and even the last word has not yet been said:

"According to Professor M. V. O'Shea, of the University of Wisconsin, over 90 per cent. of the boys who fail in the grammar and high schools are addicted to smoking cigarettes, and he denounces the cigarette as the most serious evil the educational system has to contend

with. One may well credit this opinion, for there must be some explanation of the many failures, and the fact that the increase in the manufacture of cigarettes is by billions, annually.

“Commenting on this an educational authority observes that unruly boys are always addicted to the cigarette habit. Smoking robs pupils of their docility. Records kept of the work of students who were not addicted to the smoking habit when they entered the high school but who acquired it later, show that not only did these pupils become harder to manage, but the quality of their school work also declined greatly. What a hold the smoking evil has gained on public school boys is indicated by the statements made by a number of high school principals who declare that from 50 to 80 per cent. of high school pupils are now using cigarettes. It is an interesting fact that the strongest sentiment against smoking has arisen in communities in which the raising of tobacco is the principal industry. Tobacco men do not want young boys in their own communities to smoke, and in a number of places in Wisconsin various organizations have taken a stand against smoking by school children.

“No one is likely to dispute the proposition that the boy does not take to smoking because he likes tobacco. It is usually because he thinks the ‘accomplishment’ marks him as a man. His companions who have formed the habit make sport of him because he does not smoke. They dare him to, and no boy likes to turn down a ‘dare.’ The smoking habit among boys presents a problem for the future, but it never will be solved unless the parent comes to the aid of those who are trying to correct it.”

The foregoing it will be observed emphasizes chiefly one phase of the habit and its results, namely, the mental status of the student and user of cigarettes. It is the statement, and the estimate of an educator, and of school principals, having the custody of thousands of students, together with the comments of the editor of our own Rochester Herald. Any statement would be very incomplete that did not emphasize the corresponding harm that is done to the physical system as well, in fact *the injury to the physical system preceeds and gives rise to the mental and moral injury set forth so plainly in the quotation.*

There is another sequence that has received much attention by those who have to do with juvenile delinquents, as in Juvenile Courts, etc. I think with rare exceptions the testimony of such would be that the confirmed users of cigarettes furnishes a great majority of those with whom they have to deal for violation of law and criminal offenses. Stated in the true order of development, it would read as follows: First, the injury is done to the physical system: second, the mental and moral deterioration follows: third, the tendency to vicious conduct, even criminal acts and finally the many cases that "no man can number," an untimely, often an unnatural ending of life itself.

I am aware that the portrayal of such a trial of mental and physical wreckage may seem to some an exaggeration, I am also aware that very many, even parents, have never given the subject any due consideration; in either case, the remedial or restraining influence upon the child is practically void.

The above facts and statistics constitute only a small fraction of what is now available for those who seek information. The risks have been plainly pointed out by those outside the family circle, those having only the general welfare, of all in mind. Ignorance on the part of parents seems inexcusable in these days, for it is to parental influence that we must look for the remedy; when this influence is properly and wisely exercised we will have as a result stronger boys and men, better scholarship in schools and colleges, better homes, better citizens and a lower mortality, especially from diseases of the brain and nervous system.

BURNS AND SCALDS.

Any injury to the skin or flesh caused by the action of heated bodies is called a burn. Any injury caused by steam or hot fluid is called a scald. Both may vary greatly in degree and in danger. When the burn is superficial, extending over only a slight area, there is little danger of any ill results and the suffering is of short duration. If the burn involves a large surface of the body, the danger is great. When it exceeds two thirds of the cutaneous surfaces, even though superficial, the case is apt to be fatal.

The inhalation of steam or hot vapor is likewise fatal in most instances. Such cases, if they survive the shock which is often very severe, may linger for several days. Meanwhile there is often suppression of the function of different organs, especially the kidneys and lungs. The suffering of some cases that I have known, exceeds all

description. Stupor, delirium and utter exhaustion ends the agony.

As a rule, it is well to leave the small blisters intact. The entrance of air often *increases the pain and leads to possible infection*. If a puncture of the blister is made, it should be done with a small needle.

A great variety of external applications have been used and discarded. There is but *one urgent indication to be met*, and that is important. *Protect the burnt surface from exposure to the air*.

This can be done most beneficially by dipping linen cloths in sweet oil (or olive oil) and applying several layers over the burned surface.

Eucalyptus oil is gaining many advocates and without doubt possesses curative merits not yet realized. It can be used in the same way as any other oil.

The suppuration and sloughing that often follows from deep burns must be treated as any open sore, by the use of antiseptic dressing. Remedies to meet the symptoms that rise from shock, fever and pain, may be found in the following: *Acon., Ars., Apis, Bell., Canth., China, Rhus.*

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

HICCOUGH.

This is a symptom or condition that may occur from the most trivial to the most serious causes. The act of hiccough is due to a spasmodic action of the diaphragm which is nearly always traceable to reflex action from ir-

ritation or disease of adjacent organs. If it occurs and seems persistent during the progress of some exhausting disease, it must be regarded as serious. Such attacks as come from nervousness, indigestion, or temporary excitement, are of no serious import, easily "frightened away," or at least self-limited. Looking backward, I recall some cases of the more serious form, that continued for weeks and months resisting all remedies and applications. When pain and soreness follow, some relief may be obtained by placing a firm bandage about the waist.

The remedies will depend upon the general symptoms present.

Bell., Hyos., Ign., Nux and Puls. may be useful.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

HEMORRHAGES.

Hemorrhage from any part of the body should be interpreted with the greatest care, for it may mean much or little as the case may be. The history, cause and location of a hemorrhage will often determine the management and treatment where any is required.

The symptoms and history of a case preceeding, and during a hemorrhage will also greatly aid in the diagnosis. If associated with nausea or vomiting and the blood is *dark in color*, it is likely from the stomach. If preceeding or during the time of history of a cough, the blood being mixed with mucus and *air bubbles*, it is probably from the lungs. In the absence of any of the fore-

going symptoms, and the hemorrhage is slight, and from the mouth, it is presumably from the gums, throat or mouth cavity.

Hemorrhage from the bowels may be connected with piles, dysentery, typhoid fever, etc. Bloody urine may follow after scarlet fever, calculus, or injury to the bladder, prostate gland, or urethra.

Uterine hemorrhage other than the normal period, may be from polypus, ulceration, threatened miscarriage, placental, or cancer. The latter may be suspected if the hemorrhage occurs some time after the climateric period.

Hemorrhage of the brain has been considered elsewhere. (See apoplexy.) Internal hemorrhages occurring after an injury or an operation are not easily interpreted, much depending upon the symptoms for a diagnosis. Generally the *pulse weakens, the surface becomes pale and bloodless, sight grows dim, with ringing in the ears.* A painless, *drowsy condition* follows, and later unless relieved, unconsciousness and death.

Thus, in a general way the location or source of hemorrhage may be interpreted. In this connection it should be stated that hemorrhages may occur in any part of the body without serious local disease.

It may be due to degeneration of the arterial walls or to violent and irregular action of the heart, or both. An occasional hemorrhage occurs from varicose veins in the lower extremities or in the capillaries of the eye. The cause and character of the hemorrhage is the first requisite to a proper management of any case.

There need be no undue alarm over a *slight one*, unless it is found associated with some organic disease. It is always safe to require *rest and quiet* for some days and in severe cases for weeks. The value of medicine in some cases cannot be over estimated, while in others it is relatively slight. It is always safe to give a remedy whenever indicated, for the result in many cases is often beyond expectation or explanation, at least such has been my experience.

GENERAL TREATMENT.

When the hemorrhage is slight, it may be allowed time to stop itself, the patient being kept quiet. It is rarely the case that any hemorrhage proves immediately fatal, except from injury or following pregnancy and confinement. Looking backward, I cannot recall a single case. The patient should be kept very quiet and as much of the mental excitement quieted as is possible. The administered remedy will help in this, and other ways as well. The presence of more than the physician and attendants is very undesirable and they should be politely excused. The use of stimulants, not indicated, except in an extreme case; remedies should be selected with the *same care* and *after the same indications* as in other cases.

MEDICAL TREATMENT.

Aconite—If the pulse is full and strong with excitement of mind and fear of not recovering. Hemorrhage from the throat or lung in acute disease or from organic heart disease.

Arsenicum—Weak, exhausted, anaemic condition with pain, burning and cutting about the stomach and bowels. Thirst for small quantity of water with nausea and vomiting. In ulcer or cancer of stomach.

Arnica—Hemorrhage after injury, fall, blows or concussion. Feet and hands cold, head hot. Also in typhoid.

Belladonna—Nosebleed, with throbbing and fullness about the head and face which is flushed. Patient sensitive to anything like noise or light. Inclined to stupor with sudden starting.

Bryonia—Useful when the bleeding of the nose is rather passive, or if it occurs in *threatened typhoid*. Also for vicarious hemorrhage with suppression of menses.

China—The loss of blood has reduced the patient greatly, *sight dim*, with roaring in the ears, face pale and bloodless.

Uterine hemorrhages or any kind when the symptoms indicate. May be warm perspiration, with sinking, fainting attacks.

Hamamelis—Has been used in the form of tincture, especially in venous hemorrhage.

Ipecac—Symptoms somewhat similar to China, with nausea perhaps vomiting and cutting pain about the stomach. *Ipec.* in uterine hemorrhages *after labor or miscarriage*, especially if the blood is bright red with persistent nausea.

Phosphorus—Every cut or wound bleeds persistently. Nosebleed or other hemorrhages which recur

often and no visible cause for the same, *with much difficulty to control*, even slight ones.

Pulsatilla—Hemorrhages at change of life, patient constantly chilly and weeping. Hemorrhages vicarious in young women with *suppressed menses from getting the feet wet*.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

EPISTAXIS.

(Nose Bleed.)

Seldom does nose bleed result fatally, still it often reaches a point where it naturally excites alarm; and then, too, a little from the nose is so often distributed about or diluted with water that it makes an alarming exhibition.

A slight or occasional nose-bleed in the case of a person in good health should be allowed to take its course, especially if it occurs in a fullblooded person. When the bleeding occurs in the progress of a disease, as in typhoid fever, or when it is the result of deferred or suppressed menstruation in young women especially, it should receive prompt attention. In cases where the bleeding is profuse and persistent, the blood being bright red (arterial blood), a physician should be in constant attendance. The patient should sit up, leaning the head forward, grasping the nose with the thumb and finger and compressing firmly both nostrils for *some minutes at least*, at the same time breathing through the mouth. Avoid excitement and stimulus.

MEDICAL TREATMENT.

Aconite—Where there is much excitement of mind and pulse, cannot keep quiet, fear of death.

Belladonna—With congestion, flushed face, throbbing in head and neck, blood bright red.

Bryonia—Useful when nosebleed occurs in case of young girls with *delayed or suppressed menses*. May also be bleeding from throat and lungs.

China—When patient has become exhausted with loss of blood, ringing in ears, faint, etc.

Ipecac—Bright red blood with constant nausea.

Pulsatilla—Same as Bry. especially from getting the feet wet in the case of young women, constant chilliness and yet wants fresh air.

ANAEMIA.

Anaemia is a term used to indicate poverty of the blood or a marked deficiency of the red corpuscles. Such a condition gives rise to pallor of the face and hands and a bloodless appearance of the ears and lips. General debility, heart murmurs, with weak and irregular pulse are generally present. The more frequent causes of anaemia are *loss of blood, insufficiency of food, prolonged illness, malaria and septicaemia*.

From the nature of the causes it is obvious that some cases develop rapidly and may be called acute, while others may be slow of development and termed chronic. Most cases are symptomatic, and no rational diagnosis,

treatment or advice can be given until the true source of the amaemia is ascertained. This, as a rule is not a difficult problem. Inasmuch as its treatment is considered in part under special heads, such as hemorrhoids, menorrhagia, septicamia and chronic appendicitis, any further elaboration here would be a repetition.

Chlorosis, separated by some authors from anaemia, is quite generally regarded as a variety of anaemia which occurs in girls or young women at the age of puberty, often characterized by a *perverted appetite; craving chalk, charcoal, slate pencils, etc.* In young, anaemic children, this same morbid appetite seems to prevail and often leads to the selection of constitutional remedies which cure the patient. The diet in anaemia should consist of plain, nutritious food in such quantities as the patient can digest. While the open air is helpful, there should be no excessive, forced, or fatiguing exercise. In severe cases the patient does better when kept quiet until the strength and heart action are somewhat improved. The remedies indicated for special cases have been considered elsewhere. In a case where the cause cannot be determined and the anaemia is conspicuous, such remedies as *Ars.*, *Apis.*, *Calc.*, *carb.*, *Carbo.*, *Veg.*, *China* and *Puls.*, may be considered.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

DROPSY.

The term Dropsy is not used to designate a disease but rather an accumulation of water in the tissues, or

cavities of the body. In nearly all cases this condition results from some *pre-existing disease* of which it is only symptomatic.

Disease of any of the organs of the body, especially the *heart, liver and kidneys* are apt in the *later stage* to develop a dropsical condition. Anything that interferes with the venous circulation or the free excretion of fluids from the body will result in dropsy.

Dropsical conditions may develop slowly, extending over months and years as in chronic diseases of the liver, or it may develop rapidly as in post-scarlatinal—dropsy or acute Bright's disease. In such cases it should receive *prompt attention and a correct interpretation*.

Remedies should be carefully considered and the one selected which not only covers the dropsical condition, but the whole patient as revealed by *the totality of symptoms* and pathological conditions.

[For special directions as to diet, selection of the remedy, its preparation, dose and repetition, see General Index under "Directions."]

ABDOMINAL HERNIA.

This is an affliction or unsoundness more prevalent than is generally supposed. It is caused by the protrusion of some of the viscera contained in the abdomen, usually the bowel, through the natural or accidental openings in the abdominal walls. It is usually traceable to some *sudden, violent effort*, such as *lifting, falling, coughing, etc.*

Some sense of discomfort soon follows, and examina-

tion of the lower portion of the abdomen reveals a swelling, bunch, or enlargement which is confined to one side and which becomes more prominent on standing or coughing, and partially disappears on lying down. If the intestine has passed through the hernial opening and becomes *constricted, pain and soreness soon follow, together with all the symptoms of intestinal obstruction, and without prompt relief, is fatal.* There should be no delay or trifling with hernia or what *appears* to be one.

In some cases the protruding bowel may be easily pressed back or reduced in the following manner. *Elevate the hips, lower the head,* and make gentle but firm manipulation of the hernial tumor. This, however, is the work of a physician or surgeon, and should not be attempted by the inexperienced, *except in an emergency.*

Congenital hernia, or such as occurs during the first *few days after birth,* is not unfrequent and especially the *umbilical variety.*

Hernia is a mechanical or surgical, rather than medical matter. Here again modern surgery has come to the relief of human suffering by devising a safe operation for the radical cure of hernia. This course is recommended in most cases as preferable to the perplexity and annoyance of wearing a truss, which is not a guaranty of *safety or cure.*

GOITRE.

Any enlargement of the thyroid gland is called Goitre. Often it is so slight as not to be noticeable; in others it

becomes enormous. In some localities whole families and villages are afflicted with it; as in the mountains of Switzerland and some islands of the sea. Excessive mineral matter in the drinking-water, intermarriage in small, stationary communities, and other reasons have been suggested as a cause of goitre. Where the enlargement is slight and of no physical inconvenience, it is well to avoid all treatment.

In case the enlargement is such as to displace or compress the larynx, suitable treatment is necessary. I recall one case of a young, healthy mother, attacked following a slight cold. It seemed to cause *acute enlargement* of the gland, so rapid that before surgical aid could be obtained, she strangled, suffocated and died.

Other cases I recall, of great enlargement with no inconvenience to the breathing or the general health.

TREATMENT.

It must be confessed that in this disease, only a small percentage are cured by medicine.

Iodine, **Spongia** and **Sulphur** are the remedies that have been most helpful. Of late the X-Ray treatment has accomplished some cures both of common and exophthalmic goitre.

The removal of the gland by a surgical operation is now a common occurrence, and I recall some desperate cases where it became necessary, with results that were excellent.

An entire change of residence from a goitre locality, has been found beneficial.

PART III.

HOMEOPATHIC MATERIA MEDICA AND HOW TO USE IT.

INTRODUCTION.

This introduction to the Materia Medica should be studied in connection with the chapter on "Selecting the Remedy." See pages 11 to 17.

Although the arrangement is simple and essentially the same as in other works on Homeopathic Materia Medica, yet, a few explanations for the inexperienced may be helpful.

The grouping of symptoms under different heads or regions of the body both for study and prescribing seems well nigh a practical necessity, for in most prescriptions it is found necessary to compare the symptoms under the region of the body with those of the drug thought to be indicated. This plan of designating certain portions or regions of the body was the one adopted by Hahnemann and the early provers of remedies and nothing better has been discovered to take its place. If the character of the symptoms and conditions of aggravation and amelioration are similar,

then the problem of selecting the remedy is well on the way of solution.

In the first place, the general or clinical observations under the headline of "Action and Uses" are mainly suggestive and not wholly the result of provings, such as will be found under the head of "Guiding Symptoms;" however, they are based upon much experience and careful observation and although not intended to take the place of "Guiding Symptoms," they should serve as a guide and helpful introduction to a better acquaintance and deeper study of the remedy, and should be taken for their real value—no more and no less.

As has been stated in another place, under the head of "Selection of the Remedy," symptoms are not all of equal value, and in the practical work of selecting the remedy, it becomes necessary to make somewhat more conspicuous those symptoms which seem to be most important in deciding the choice of the remedy. To accomplish this, two kinds of type have been used so that the prescriber, if in haste, can see at a glance the more important so-called "key-note" or "Characteristic" symptoms as shown in the black faced type, or italics.

The most serious objection to this differentiation of symptoms is that too much stress will be placed upon the "key-notes" while those in common type are neglected, which might lead to a failure. Many symptoms in common type are well nigh characteristic and with further observation will be so regarded; all

symptoms recorded in Part III are authentic and must not be overlooked in choosing a remedy. The ideal prescription is the use of the one remedy whose symptoms, characteristic and otherwise, duplicate or cover the totality of the symptoms of the patient.

This, of course, is an ideal not always attainable yet the closer the approximation the better and quicker the cure. The opposite of this practice is the use of a remedy based upon the name of the disease, or a single symptom only, characteristic or otherwise, a practice full of disappointment and to be avoided whenever possible.

Considerable emphasis has been placed upon the time and conditions of "aggravation and amelioration" often a help and decisive in deciding the remedy.

Definite symptoms, such as may appear under proper heads, must always be considered in making quite sure the selection of the right remedy.

This general outline of each remedy is intended chiefly to fix in memory a "mental picture," so that when confronted by a patient suffering from some disease, a remedy, or group of remedies will be suggested for further consideration. This can easily be done by referring to the *Materia Medica*, Part III, by the aid of which, with a little practice, the true remedy will be found. The results will well reward the careful study. Such is the method of the most successful prescribers, and it is quite axiomatic in all homeopathic practice, applying to all remedies and all all diseases.

Quoting from a very high authority, Dr. James B. Bell of Boston, who, in his introduction to that most excellent book on "The Therapeutics of Diarrhoea," says: "All who subscribe to the law of similars agree that the problem in each case is to find a remedy whose symptoms are most closely similar to the case in hand." "The demand for exactness, minuteness and delicacy of observation in all branches of science was never greater. The same is true of Homeopathic Therapeutics."

To so present the foregoing, easily comprehensible principles concerning the use of the Material Medica and the selection of the remedy as to make it quite impossible for the trained or untrained prescriber to fall into any misconception as to their right application in dealing with the sick, has been my one ambition. If in this I have accomplished my object, then all else I am sure will be correspondingly successful.

ACONITE NAPELLUS.

(Wolfsbane, Monkshood.)

GENERAL OUTLINE OF ACTION AND USES.

This is a remedy often found indicated in the first stage of acute diseases.

The general condition of a patient requiring Aconite, may be compared to the condition of the outside world during a cyclone. Everything is agitation and in motion. The mind is filled with constant fear and

anxiety; the pulse rushing on rapidly, full and strong; the head, body and extremities are tossing to and fro, with no rest or quiet, while sleep is banished by the general tumult. Such a condition often indicates some impending disease although not yet determinable. It is at this time that Aconite will often change for the better all the serious conditions that are liable to follow.

GUIDING SYMPTOMS.

Mind.—The mental symptoms of Acon. are marked. Mind active, full of anxiety and fear. **Fear of death, often predicts the day.** Fretful, variable mood. Easily vexed, easily frightened. **Bad effects from fright.** Wakefulness with fever and tossing about from place to place.

Head.—Vertigo with nausea. Surface of head hot, with sense of great **internal heat.** Neuralgia about temples, with sensitiveness of surface. Headache with **high fever, thirst and restlessness.**

Eyes.—Eyes inflamed, especially from any irritation of foreign body and after its removal. Eyelids and balls look red; feeling of dryness and irritation from cold, or **cold north winds.**

Ears.—Acute earache, with fever and thirst. Threatened gathering, after measles, or after colds when general conditions, such as high fever, dry skin, great restlessness and anxiety, call for Aconite.

Nose.—Coryza, with fever after exposure to cold wind with chill or chilliness and fever alternating.

Nosebleed, with mental excitement and fear. Acute rhinitis.

Face—Expression of fear, agony, anxiety, or fright. Flushed with fever, but pale on rising. Neuralgia, with prickling pain after riding in cold wind. Face is **hot and dry**, no perspiration. One cheek may be red and the other pale. (Cham.) Acon. Face although flushed with fever, is not so scarlet red as Bell. Noticeable especially in scarlet fever and whooping cough, where Bell. often has the preference.

Mouth and Tongue—Mouth very dry, with great thirst. (Bell.) Tongue dry. Feels swollen, with prickling, difficult articulation. Bitter taste. Toothache with severe colds and after exposure to cold north winds. Great thirst is one of the characteristics of Acon.

Throat—In early stage of inflammation, when throat and mouth are dry, with thirst and fever; but rarely after acute stage is past. The sore throat in first stage of measles, with high fever, dry skin and restlessness.

Stomach and Abdomen—Thirst for cold water is marked. Sensitiveness of stomach to pressure. Vomiting, especially of children when general state corresponds. Peritonitis and general inflammation with agony, pain, restlessness, thirst; dry, hot skin. Pain in hepatic region with great restlessness. Acute inflammation of the liver. First stage of dysentery, after chill and fever and great thirst, with pain, ten-

derness and frequent, bloody stool. Restless, with **anxiety, fear and pain**. Diseases of the bowels from hot days and cold nights (Dulc.)

Urinary and Sexual Organs—Acute inflammatory conditions, with fever, may be retention of urine, **from cold**. Urine dark and hot, as in fever. **Acute orchitis**, from cold or injury. Menstruation suppressed **from fright**, with chill, excitement and fever. Acute attack of inflammation in ovaries, with pain, restlessness and fever.

Respiratory Organs—Aconite is frequently the remedy in the acute stage of inflammatory disease of larynx, as in croup; or bronchial tubes and lungs, as in pneumonia or pleuro-pneumonia. In croup, loud breathing especially on **expiration**. Child grasps throat, with cough, great **thirst and restlessness**, Aconite will abate the symptoms, and may arrest the impending disease. The cough is usually **dry and frequent**, with **anxious, quick breathing**, expectoration of bright red blood, great agitation and fear, tossing about from side to side. If Aconite is the true remedy, its use will soon be followed by perspiration and general relief.

Heart—Stitches and pain about heart with anxiety, palpitation and dyspnea. (Cactus.) Pulse may be **full and rapid**, or weak and **rapid**. Better lying on back, with head raised. (Ars.) Affections of the heart, with pain in **left shoulder**. (Rhus). In all **acute inflammatory conditions** and anticipating **eruptive fevers** the Aconite pulse is characteristically full and rapid.

Extremities—In acute inflammatory rheumatism, or sciatica, where the general symptoms correspond, Aconite is important. The pains are acute, and parts sensitive to touch. The surface is hot and dry, the patient **exceedingly restless**, and the mind full of fear and anguish. Aconite produces **prickling, tingling** pains in extremities.

Sleep—A. typical Aconite case is the opposite of sleep and quietness. Sleep is fitful, transient, filled with dreams, **tossing about** and **starting up** with fright. (Bell.) Dreams vivid of events of the day, with extreme restlessness. (Rhus.)

Fever—A chill generally precedes the fever of Aconite, especially after exposure to cold, or after checking perspiration. Frequently the chill and fever alternate. The thirst, full, rapid pulse, mental agitation and restlessness, with hot, dry skin, have all been elaborated under respective heads.

Conditions.—Bad effects from exposure to cold draughts; from dry cold weather, and suppressed perspiration; from fright, anger and fear.

Worse, evening and night; when rising from bed; lying on affected side; in hot room.

Aconite when indicated in the very beginning of an acute disease will often cut it short, or so change conditions for the better that other remedies may easily be chosen to complete the cure. In most acute cases good results will follow its use within one or two hours, and in some cases very much sooner.

Compare—Bell Bry (disease of brain and fever)
Bry Phos. (disease of chest) Spong. (in croup) Cham.
Coff. Ars. Rhus.

Clinical.—Aconite, in the hand of the inexperienced, has too often been given in every case of "fever"; whereas it should be used when, in addition to fever, some of the well-defined symptoms of Acon. are present. In Typhoid and Malarial fevers, or all fevers of lower type, as septic fevers, the well defined symptoms point not to Acon. but to remedies in the class of Ars., Bap. and Rhus Tox.

The mental symptoms are important. If the mental state is "quiet," and free from fear and agitation, it is doubtful whether Acon. is indicated.

No remedy is so useful in acute diseases of the respiratory organs as Acon. In the early stage of croup, laryngitis, bronchitis, pneumonia and pleurisy it is easy to discover how clearly it is indicated by reference to "Guiding Symptoms." In acute diseases of the brain, dysentery and inflammatory rheumatism it is often the first remedy to be thought of. In the diseases of children especially measles and scarlet fever, it is quite indispensable. It matters not as to the name or stage of the disease, if only the symptoms of the patient clearly call for Acon. it should be given. A few doses will, within a few hours lower the temperature, decrease the pulse, produce a free perspiration and quiet the mental excitement and restless body all so characteristic of Acon. The violence of the disease will be changed for the better and other remedies may be chosen to complete the cure, as the case may be.

ANTIMONIUM CRUDUM.

Not often used, but when it is indicated by some very marked characteristics no other remedy can cure so quickly. Conditions and symptoms of this remedy

are most apt to be found in the diseases of children, for whom it often proves indispensable. The mental symptoms are unique, and should have pre-eminence in prescribing *Anti. c.* The peevish, sulky disposition is carried to extreme so that the patient can not bear to be touched or even looked at. Vexed without any cause; will not even reply or speak to attendants.

The white-coated tongue is very sure guide if the mental symptoms correspond, and such conditions as may develop with gastric and internal derangement from eating candies and sweets, with nausea and vomiting of ingesta. The absence of thirst and the white tongue will distinguish *Anti. c.* from *Ars.* Catarrhal inflammation of stomach and bowels, with distention.

Cough, and dyspnea with loss of voice, in whooping cough and asthma. Following coryza, with rawness and crusts about the nose and lips. Colds after bathing. The keynote is generally found in the disposition.

Conditions—**Worse**, after eating; cold bath; heat of sun; from being touched or spoken to.

Better, from rest, open air, and warmth.

Compare—*Cham.*, *Cina.*, *Nux.*, *Puls.*, *Ipec.*, *Sul.*

APIS MELLIFICA.

(Poison of the Honey-Bee.)

A useful remedy in erysipelas, acute bladder and kidney affections, scarlet fever, with dropsical appearance, as in acute Bright's Disease.

GUIDING SYMPTOMS.

Mind.—Excitement, with much fear of being unable to get breath. Confusion, cannot fix thoughts. **Maybe stupor and constant rolling of head**, with shrieks and pain. Mind pre-occupied; **lets things fall from hands**. Vertigo; sharp pains in head in meningitis.

Eyes.—Stinging, burning and itching about the eyes; lacrymation and dread of light. Lids swollen, the upper appears like a **sack of water as in erysipelas**. Inflammation with exudation.

Face.—Swollen, red, edematous; or may be pale and waxy, or livid. Stinging, pricking pains, here and there.

Mouth and Throat—Sore throat when parts appear edematous, blister-like. Tongue dry and tremulous, with difficult breathing or swallowing. Often high fever, but **no thirst**, with dry, tremulous tongue. (Rhus., Lach.) **Suffocated feeling**, with much swelling about face, throat and neck.

Urinary Organ—Urine very scanty, or suppressed, with frequent urging, and burning during urination. (See Canth.) In post scarlatinal, dropsy and Bright's

Disease, with swelling of face and limbs, Apis is often the remedy.

Respiratory Organs.—In dropsy of chest, throat or larynx with suffocation, cannot endure anything about throat or chest. (See Lach.) Oppression about chest and heart, in dropsy cannot lie down. (Ars.)

Skin—Prickling, stinging pains, with swelling, red and white blotches. Urticaria. (Dulc) Erysipelas, parts sensitive to touch. **Fever without thirst.** (Gels.) Fever with dull stupor, or screaming with delirium.

Conditions—**Worse**, during or after sleep; (Lach.) from closed hot room; from getting wet (Rhus.)

Better, open air, uncovering neck and chest (Lach.) walking or changing position (Ars. Rhus.)

Compare—Ars., Lach., Puls.

ARNICA MONTANA.

(Leopard's Bane.)

The value of Arnica tincture for external purposes is well known. Whenever indicated or used externally, it is well to give a few doses internally, either of the potentized, or a few drops of the tincture in a glass of water; giving it in teaspoonful doses. Injuries for which Arnica seems most useful are, bruises and contusions, as from blows, falls, etc. It removes the soreness and pain, preventing suppura-

tion. According to my experience, and unless some other remedy is well indicated, a few doses of Arnica 6th following immediately after childbirth has been found of great value, promoting a more prompt and normal convalescence; doubtless due to its being indicated in cases of shock, strain and injury. Arnica used internally, is indicated in some forms of Rheumatism where the sore, lame feeling is intense; cannot bear to have any one come near; patient dull and inclined to stupor, complains of bed being hard, wants to be let alone. Fever of low typhoid type.

Arnica potentized and taken internally mitigates the pain of strains and bruises and helps to remove the ill effects from physical over-doing. After injuries about the chest with acute pain Arnica is often more useful than Acon. or Bry. A characteristic of value is the desire to lie (or relief from lying) with the head low which is the opposite of Ars.

Conditions.—**Worse**, from shock or concussion with or without serious injury; from being touched or approached in cases of rheumatism or injury.

Better, from lying with the head low; Arnica has been found useful after child birth, especially if attended with any injury, also after surgical operations, attended with shock and exhaustion. In injuries of spine or nerves Hypericum is preferred.

Compare.—Acon., Bry., Hyper., Rhus.

ARSENICUM ALBUM.**GENERAL OUTLINE OF ACTION AND USES.**

Those who have seen a case of Arsenic poisoning have a mental picture corresponding to the last stage of some of the most serious maladies; and it is here that Arsenicum often comes in to halt the disease and save life. When definite indications in such cases do not call for Arsenicum, there are three other remedies (Carb. Veg., Tart. Em., and Verat. A.) that generally come forward to divide the honors. The definite sphere of each will be defined in Part III, *Materia Medica*. Often indicated in diseases where there is very marked prostration; in low fevers, gastric and intestinal complications, and where there is vomiting and diarrhea, or where the fever or pain is periodic. The mental symptoms are clear cut and very definite, so that its selection can be made with much certainty and the results with Ars. are usually very prompt. The peculiar thirst is a valuable "key-note," also the characteristic "burning pains."

GUIDING SYMPTOMS.

Mind.—Extreme anxiety, fear and restlessness; worse at night, especially one A. M. Goes from place to place, cannot rest anywhere. Fretful and vexed, finding fault. Fear of death and great dread of being left alone.

Head and Eyes.—Neuralgia about head, face or elsewhere, which is worse at night and relieved by heat. Exhaustion with the pain. Burning and smarting

in eyes, with swelling and edema of lids (Rhus., Apis.) Hot, excoriating tears; coryza. (Euph.)

Nose.—Coryza, with watery, burning discharge; burning in the nose, with frequent sneezing worse in open air. (See Euph.)

Face.—Swollen, puffiness, and pale, **waxy, deathly, cachectic look** as in cancer or anemia; **sunken, with expression of agony**. Cold sweat and livid appearance as in last stage of acute, exhausting disease. (Verat.) Neuralgia of face, with the burning pain all **relieved by heat**.

Tongue and Mouth.—Tongue and mouth dry and burning. Tongue dry and brown, red at tip (See Rhus., Lach.) Ulcers in mouth raw and burning. Swelling and dryness with **thirst for water, but takes only a swallow, often**. Blisters and eruptions on lips and face after cold or fever. (See Caus., Rhus.)

Stomach.—Loathing of food and **craving for cold Water**. The smallest quantity causes **vomiting, yet constant urging for one swallow, which satisfies**. **Burning** distress in throat, stomach and bowels. Slightest food or drink causes distress and vomiting; great anguish and fear of death. Gastralgia, gastritis, ulceration and cancer, with the persistent thirst and burning pain somewhat relieved by very hot applications. Arsenicum **palliates**; and **prolongs life**, even in incurable cases.

Stool.—Watery, dark and offensive, with **extreme prostration** and burning pain. Worse after eating or

drinking, and after midnight. Cold sweat and exhaustion with watery stool (Verat.) The thirst and restlessness are very characteristic.

Urine.—May be involuntary, or retained requiring a catheter. Bladder seems paralyzed. **Urine burning hot and scanty.** Inflammation of the kidneys and bladder with burning pains better from external heat. Patient weak and worn out with pain, and with dread of being left alone, worse after midnight. Cannot rest anywhere. Walks about, cannot remain in bed.

Respiratory Organs and Heart.—Difficult breathing from any source, when there is exhaustion and prostration. In asthma with sense of suffocation, **cannot lie down without having head well elevated.** Breathing and cough worse **after midnight**, with burning and anguish about throat and chest. Cough is generally dry, spasmodic and suffocating. Respiration rapid, with much palpitation on walking fast also becomes exhausted. Irritable heart from tobacco. Angina Pectoris with exhaustion. Weak heart with pulse generally rapid, weak and irregular.

Extremities. — Exhaustion in the **extremities** marked. Unsteadiness in walking. Great restlessness of lower extremities. Uneasiness in feet, at night. Has to move them constantly, or walk about from place to place. (Rhus.)

Skin.—White pale, **pasty-looking, even edematous.** Eruptions on surface; ulcers with much burning. Eczema, dry and rough or with blisters and redness

with much burning and itching, a useful remedy in disease of the skin. Burning, smarting eruptions about the mouth, like cold sores. (Rhus.)

Sleep.—Restless sleep; worse after midnight. Starting in sleep. (Bell.) **Must have head raised** by two or three pillows, to get any rest or sleep.

Fevers.—In malarial fevers with a marked periodicity, nausea and vomiting and thirst for single swallow of water. In typhoid or low fevers, the extreme exhaustion, restlessness and mental anxiety, Ars. will reach. The more desperate the symptoms and conditions, the greater the probability that Ars. will control.

Conditions.—Worse, after midnight, 1 A. M.; from cold drink or ice cream; from alcoholism; from tainted food; decayed animal matter; ptomaine poisoning; from rapid walking; from damp places.

Better, from hot application, (Neuralgia) warmth in general; from lying with the head well elevated, (Asthma, heart disease) from changing about room, cannot remain long in bed or chair, and afraid to be left alone.

Compare.—Apis., Ipec., China., Carbo. Veg., Rhus., Canth.

Clinical.—By giving prominence to, or prescribing for, a single symptom the prescriber might easily fall into an error and confuse Ars. with Acon. or Rhus. For instance each has marked restlessness, but a little searching for all the symptoms of the patient and a comparison of the remedies, will reveal a difference, even opposite conditions in the remedies. This careful differentiation, well done,

is the basic principle in successful prescribing. It requires a bit of study and discrimination.

Ars. is adapted to those diseases characterized by profound prostration, even exhaustion and collapse; such as often attend diseases of the stomach and bowels; vomiting, diarrhea, cholera morbus, etc. In asthma and heart disease, it should be considered by referring to "Guiding Symptoms." In typhoid and malarial fevers it is frequently called for. Neuralgia, gastritis and skin diseases with the marked character of aggravation and amelioration which runs through the remedy), Ars. may be given with absolute certainty of relief.

BAPTISIA.

(Wild Indigo.)

GENERAL OUTLINE OF ACTION AND USES.

The symptoms of Baptisia correspond to fevers of low type. Typhoid, and septic conditions with loss of strength even to prostration. Tired, lame, aching in all muscles as in La Grippe (Gels., Eupa). Tenderness over right abdomen. Baptisia has been found helpful in cases of incipient tuberculosis, with the weakness, fever and tired feeling, so characteristic of that disease. In the above or similar conditions the choice of the remedy is often between Ars., Bry., Bapt. or Rhus.

GUIDING SYMPTOMS.

Mind and Head.—Confused and disconnected in conversation; unable to think; (Lyco.) tries to get himself together; thinks he is scattered about the

room or bed, as in threatened typhoid. Vertigo, with weak feeling in limbs. Soreness of brain, with pain and pressure about the nose and eyes.

Eyes and Face.—Eyeballs feel lame and sore as in colds. (Gels., Rhus.) Face flushed and dark as in low fever.

Mouth, Tongue and Throat.—Tongue yellowish or brown coating, with redness of the edge. Gums sore, throat and mouth dry, with soreness and swelling of tonsils, bad breath; diphtheria; typhoid.

Stomach and Bowels.—No appetite; food disagrees. Abdomen sore and distended. Stool dark, watery and very offensive. Diarrhea in low fevers and sepsis with the mental symptoms of typhoid.

Neck, Back and Extremities.—Muscles lame, sore and weak, as in colds and influenza. (Rhus., Eupat., Dulc.)

Sleep.—Much delirium. Sleepless and restless; worse 2 or 3 A. M., with frightful dreams.

Compare.—Rhus., Gels., Eupat.

BARYTA CARB.

(Carbonate of Baryta.)

GENERAL OUTLINE OF ACTION AND USES.

In diseases of children, Baryta carb. fills an important place, similar to Calc. carb., Sili., Merc., and

Sul. Faulty nutrition and tardy physical development. (Calc., pho.) Defective or slow development of mind; mental weakness approaching idiocy. Diseases of glanular system with tendency to enlargement, especially the glands of neck. Sub-acute and chronic enlargement of tonsils in children of a scrofulous habit. Distention of abdomen (Calc.) with enlargement of glands. Child has cold, clammy feet. (Calc. carb.) Offensive foot sweats. Sili.) The mental and physical condition of the child corresponds to that of the progeny of the degenerate, often seen in the "slums." The stunted growth, with enlargement of the abdomen, of the mesenteric glands and the glands of the throat and neck, are frequent concomitants. No remedy can do as much for such cases as Baryta carb. Calc. carb. and Sul. are close competitors. A careful differentiation of the symptoms must decide the remedy. No remedy so well indicated by provings; and none more often given with good results in cases of chronic enlargement of the tonsils than Baryta carb. It may require from one to three months, possibly longer to get full results. A change of potency from the lower to the higher is often necessary.

BELLADONNA.

(Deadly Nightshade.)

GENERAL OUTLINE OF ACTION AND USES.

The action of Belladonna on the nervous system, especially the brain and special senses, is very profound; producing active congestion, delirium and perversion of sight and hearing. On the throat and skin its action is marked by redness, heat and dryness, corresponding to some cases of scarlet fever, and other eruptive fevers. A useful remedy in acute brain affections or in fevers with brain complications; some similarity to Acon., but a study of the two remedies will reveal differences which must not be overlooked in correct prescribing. Many of the symptoms of Belladonna are definite, clean cut and unmistakable.

GUIDING SYMPTOMS.

Mind and Head.—Delirium, excitement and rage. Strikes and bites attendants. (Canth.) Sees frightful, hideous objects and tries to escape. Loses consciousness or falls to sleep which is interrupted by sudden start and screams. **Constant moaning, with drowsiness.** All senses more acute. (Coffea.) Blood rushes to head with pain and throbbing; **flushed face and throbbing in neck.** Sometimes pains are cutting and stabbing and much worse by walking, **jar, noise or light.** Seeks dark room. Headache from hot sun. (Glon.) Pains often come and go **suddenly.**

Eyes.—Vision obscured, with pupils dilated. **Intolerance of all light.** Sparks and flashes before the

eyes. Eyes feel dry with burning in lids. Inflammation with redness of conjunctive. Eyes staring, glassy, animated.

Ears and Nose.—Tearing, throbbing pain in ear, with sensitiveness to noise. Shooting in right ear and right cheek. Acute catarrhal colds with dryness in nose and throat, headache, dry cough, heat, and redness of nose. Sense of hearing and smell acute. Light and noise unbearable. A sense of dryness in the nose and upper part of throat is very characteristic.

Face.—Very red, hot and swollen as in erysipelas and scarlet fever. Spasms and twitching in face. Cutting, tearing pain in right side, with toothache worse in evening. Swelling and redness of upper lip, with dryness of mouth and throat. The sense of extreme heat of face and head, or of the skin in general, is a marked indication, especially so if the brain and throat symptoms correspond, which is often the case in scarlet fever. A careful differentiation must be made here, between Bell. and Aconite.

Mouth, Tongue and Throat.—Dryness is the characteristic condition both of mouth and throat. So dry cannot articulate and swallowing even water is difficult, yet a constant desire to swallow, although very painful. The throat feels too narrow or constricted. Pain shoots to ear on swallowing. (Gels. Merc.) Tongue red, red and white. Swollen, "strawberry tongue." Speech difficult, interrupted, stammering. Useful in early stages of sore throat with the

redness, swelling and dryness without exudation. Grinding of teeth in sleep, with children. (Cina.)

Stomach and Abdomen.—Some thirst for cold water, but difficult to swallow. Nausea, with shooting, cutting pains in stomach and abdomen. Neuralgia with tenderness. Cannot bear **touch or jar**, even bedclothes. (Lach.) Transverse colon is distended like a pad. (Calc.) In peritonitis, appendicitis and gall-stone colic, when the characteristic indications are present. In dysentery and diarrhea with tenesmus and straining; stool bloody and **green mucus**.

Urinary and Sexual Organs.—Involuntary urination, especially with **children in sleep**. Retention of urine with burning and straining in parts.

Female.—Prolapsus of uterus with constant **bearing down** in pelvis with heat and pain worse from jar, walking or riding. Dysmenorrhea. Inflammation of ovaries with heat and pain, with general indications for Bell.; especially those about the head.

Respiratory Organs.—Hoarseness with cold affecting the larynx, with feeling of dryness and suffocation and dry constant cough, worse at night, 10 or 11 P. M. and always dry. Valuable in whooping-cough and croup, when with every coughing spell the child gasps for air, face **flushed and hot**, tossing about with drowsiness and sudden starting. The febrile pulse of Bell., is generally full and frequent, not unlike Acon. The post febrile pulse of Bell., is less full, more irregular, but with force and quickness.

Neck, Back and Extremities.—Swelling and shooting pains in glands of neck. **Stiff neck** as from cold. (Cimicif. Dulc.) Lumbago, with pain in hips. (Dulc. Rhus.) Pain and paralytic feeling in arms and similarly in lower extremities. Symptoms of neuritis; the sciatic nerve is painful and very sensitive to the slightest touch. **The feet are often cold**, even when in acute febrile condition the head, body and skin are hot.

Skin.—**Redness of skin**, especially face and cheek. The flushed face is characteristic. The rash is usually smooth and evenly red. Erysipelas, of the smooth, red surface, skin hot and dry, with swelling and throbbing pain.

Sleep.—Sleep at night is interrupted by starts and fearful dreams; tossing about, **sleepy but cannot sleep**; grinding of teeth, hot head and cold feet, with twitching of muscles; **moaning** as if in pain or trouble. The peculiar drowsiness may occur by day or night, and often precedes impending illness.

Fever.—The fever of Bell. will not be confused with Acon., if the other symptoms are all considered. In scarlet fever, Bell. often covers well the symptoms of the case and is generally indicated instead of Aconite, while the opposite is true in measles. After exposure to scarlet fever or in time of a serious epidemic. Bell. should be used as a prophylatic; for if it does not always prevent the disease, it will render it less virulent.

Conditions.—**Better**, from standing, or sitting erect.

Worse, from noise, light, touch; jar; from lying down; 3 P. M. and after midnight, right side.

Clinical.—Bell, like Cham. and Cina seems especially useful for children. The mental symptoms are different; the same is true of Acon. and Bell. If with fever the patient is drowsy or sleeping much, with sudden starts, Bell will control the fever better than Acon.

Bell. is one of the first remedies to be thought of in violent throbbing headache, acute diseases of brain, see "Guiding Symptoms." In sore throat which is dry and highly inflamed with slight exudation, such as follows severe colds. In scarlet fever Bell. easily stands first both as a curative and preventive remedy. The character of the eruption and the appearance of the skin is very characteristic and an important guide for Bell. In acute diseases of children the choice is often between Bell. and Acon. The mental symptoms are very different. In Bell. senses are all very acute and yet with a tendency to drowsiness. It is chiefly useful in acute diseases and the trained observer will discover many of the more important symptoms by the appearance and action of the patient; the remedy is prompt in action and should be given less frequently or discontinued when the patient is improved. In semi-chronic and constitutional diseases Calcarea Carb. will often have the preference over Bell. Both are very similar in action and both are indispensable in the treatment of children.

BRYONIA ALB.

(Wild Hops.)

GENERAL OUTLINE OF ACTION AND USES.

The sphere of action of Bryonia is well defined but less extended than other leading remedies. When well indicated it is very prompt in the relief of pain. It is often called for in colds, resembling la grippe; also in

the early stage of typhoid fever. It often follows well after Aconite or Rhus. Bryonia acts chiefly on the serous and synovial membranes.

In pleurisy, inflammatory rheumatism and in peritonitis it is the first remedy to be considered. Inflammation of the serous membranes always gives rise to the sharp, piercing pains for which Bry. is so homeopathic. The aggravation from moving the joints or taking a deep breath when pleurisy is present, gives a clear illustration of the tissues involved, and the similarity of a Bryonia proving.

GUIDING SYMPTOMS.

Mind.—Ill humor about trifles, **talks and dreams about the business of the day.** Weakness of mind, ideas disappear, (typhoid) desires to get up and go home. Vague ideas as to whereabouts. (Bap.)

Head.—Sharp pains in the head, **worse from jar or mis-step.** Headache in moving, or opening and moving the eyes. Bursting headache worse from motion stooping, or rising up; **vertigo on rising.** Pains begin or end in the base of brain, or neck. Meningitis and scarlet fever. Brain symptoms **after sudden suppression of rash.**

Eyes, Nose and Ears.—Eyeballs sore and painful on motion. Sharp pains extending to back of head. Coryza, better in open air. **Nosebleed from delayed or suppressed menses** especially in young girls with headache and irritability.

Face.—Flushed and hot, or pale and sallow. Sharp pains in nerves of face, worse on motion; swelling of upper lip with dryness, lips dry and cracked. Face becomes pale on rising, with vertigo and nausea.

Mouth, Tongue and Throat.—Dry and parched as in fever. Toothache. Teeth feel too long, and sensitive. Better from lying on painful side, and from cold water. Tongue coated white. (Anti. c., Eupat.). Thirst for large quantities of cold water at long intervals. (Eupat.)

Stomach.—In gastric fever with white tongue, (Anti. c., Ipec.) nausea after drinking any warm drink, (Pho., Eupat.). Stomach very sensitive to touch. Pain and heaviness about stomach; stitching pains about liver, worse on motion and pressure; desires to lie down and not be moved. Acute inflammation of liver. (Acon.) Better when lying on the painful side.

Abdomen and Stool.—Peritonitis or appendicitis with the sharp pain in abdomen all worse from motion or deep breathing; characterized by fever, white tongue, nausea on moving or sitting up. Diarrhea in hot weather, from over-heating and cold drinks. Constipation; stool small, dry, hard; in bilious dyspepsia, constipation, with irritable mood, vertigo and headache. (Nux.)

Sexual Organs.—Menses delayed or suppressed, with bleeding from nose, throat or lungs. Inflammation of the ovaries with sharp pain on every motion. Inflammation of breast with milk fever, great soreness and cutting pains. (Colo.)

Respiratory Organs.—Laryngitis and bronchitis with dry cough, worse at night and on coming into a warm room. In pleurisy, or pleuro-pneumonia, Bry. follows well after Acon. if the pains are **cutting and sharp, preventing deep breath, or motion.** In the absence of indications for Acon., Bry. should be given at once for the above symptoms. Dyspnea, dry cough, has to sit up, or lie on the painful side. Bry. patient inclined to perspire, whereas Acon. has hot, dry skin and is restless. Rheumatism of heart with sharp pains. (Arnica.)

Pain in region of the heart with **piercing pains** through the chest with difficult breathing; cannot be moved without causing aggravation. (Acon., Cact., Spig.)

Neck, Back and Extremities.—Sharp pains in neck and base of the brain. (Gels.) General muscular lameness in back and limbs as after cold, (Rhus., Cimicif.) all increased by exercise. Pain, swelling and redness in joints, **cannot move the parts** on account of pain. Pain and swelling in ankles and feet. (Rhus., Ars.)

Skin.—Rash similar to measles, itching and hot. Jaundiced skin with chronic affection of liver. Face may be hot and red in diseases of children. **Pale on rising, with vertigo.** Bad effects from non-appearances or of sudden disappearance of eruption, especially measles.

Fevers.—Typhoid in early stage with bursting headache, vertigo, white or dry tongue and general aching

pains in all parts of body, all worse from moving about. (Bap.) In scarlet fever or measles when the rash is much delayed or suddenly disappears. In the fever of pneumonia with characteristic symptoms. (See Respiratory Organs). Rheumatic fever with or without perspiration.

Modalities.—Worse from motion or exertion, warmth, warm room, from rising up,—nausea and fainting. Better lying on painful side, from rest and quiet, open air, cold things. Compare Kali Carb., Eupato., Rhus., Gels.

Clinical.—Bryonia is a remedy of the first class in acute appendicitis. It has been a favorite remedy with some for constipation and in some respects is similar to Nux. The character of the pains (sharp) and the sure aggravation from motion are very characteristic, and often help to make its selection easy. It should not become a routine remedy for any one disease, except when clearly indicated.

Under the head of "Outline of Action and Uses" will be found a list of diseases and conditions which are very characteristic of Bry; in addition, it is often called for in acute gastritis, and diseases of the liver. It is an easy remedy to master or for the inexperienced to make use of, for the relief and results are often so prompt as to inspire deeper study of this and all other remedies.

CACTUS GRANDIFLORUS.

(Night Blooming Cereus.)

GENERAL OUTLINE OF ACTION AND USES.

The known indications for Cactus are limited but definite and important in diseases of the heart. In

hemorrhages due to heart disease **Cactus** is indicated. A sense of **constriction** in different parts of the body is characteristic, especially **about the chest and heart**.

GUIDING SYMPTOMS.

Mind and Head.—Irritable, sad; fear of death. Congestive headaches, with sense of weight on vertex, (Calc.) with heart symptoms.

GENERAL CHARACTERISTICS.

Hemorrhages from different organs; from the nose, stomach and bowels. Urine bloody, with occasional retention. Sense of constriction, with constant desire to urinate.

Chest and Heart.—Breathing very difficult, with sense of **weight and tightness**; sense of **suffocation**, with weak, **irregular** pulse, face pale and covered with cold perspiration (Verat.). Cough with bloody expectoration, with great irregularity in heart action. (Aco., Pho.) **Angina Pectoris**, with **constriction about the lower ribs**, as though a cord or iron band was drawn **about the chest**; worse from motion, with sense of suffocation. Acute, **piercing pain about the heart**. (Bry., Spig., Acon.) Pain shoots down left arm. (Aco., Rhus.) Pulse variable. Inability to lie down. Compare Aco., Ars. and Spig.

CALCAREA CARBONICA.

(Carbonate of Lime.)

GENERAL OUTLINE OF ACTION AND USES.

This is a constitutional remedy of great value, second only to sulphur. In diseases of children with impaired nutrition, tardy development of bone and teeth, flabby tissues, with inclination to free perspiration about the head. Fat and flabby leucophlegmatic temperament. Scrofulous and rachitic type, in children or adults. The person with such a characteristic constitution often furnishes plenty of Calc. symptoms and this remedy cures and also remedies the constitutional defects.

Poor circulation, cold, clammy sweat on feet and head, inclined to take cold easily, and very sensitive to the least cold air or draught. In diseases of children compare Calc. phos.

GUIDING SYMPTOMS.

Mind and Head.—Mind of child seems to develop too slow, with general backwardness. Averse to work or exertion. Fear of becoming insane, or of some impending evil, with melancholia and despondency at climacteric. Rush of blood to head with heat, (Bell.) **Sense of weight on top of head.** Fullness of head, worse from exertion, with vertigo. **Perspiration about head during sleep,** especially in young, feeble children. **The pillow wet with perspiration after every nap, or in the morning.**

Eyes and Ears.—Scrofulous swelling and inflamma-

tion with general symptoms of Calc. Discharge from eyes and ears of muco-purulent matter, with troubles from working in water. (Rhus., Caus., Dulc.) Very sensitive to cold about the ears and neck.

Nose and Face.—Catarrh with sense of obstruction in nose, and sometimes thick, mucous discharge. Scrofulous subjects inclined to be fat and perspire about head. Face is generally pale and colorless, with deep-seated eyes, swollen upper lip. (Bell.) Veins of face and temples prominent and very dark.

Mouth and Throat.—Offensive breath, bleeding of gums. **Teething difficult and delayed**, with Calc. constitutions. Toothache, worse from cold air or anything cold or hot. **Swelling of glands in neck** (Baryta, carb.) after scarlet fever, scrofulous constitution.

Stomach, Bowels and Abdomen.—Ravenous hunger, with children, morbid appetite and craving; longing for eggs, for indigestible things; **chalk, pencil, coal, etc.** **Distention of stomach** in children who are pale and emaciated, with much perspiration about the head. Enlargement and tenderness of liver; cannot endure tight clothing; jaundice, clay-colored stool. Swelling of mesenteric and inguinal glands. In diarrhea, especially of children, the person and general symptoms must guide, rather than the character of stool. The stool is generally undigested and of sour or fetid odor. Often useful in chronic bowel trouble.

Urinary and Sexual Organs.—Irritable bladder. In children, the urine often has a sour, fetid or **ammoniacal** odor; chachectic children, **poorly nourished and**

backward. Valuable for women whose menstruation is always excessive, profuse and too early, with general weakness and great sensitiveness to cold or cold draughts. There is generally poor circulation, with cold feet. May be useful for young girls who suffer from delay of menses and have headache, palpitation, cough and hemorrhage. Such persons are generally anemic, sometimes "fair, fat and flabby" in constitution.

Larynx and Chest.—Inclined to painless hoarseness, with tickling in throat, and cough worse at night. Bloody or sweetish expectoration. **Breathing** short and oppressed; on going up stairs or up the slightest ascent has to sit down. General sensitiveness of chest to percussion. Pulse generally weak and fast. Some palpitation and anxiety, which is much worse on making any ascent.

Neck, Back, and Extremities.—General glandular enlargement, especially in neck; with disease of bones, or spinal curvature. Great weariness in all the limbs. In children who are slow or backward about walking. Swelling of the knee joint, sciatica and other troubles, from working in the water. Feet always feel cold and damp.

Sleep.—Weariness during the day but cannot sleep at night on account of many thoughts. Wakens from troubled, frightful dreams with sudden start. (Bell.) **Insomnia** quite characteristic, with fear of insanity.

Fever.—In hectic, or post scarlatinal complications,

with heat in head, with profuse perspiration, worse on slightest exertion.

Modalities.—All symptoms worse from cold air or cold draughts, from going up stairs or any ascent; perspiration worse on exertion and at night. Compare Bell., Cham., Lyc., Sili., Cham., Hep., Sul., Lach.

Clinical.—In diseases of children with tardy or defective development of the teeth and bones of the head Calc Carb. and Calc. Pho. are indispensable. A few doses when indicated by the constitutional and guiding symptoms will revolutionize the nutritive processes, and build up a more normal and vigorous body.

The temperament, constitution, and physical appearance of the child or individual should be taken into consideration when Calc. is being considered.

CALCAREA PHOSPHORICA.

(Phosphate of Lime.)

GENERAL OUTLINE OF ACTION AND USES.

Somewhat similar to Calcarea carb. and in diseases of children, especially so. As in the latter, the tissues and organs affected are chiefly the bones and the glandular system. It is useful in the same constitutions, "the fair, fat and flabby." Or they may be flabby, shrunken and emaciated, as the result of faulty nutrition or an inherited scrofulous cachexia. (See Baryta. carb.)

GUIDING SYMPTOMS.

The mental condition shows unrest, changeable-

ness, discontent. Easily depressed, and irritable. (Anti. c., Cham.) Headache of children and school-girls, who are frail and anemic. **Non-united and undeveloped bones of head, fontanels remain open.** Children with large head and small, weak neck. **Slowness of teething** and derangements during dentition. Eating soon gives rise to pain in the stomach and abdomen. The **abdomen sunken** and flabby with diarrhea. Derangement of menses in **schoolgirls**, who are debilitated, with headache, irritability and vacillation. Hoarseness, with suffocation and involuntary sighing. (Ign.) Useful in a form of rheumatism always worse in cold weather (Dulc.) and disappearing in summer. Useful in **non-union of fractured bone.** The faulty constitution, and the general characteristics must be the chief guide in the use of this remedy. See Calc. carb., Baryta. carb., Sili., Sul.

CALENDULA OFFICINALIS.

(Marigold.)

GENERAL CHARACTERISTICS.

This remedy has been used chiefly in surgical cases and especially in lacerated wounds, torn jagged looking flesh wounds accompanied with pain and not relieved by ordinary means. It promotes healthy granulations and seems to prevent excessive suppuration. It was much used by surgeons of the Homeopathic school, prior to any definite knowledge of antiseptics.

For wounds or injuries caused by children it is especially useful. It doubtless possesses antiseptic virtues and promotes rapid healing by first intention. It is indicated where pain seems excessive, or where suppuration has already taken place. In the foregoing cases and in superficial burns and scalds it often soothes the pain, removes inflammation and establishes a normal circulation. In all surgical cases and fresh wounds the tincture should be used and applied directly to the wound. It may be well to begin the treatment by diluting the tincture one half to two-thirds with tepid water. It is much used and greatly preferred in the form of a calendula cerate in superficial sores and inflammation as in varicose ulcers, inflamed hemorrhoids, fissures, abrasions of skin, etc. Hitherto the use of this remarkable remedy has been largely confined to local and external treatment. A good proving and clinical experience with the use internally would be very desirable. Like Arnica I think it might be profitably used internally in all cases where it is indicated and used externally.

CANTHARIS.

(Spanish Fly.)

GENERAL OUTLINE OF ACTION AND USES.

No drug produces a more marked and violent effect on the urinary organs than Canth. The brain, skin, gastro-intestinal and sexual organs are also included in

its sphere of action. In acute inflammation of the bladder and kidneys, Canth. has accomplished marvelous relief and cures. Sometimes useful in erysipelas and dysentery. (Bell., Ars., Apis.)

GUIDING SYMPTOMS.

Mind.—Similar to Bell. There is delirium with rage, striking and biting of attendants. Worse touching or drinking water. (Bell.) Head hot, burning in brain as of boiling water. (Acon.) Neuralgia with burning pains. (Ars.)

Face.—Erysipelas about face and eyes, with hot feeling. Acute inflammation of eyes, with burning. (Euph.)

Mouth and Throat.—Inflamed, with blisters and ulcers; with burning scalding pain. (Ars.) Swallowing of liquids very difficult. (Bell.)

Stomach and Abdomen.—Much burning and nausea, (Ars.) Abdomen distended, with cutting, burning pain in intestine. Acute pain and sensitiveness in abdomen, especially over the region of the bladder. Symptoms often aggravated by drinking coffee.

Bowels and Stool.—Canth. frequently indicated in dysentery. Stools of blood and mucus, with much burning and tenesmus. Stool of white, tough mucus, like the scrapings of intestines. Much thirst.

Urinary and Sexual Organs.—Constant, painful urging to urinate; passing only a few drops with violent cutting, burning pain, the patient exhausted and

faint with suffering. Distress in neck of bladder almost constant, with retention of urine and **ceaseless urging**. The urine may be bloody or bloody mucus, and loaded with sediment; or scanty and albuminous. (Apis., Ars., Merc.) The character of pain and constant urging is more important in selecting the remedy than the quality of the urine. (Apis., Ars., Cannabis., Lyc., Nux.)

Back and Kidneys.—Pain in region of kidneys, tender on pressure, with frequent urination. Pain in back and down the ureter, extending to bladder. Symptoms resembling passage of calculi.

Skin.—Erysipelas, vesicular on face, with itching and burning pain. Effects of burns and blisters. Compare Apis., Ars., Rhus.

CARBO VEGETABILIS.

(Vegetable Charcoal.)

GENERAL OUTLINE OF ACTION AND USES.

A remedy in its action corresponding to the last stage of various diseases which threaten a fatal termination, with symptoms of faintness and general collapse. It may follow after severe hemorrhage in typhoid fever, pneumonia, or cholera. It corresponds to a low type, with feeble pulse, cold, livid surfaces; yet a constant craving for cold air and to be fanned. To be thought of in indigestion in connection with Puls. or Lycop.

GUIDING SYMPTOMS.

Eyes, Nose, Face.—Black, floating spots before the eyes. (Pho., Lyc.) Nosebleed very frequently, in **elderly people**. Face may become pale, or livid. Varicose veins about nose, or elsewhere.

Mouth, Stomach and Bowels.—Gums spongy, bleed easily. (Merc.) Sensitive when chewing; the teeth decay rapidly. Tongue white, or dark, dry coating in low states. **Indigestion with much flatulence, belching of sour, rancid matter after eating fat food.** (Puls.) **Empty eructations**, sense of fullness soon after eating. (Lyc.) Burning in stomach. Distention of abdomen, worse in P. M., with colic pains, cold hands and feet, with exhaustion. Exhaustion with watery diarrhea, much flatulence and burning, itching and rawness in rectum. **Derangements from use of fat, indigestible food**, which are not cured by Puls.

Respiratory Organs and Heart.—Marked hoarseness. Loss of voice, worse in evening. (Pho., Ars., Bry.) Asthma in elderly people; have to be fanned; feet and hands cold. In the last stage of pneumonia with exhaustion, **cold, livid appearance and sunken features**; scanty fetid, dark sputum (condition similar to Tart. Em., only there is much less rattling of phlegm and less perspiration.) The constant desire for air and for fanning is characteristic. The pulse of Carbo. veg. is weak and fast. The pulmonic circulation is stagnant, with great oppression and anxious feeling in region of heart.

Extremities, Skin, Fever.—Coldness, blueness of hands and feet. Skin pale, cold, and in low states leaden and blue. Fevers of lowest type, with dry, dark-coated tongue (Bap.) hemorrhages and profound exhaustion.

Modalities.—Worse from fat food; as butter, fat meat, milk and coffee.

Better from fanning and from plenty of air.

Compare.—China., Ars., Tart. Em.

CAULOPHYLLUM.

(Blue Cohosh.)

OUTLINE OF ACTION AND USES.

This remedy has been serviceable in dysmenorrhea, uterine cramps, inefficient labor pains, and a great variety of suffering centering about the uterus; such as hysteria during, or before the menses; uterine pain and suffering from displacements. (Lilium.) Useful in the false pains that sometimes precede labor for days, or that are severe in the early stage of labor. Also in miscarriage with similar pain. Caul. is particularly adapted to rheumatism about the small joints, with tendency to shift. (Puls.) Rheumatism or stiffening of the muscles about the neck and back, from cold and exposure.

Compare.—Cimicif., Cham., Puls., Lilium.

CAUSTICUM.

OUTLINE OF ACTION AND USES.

Useful in chronic rheumatic and -paralytic affections and catarrhal troubles growing out of neglected colds. (See nose, eyes, larynx and bronchi.) In certain nervous states corresponding to Rhus. Ign., Nux. Skin often a dirty white, or sallow with warty excrescences. (Thuya.) May be useful in children not cured by Baryta carb., Calc., and Calc. Pho.

GUIDING SYMPTOMS.

Mind.—Morose, melancholy, peevish, all worse before menstruation. (Nat. Mur.) Absent-mindedness and inattention; worse from grief, (Ign.) worry, night-watching and disease. (Nux.)

Eyes, Nose, Face.—Eyes, dryness, with sensation of sand, with photophobia and lachrymation. Closure and much heaviness of upper lids as from weakness. (Gels., Rhus.) Nose; dryness, with stoppage, or in second stage of coryza, with **hoarseness and cough**. Warts about the nose and face, which is **sallow and unhealthy in appearance**.

Mouth, Throat, Bowels.—Toothache from cold, pain extending to nose and eyes. Teeth feel elongated. Gums swollen and bleed. Sore throat, **involving vocal chords**. Painful hemorrhoids, burning, itching, all worse from walking.

Urinary Organs.—Weakness about bladder. Involuntary urination, with children at night, also from

coughing. (Phos., Puls.) Retention of urine with pain about the rectum.

Voice, Larynx and Bronchia.—Cough with inability to expectorate. It comes up but has to be swallowed. Cough with pain in hip. **Persistent hoarseness**, worse morning and evening, cannot speak aloud. (Pho., Kali. Bi.) After colds, and **after speaking or singing**, rattling of mucus which cannot be raised. (Tart. em.) Rawness, burning and weakness in larynx. Cough, better from swallow of cold water. Tightness over chest, inclined to take deep breath. (Pho.)

Limbs in General.—Gouty, rheumatic pains. Weakness and trembling in limbs with feeble, **backward children**. Also suited to advanced age.

Generalities.—A peculiar, persistent restlessness at night, with heat of surface, cannot remain still. (Rhus. Ars.) Symptoms worse after getting wet. (Rhus.) Symptoms worse in clear, fine weather and better in damp, wet weather, directly the opposite of Rhus. and Dulc.

Similar Remedies.—Arum ars., Baryta carb., Gels., Ign., Nux., Rhus.

CEPA.

(The Common Red Onion.)

GENERAL ACTION.

Acute rhinitis. Acute catarrhal inflammation of the nose, throat, larynx and eyes. Attacks of coryza with the usual symptoms; sneezing, profuse watery discharge from nose and eyes.

GUIDING SYMPTOMS.

Mind and Head.—Confused, indefinable anxiety (Ars.) with heat and aching in forehead, worse in evening and indoors.

Eyes.—Profuse lacrymation with burning and smarting, worse in evening and in warm room. Better in open air. Redness of eyes, with sensitiveness to light.

Nose.—Violent sneezing, with great flow of clear, watery discharge. Frequent sneezing, as in acute Coryza. Worse in warm room and in evening. Acrid, burning, watery discharge from nose, causing rawness of nose and lips, with headache in forehead. (See Euphra. and Ars.) Use early.

Larynx.—Hoarseness, with constant coughing, worse inspiring cold air. Tickling in larynx, with cold or coryza. Constricted feeling in throat and larynx.

Clinical.—A careful and early selection between Ceps, Euphrasia, Ars. and Gels will often result in prompt relief from common cold and coryza.

CHAMOMILLA.

(German Chamomile.)

OUTLINE OF ACTION AND USES.

The predominant note in this remedy is found in the mental, or emotional sphere, not only of children, but also of adults. In a mild, yielding agreeable temperament, like Puls., it would be difficult to think of Cham. as the remedy. The impatience and exactions of Cham. are most characteristic. In rheumatic and neuralgic affections it is often indicated; also during labor and thereafter, and in painful menstruation. Cham. is oftener thought of and perhaps oftener used, in diseases of children, than any other remedy; especially in teething and bowel affections with the marked mental symptoms, which resemble Anto c., Calc., Cina, and Caust.; yet on referring to such remedies in Part III. (Materia Medica) the difference will be apparent, and in correct prescribing, these differences must be duly considered. No one having made proper use of mental, or subjective symptoms in prescribing has ever failed to be convinced of their value, or to be rewarded by accomplishing cures. It must be understood that Cham. has produced on the healthy person, all of the mental abnormalities above referred to. Therefore when such symptoms occur in the sick, the more closely they resemble, or correspond to each other the more prompt and certain the cure. "Similia similibus curantur."

GUIDING SYMPTOMS.

Mind.—Impatient, exacting, unreasonable. Cannot be civil; intolerant of being interrupted, or even spoken to. (Anti. c., Cina.) Cannot endure pain; becomes snappish, with moaning and whining at trifles. Very often useful with **children during teething**, diarrhea, and colic, when the little patient can only be quieted by being carried about.

Eyes, Ears, Nose and Face.—Inflammation of eyes, with swelling and mucus discharge. Earache. Stitching pain in ear, after colds, driving patient frantic. Coryza; mild form, with stoppage of nose.

Face, Teeth and Mouth.—One cheek red and hot; the other pale. Tearing, digging pain in teeth. Pain seems intolerable. (Coff.) Very useful with **teething children**. Tongue coated yellow, or dirty white.

Abdomen and Bowels.—Children's colic; much gas and distention. (Colo.) **Red cheek, perspiration and irritability.** (Colo.) Symptoms often worse at night. Child must be carried about to quiet. Diarrhea. Frequent watery, green, mucous stool, with colic.

Chest.—Child may have a nightly cough, with the mental symptoms to correspond.

Sexual Organs.—Very painful menstrual colic; sometimes the result of anger and fretting. In labor, the pains are unbearable and long-continued, with mental distraction. Useful in severe **after-pains**. In profuse hemorrhages, with mental symptoms of Cham.

Extremities and Nerves.—Rheumatic pains and fever at night drive patient from bed with great restlessness. Burning in feet; has to put them out of bed. Neuralgic pains in limbs; all worse at night.

Sleep and Fever.—Sleep often interrupted by pain and heat. Sleepy, but cannot sleep. (Bell.) Chilliness followed by heat and thirst, sweat about the head and face.

Aggravation.—From anger, conversation. At evening, or during night. From coffee and narcotics, and heat.

Amelioration.—From being carried. Better in warm, wet weather.

Compare.—Acon., Bell., Cina., Coffea., Ign., Nux.

A useful remedy for children and may be thought of in any case, if the mental symptoms correspond. See also Cina., Bell. and Nux.

CHINA.

(Peruvian Bark.)

GENERAL OUTLINE OF ACTION AND USES.

Often useful in hemorrhages that have become serious; the sight getting dim, ringing in the ears, and the pulse almost gone, with general symptoms of collapse. For cases of long continued hemorrhage, or for the loss of any vital fluids from the system, re-

sulting in weakness and anemia, China has proved a most valuable remedy. There is often some periodicity (as in malaria), with free perspiration which, as a rule, does not relieve. In neuralgia (often associated with the above conditions), China is indispensable, especially if the parts are exceedingly sensitive to the slightest touch, yet much relieved by firm pressure.

GUIDING SYMPTOMS.

Mind and Head.—General apathetic and indifferent mood. Averse to mental effort as in states of exhaustion. A form of headache and neuralgia combined with great sensitiveness of the scalp; cannot endure the slight touch of combing, yet strong pressure relieves. Throbbing of the head and carotids, (Bell.) after loss of blood.

Eyes, Ears and Nose.—Flickering, dim sight after loss of blood. Neuralgia about eyes; cannot bear touch. Ringing and roaring in ears, in exhaustion. Nosebleed. Sallow, pale face, with sunken features.

Mouth.—Toothache, better from pressing teeth together. Much saliva, bitter taste, much dryness in mouth with craving for water.

Stomach, Abdomen, Stool.—Loss of appetite, much flatulence. Sour belchings which give no relief. Fullness after eating moderately. (Lyc.) Tenderness to pressure over the stomach and liver. Abdomen distended, with much rumbling and sense of fermentation within. (Lyc.) Gall-stone colic with pain and jaundiced face. Stool undigested, yellow,

watery, very offensive; generally painless, with much exhaustion. Useful in infants and children who have become greatly reduced in flesh and strength, and anemic from loss of blood or vital fluids.

Sexual Organs.—Very useful in case of profuse menstruation which has continued for some time; also in hemorrhages during and after confinement; when the loss of blood has caused exhaustion, dimness of vision and ringing in ears.

Clinical.—The pulse is generally weak, irregular, with little force, not easy to count. In fevers with marked periodicity and the same in neuralgia, China may be indicated. Ars.)

In neuralgia and other pains, much relief comes from firm pressure, whereas slight touch is unbearable. The affections growing out of loss of vital fluids of any kind prolonged and exhausting disease are strong indications for China. The many minor symptoms will generally be found under different heads. Compare Ars., Carb. Veg., Tart. Em., Lyco., Pho.

CIMICIFUGA.

(Black Snake Root.)

GENERAL OUTLINE OF ACTION AND USES.

A remedy whose known sphere of action is comparatively limited, yet its usefulness in case of neuralgia, rheumatism, and the disturbances dependent upon ovarian and uterine troubles result in its frequent selection.

GUIDING SYMPTOMS.

Mind and Head.—Mental and physical agitation, not unlike Rhus. **Depression and melancholia marked**, especially in diseases of women. Grieved, dejected and sighing. (Ign.) Inclined to delirium and excitement, as in delirium tremens or puerperal mania. The pain in the head is generally in the occiput and neck, or extending up to vertex. (Gels.) Vertigo with impaired vision, pain in eyeballs. (Gels., Rhus.)

Sexual Organs.—In painful menstruation, or irregularities and suppression; with the marked mental symptoms, **Cimicif.** is indicated. The patient may be hysterical and “wild” with pain (Cham., Coff.) especially in labor, dysmenorrhea and ovarian neuralgia.

Neck, Back, Extremities.—The muscles of neck seem lame and painful, it may be after a cold with rheumatic tendency, with similar feeling in muscles of back and sacral region, as in lumbago. Pain, soreness and twitching in fingers and toes. The restlessness at night, with troubled dreams, is similar to Rhus., and they should be compared in rheumatism.

Compare Caul., Liliium, Puls., Colo., Ign.

**CINA.**

(Worm Seed.)

GENERAL OUTLINE OF ACTION AND USES.

Useful in diseases of children suffering from gastric and intestinal irritation, **especially from worms.** The

mental symptoms often furnish the best guide for this remedy.

GUIDING SYMPTOMS.

Mind.—Child is irritable, uncontrollable and with no provocation cries and strikes at attendants, **rejecting everything** offered; (Anti. c., Cham.) After nap child awakens with fright and anger.

Eyes, Nose, Face.—Sees bright colors, with twitching of the muscles of the eyes, even cross eyed. Face is pale and sickly, especially about the eyes. Cheeks red and hot without much fever, being white or blue about mouth. The **picking and rubbing of the nose** is very characteristic of Cina.

Mouth and Digestive Organs.—**Breath offensive**; grinding of teeth in sleep; craves many different things to eat; often hungry after eating, with empty or gnawing sensation in stomach; sufferings caused by worms; **craves sweets**; abdomen bloated. The urine turns whitish on standing.

Respiratory Organs.—Short breath, choking, gagging, cough increasing almost to a spasm as in whooping cough or with irritation from worms.

Limbs in General.—Spasms of muscles here and there, even to complete convulsions. All seem worse during sleep, with grinding of teeth and great restlessness. Child wants to be rocked or kept in motion. Chill and fever coming on about same time daily without thirst. (Ign., Gels.)

COCCULUS.

(Indian Cockle.)

GENERAL OUTLINE OF ACTION AND USES.

Has a wide action upon the nervous system, giving rise to spinal, facial and other forms of paralysis. The weak, numb, trembling hands, the unsteady tottering gait, with vertigo as a most constant symptom, all indicate involvement of the nerve centers. In a fair percentage of cases Cocculus has given marked relief to patients or travellers who are tormented with vertigo whenever riding in a carriage or train, and even in sea sickness it has won a reputation for prevention and palliation. The constant nausea, great aversion to food, with vertigo on rising or moving about are all characteristic of Cocculus, as they are of sea sickness. The mental symptoms are marked and resemble Ignatia and Nux.

COFFEA CRUDA.

(Unroasted Coffee.)

OUTLINE OF ACTION AND USES.

Primary action is increased activity of the mind. All the senses become more acute, with exhilaration and vivacity with inability to sleep. The secondary action is in the main the reverse of the above, and the two may become blended in the same person, who makes constant use of Coffee. Some temperaments are far more susceptible to the drug action of Coffee

than others. Occupation or physical exertion greatly modify the action of Coffee on the healthy subject. The pronounced sphere of action is upon the brain and sensory nerves; and the minor symptoms and conditions are generally (but not always) the result of such action.

GUIDING SYMPTOMS.

Mind and Head.—Gaiety and irritability may alternate. Excitement of emotions, **thinking and talking with unusual ease.** Unusual activity of body and mind. Headache and neuralgia the result of persistent use of Coffee. **The senses all become very acute.** The least noise, light, touch or motion is very noticeable, (Bell.) often aggravating. **Sleepless from mental activity,** from hearing joyful news; from abuse of narcotic drugs; etc. Generally very nervous, with trembling of the hands; palpitation of the heart; intolerance of pain, and general manifestation of perverted and abused nerves. Compare Acon., Cham., Colo., Nux.

Crude Coffee used as a beverage is a most effectual antidote to many drugs, and its use when taking homeopathic medicine may interfere with the action of a well chosen remedy, hence it should be avoided.

Conditions.—**Worse,** from sudden excessive emotions (joy): wine-drinking.

Better, from lying down; from cold water, which relieves the toothache.

Compare Acon., Cham., Ing., Nux., Gels.

COLOCYNTH.**GENERAL OUTLINE OF ACTION AND USES.**

The most prominent effects are those on the abdomen; the agonizing, cutting pains in the abdomen, causing the sufferer to bend double. Firm pressure upon the seat of pain gives some relief. The above characteristics accompany the various forms of colic and bowel complaints that call for Colo.

GUIDING SYMPTOMS.

The patient is usually morose, and offended at everything said or done. (Cham., Nux.) Often useful in neuralgia about the head, eyes and face.

Stomach and Abdomen.—Cramps and Pinching, cutting pain in stomach, after eating fruit, with flatulence and colic. The violent colic in abdomen may be accompanied by great distention, or much rumbling of gas without distention. Most symptoms aggravated by eating and drinking. Pain in the ovaries, compelling patient to draw up double, with agony.

In bowel complaints with the colic pains, from eating green fruit, from anger and vexation. Dystentery, with bloody mucous stools and much pain in the abdomen. Useful in pains from passing calculus with frequent urination and Colic. (See Lyco. and Canth.) Violent form of Sciatica, with shooting pains and great sensibility to parts. Compare Bry., Cham., Puls, Nux.

CROTON TIGLIUM.**(Croton-Oil Seed.)****GENERAL OUTLINE OF ACTION AND USES.**

A powerful drastic purge with some peculiar features and concomitant symptoms which have led to its successful use in some of the worst forms of bowel complaint. In diarrhea, cholera morbus or even cholera this remedy may be depended upon when the following symptoms are prominent. With the vomiting and purging there is extreme weakness (not unlike Ars.) palor and coldness (not unlike Verat.) The least food or drink causes a sudden, forcible expulsion of a profuse, yellow watery stool, often painless, with faintness to complete exhaustion. Emaciation is very rapid, with pale, shrunken features. Croton tig. need not be confounded with Ars., Carbo. veg., Ipec., or Verat., for while they may have some indications in common they also have others quite different.

Compare Podo., Ars., Verat.

DIGITALIS.**(Fox Glove.)****GENERAL OUTLINE OF ACTION AND USES.**

The indications here given are based upon the regular proving of Digitalis and confirmed by its use on patients, suffering from different forms of heart disease. Used homeopathically in the 6th or 30th

potency, it is capable of producing permanently good results. Larger doses of the tincture 5 to 15 drops (termed the physiological dose) may sometimes be used for temporary or palliative purposes. This partakes somewhat of an experiment and requires careful watching.

GUIDING SYMPTOMS.

Heart action **weak, slow and irregular.** Sensation as if it **stood still**, with oppression of breathing and anxiety.

The pulse of Digitalis is weak, irregular and intermittent, worse from exertion or **from any effort, cannot talk, or breath deeply.** May be useful in advanced pneumonia, chronic heart disease and dropsy.



DROSERA.

(Sundew.)

GENERAL OUTLINE OF ACTION AND USES.

The action of Drosera centres about the respiratory organs, producing a persistent, spasmodic cough which resembles whooping cough, and for which it has long been used with success. The guiding symptoms must be present. The cough is spasmodic and choking, often ending in nausea and vomiting. Cough worse at night and on lying down compelled to rise and hold each side with the hands. Paroxysm of cough worse 2 A. M. (Kali., carb.) with choking, vomiting and

nosebleed. Drosera has afforded much relief in chronic laryngitis and in the cough of tuberculosis. May be useful in cough, hoarseness and sore throat of clergymen or those who over tax the vocal cords.

DULCAMARA.

(Bitter-Sweet.)

GENERAL OUTLINE OF ACTION AND USES.

Upon the muscular tissues, respiratory organs, urinary organs, bowels and skin, Dulc. finds its chief sphere of action. Often useful in rheumatism, and bronchial trouble of the aged, in diarrhea and dysentery, in cystitis, nettle rash and urticaria. All of the above diseases may be caused or greatly aggravated by sudden changes in weather, from dry and warm to damp and cold, or warm days and cold nights. When by working in damp, cold place, or sitting long in a cold place or on the damp ground Dulc. is the first remedy to be thought of. Symptoms sometimes develop which are often regarded by the patient as a "common cold," which in reality are often premonitory of some more serious illness. In just such cases, if special symptoms also confirm, Dulc. will work speedy relief and cure.

GUIDING SYMPTOMS.

Colds with free discharge, or stoppage of nose, with neuralgia about face and eyes. Swelling of parotid gland, and much saliva, with sores in the mouth. Diar-

rhea or dysentery resulting from exposure to damp and cold air, with bloody, watery stool, and prostration. Whooping-cough of children and bronchitis of old people; worse in winter and aggravated by damp cold weather. Pain and muscular soreness of neck and back. Rheumatic lameness on changes in weather. (Rhus.) Urticaria and eruptions that itch and burn, over the whole body; worse in cold weather. (Apis.)

Conditions.—Worse, from sudden changes, hot to cold weather; cold air, or cold wet weather; (Rhus.) cold nights and warm days; worse in evening and at rest.

Better, from moving about in warm air.

Compare: Rhus., Eupat. per., Ars., Acon., Gels.

In diseases of Autumn colds, dysentery, etc., Dulc. is often indicated and the choice is often between Rhus. and Eupat. per.

EUPHRASIA.

(Eyebright.)

GENERAL OUTLINE OF ACTION AND USES.

Euphrasia should be compared with Ceba in coryza and colds involving eyes, nose and larynx. In Ceba, the discharge from eyes is usually non-irritating, while the watery discharge from the nose causes rawness and excoriation about the nose and lips. In Euphrasia, the acrid, watery discharge from the eyes as in coryza

causes rawness and irritation, while the discharge from the nose is bland.

GUIDING SYMPTOMS.

Head.—Heat in the forehead, with bruised feeling as from beginning of cold, with catarrhal developments.

Eyes.—Profuse lacrimation, that causes rawness about eyes and cheek. Burning in eyes and lids, with some swelling; redness of the eyes, with inclination to close them against light. Catarrhal inflammation following cold.

Nose.—Frequent sneezing, coryza, with bland, watery discharge from nose. Irritation and sneezing the day through; acute colds and catarrh. A cough, with hoarseness and irritation in larynx, may accompany the coryza, similar, but not so marked as in Ceba.

See Ceba., Ars., Merc., Gels.

Clinical.—Euphrasia to be useful in colds and coryza should be given early, not later than the second day; after which the symptoms generally change. If given early according to the above indications it will often arrest a cold with promptness.

EUPATORIUM PERFOLIATUM.

(Bone-set.)

GENERAL OUTLINE OF ACTION AND USES.

The so-called "bone-pain" indicates its action on the muscular system, which is very marked, causing

aching and pain "all over." Upon the gastric and hepatic organs, Eupato. produces many symptoms similar to Ipec. Useful in influenza or la grippe, with the marked special symptoms. (See Guiding Symptoms.) In common colds of rheumatic character, and in malarial fever.

GUIDING SYMPTOMS.

Headache with soreness in bones of head and face, with darting pains. **Eyeballs lame and sore**, (Rhus., Bap., Gels.) as in coryza, or influenza.

Mouth, Throat, Stomach.—Tongue generally coated white, (Bry., Anti. c.) Nausea with or without vomiting. Vomiting of bile, after drinking cold water, which is craved. (Ars.) The "aching all over," and severe headache, associated with **nausea**, as in la grippe, are sure indications for **Eupatorium**.

Chest.—Hoarseness with cough and much soreness in chest; with pain on coughing, or taking deep breath.

Neck, Back, Extremities.—Aching and soreness in neck; bruised, sore, aching pain in back. (Rhus.) Aching and **soreness** in all the limbs as if bruised, (Bry.)

Fever.—Malarial fever. Hard chill, with thirst before and during same followed by fever, often with but slight perspiration. Compare Bry., Rhus., Ars., Bap. in former epidemics of la grippe, Eupato. per. has easily been the first remedy.

Clinical.—No remedy has been more successful in combating the epidemics of la grippe than eupatorium. **There**

is a record of its having been given empirically for more than a century.

GELSEMIUM.

(Yellow Jessamine.)

GENERAL OUTLINE OF ACTION AND USES.

Although one of our newer remedies, it has taken its place among those most used in daily practice. To be thought of in colds, and such diseases as are characterized by weakness, bruised sensation in the muscles, vertigo and dull headache which may be accompanied with chilliness or fever but without the thirst of Aconite. Certain forms of coryza which cause soreness of the eyeballs and heaviness of the lids. Primarily its action is centered upon the brain and spinal cord and its successful use in some of the most fatal epidemics of cerebro-spinal meningitis has placed it in the first rank of homeopathic remedies. The fever of Gels. is generally without thirst.

GUIDING SYMPTOMS.

Mind and Head.—Inclined to be listless, with inability to think; mental and physical languor, mild delirium in low types of fever. Pain in the head and neck, with soreness and inclination to **draw the head backward**. Headache in forehead from cold, with **soreness in eyeballs and heaviness of the lids**. Bad effects from **fright, fear or exciting news**, (see Acon., Ign., Coff.) Pain and pressure in the **base of the brain**

extending over head and eyes, with vertigo and dimness of vision.

Eyes, Nose and Face.—Drooping, heaviness of upper lids with aching about the eyeballs. **Dim or double vision** with vertigo. Colds in the head from slight changes in the weather, with sneezing and watery, acrid discharge from the nose (Cepa., Euph). **Catarhal** colds extending to the eye and ear with the general symptoms to correspond with Gels. The face somewhat flushed and heavy, with inclination to sleep, slow to respond and desires to be let alone.

Tongue and Throat.—Tongue coated yellowish white with feeling of numbness, difficult to articulate. Spasmodic sensations in throat and much distress about swallowing, with pain extending to the ear.

Stomach and Abdomen.—Often a sensation of weakness or emptiness like Ign. A troublesome looseness of the bowels, caused by **fright or fear** (either from personal violence or “stage fright”) will often be cured by Gels.

Urinary and Sexual Organs.—Partial loss of power of the bladder with intermittent flow of urine. Profuse, clear urine with much nervousness and excitement from **fright and fear**. Sometimes useful in confinement, with spasms and convulsions.

Back and Extremities.—Aching in muscles of the neck and back. **Lame, dull backache with bruised feeling in muscles**. The arms and legs feel **weak and unsteady**, worse from any exertion. (Ars.).

Sleep.—Wakeful from nervous excitement, especially fright or fear. Mild delirium and wakefulness of children with considerable fever, but no thirst.

Fever.—In malarial and remittent fevers, Gels. has proven one of our best remedies. In addition to fever some of the foregoing conditions are often present, making the selection easy. The type that calls for Gels. must not be confused with Aconite or even Arsenicum, which in some respects closely resembles Gels. Before deciding, or if in doubt, each remedy should be carefully considered, beginning with the first symptom under “mind and head,” making the clearest possible comparison of each.

Conditions.—Worse, from damp weather; from bad news, fright or fear; from tobacco smoking. Ign.

Compare: Ign., Bap., Rhus., Cimicif., Acon., Ars.

Clinical.—Perhaps no one remedy is given so often for “colds in the head” as Gels. A glance at the provings will explain why this is so. There may be chilliness and some fever suggesting Acon., but if there is the decided languor, headache and absence of thirst Gels. is the remedy.

GLONOINE.

(Nitro-Glycerine.)

GENERAL OUTLINE OF ACTION AND USES.

The chief action of Glon. centres about the brain with many symptoms of acute congestion similar to Bell. The pains in the head are accompanied by sense

of fullness and throbbing, all worse from sun heat or lying down. Surging of blood to the head with throbbing pain and flushed face. Glon. to be thought of in threatening attacks of apoplexy, also from the bad effects of sun-stroke.

HAMAMELIS VIRGINICA.

(Witch Hazel.)

There are three remedies each having quite a distinct sphere of its own that are often used both externally and internally and should find a place in every well ordered medicine case. Namely, Arnica, Calendula and Hamamelis. These remedies are generally obtained in the form of tincture and diluted as the case may be at the time they are used. Internally they may be used by adding 5 to 10 drops to a glass of water, stirring well and to be taken one teaspoonful every two to four hours.

Hamamelis may be used in venous hemorrhages from any organ or orifice of the body; the nose, lungs, bowels, uterus, or bladder. No remedy has a more beneficial effect upon varicose veins, varicose ulcers and hemorrhoids than Hamamelis. In such cases it should be used both internally and externally. It may be diluted with warm water or used full strength. After injuries especially blows and strains of muscles and ligaments attended with much soreness and bruised feeling. Hamamelis is in close competition with Arnica and often has the preference, they may

be used in alternation. The hemorrhages calling for Hamamelis are usually passive the blood being dark in color with slow but persistent discharge such as often occurs from the nose, lungs, and from hemorrhoids. I have never been able to discover that the use of this remedy (full strength) externally or internally has had any bad effects, in fact, it is one of the most harmless of our useful remedies.

HELONIAS.

(Blazing Star.)

GENERAL OUTLINE OF ACTION AND USES.

There are two remedies, Helonias and *Lilium tig.*, which have demonstrated in every day practice their great value in diseases of the female organs. In uterine displacements following confinement or from other causes, when together with the tired aching in the back and limbs there is mental depression, even melancholia, with heat and pressure on top of the head, Helonias 3x trituration has given permanent relief to many such cases.

A characteristic of the Helonias patient is—"better when kept busy, with the mind engaged entertaining, etc.", followed by depression, languor and prostration. The mental symptoms are peculiar but important and very often associated with some malposition of the uterus.

My experience with this remedy has been most

gratifying and in most cases by the use of the lower triturations 3x and 6x which have been discontinued after marked improvement has taken place and repeated later in case of relapse.

HEPAR SULPHUR.

(Calcium Sulphide.)

GENERAL OUTLINE OF ACTION AND USES.

A "tissue drug" of wide action. Its effect on the skin and glandular system, also upon the mucous membrane of the respiratory organs and the intestinal tract, is marked. Useful in diseases peculiar to scrofulous children, inclined to swelling of glands and to excessive perspiration. Unhealthy skin, every injury followed by suppuration and slow to heal. In croup and cough from laryngeal involvement, with free perspiration. For swellings, and tendency to suppuration, with great sensitiveness to touch, (Lach.) to cold air and to all impressions. (Nux vom.)

GUIDING SYMPTOMS.

Mind and Head.—Mind may be dull and sluggish, or one may be hasty of speech and irritable in disposition. Sharp pain in one side of brain, as if a nail were driven in. (Ign.)

Eyes, Ears, Nose and Face.—Very often useful in inflammation of the eyes, with swelling and accumulation of mucus. Smarting and itching about the eye. All symptoms worse from light. Ulcers and chronic

inflammation. **Abuse of Mercury.** Discharge of pus from ears, or with threatened suppuration after measles and scarlet fever, with general symptoms calling for **Hepar**. Ulceration and chronic catarrh of nose, sensitive to air and touch. Red cheeks, skin unhealthy, **eruptions on forehead**. Swelling of the upper lip. (Bell.)

Mouth and Throat.—The gums and mucous surfaces are **sensitive and bleed easily**. Small ulcers on the inside of cheek and about the tongue. Ulceration about the gums, with great sensitiveness of teeth to cold and to pressing teeth together. **After abuse of Mercury**, with offensive breath. In tonsilitis, **when suppuration seems evident**, with sharp, sticking pains from throat to the ear; considerable **saliva, with fetid breath**. (Merc.)

Stomach, Abdomen, Bowels.—Craving vinegar and sour things, with great aversion to anything fat. Abdomen distended. (Lyco., Puls., Carbo. veg.) Sharp pains about right side of abdomen, threatening abscess of liver. (Bry.) Swelling of the glands in inguinal region. Some cutting pain about the abdomen. Inaction or loss of power in rectum to expel even soft stool, yet constant urging. (Nux vom.) Stool fetid, yellow, or clay-colored. (Podo., calc.)

Urinary and Sexual Organs.—Bladder weak. Urine bloody, milky, with thick, heavy, white sediment. Swelling and pain with threatened abscess about the male or female sexual organs; often worse after abuse of Mercury, with the sore mouth and fetid breath.

Respiratory Organs.—In the second, or that stage of croup, when there seems much phlegm in throat, free perspiration with the coughing; anxious, wheezing breathing, worse towards morning and from the slightest exposure to cold air. Hepar sul. is seldom indicated when there is fever and dry skin. (See Acon.) With cough from colds, the voice is weak, speaking aloud with difficulty. (Phos., Caus.) Breathing embarrassed by walking (see Ars.) and cold air, which causes cough and wheezing breathing. Asthma worse in dry weather, better in damp. (Caus.)

Skin and Fever.—Ulcers and abscesses, which are very sensitive to cold air or contact, surrounded by small pimples. (Lach.) Unhealthy skin, inclined to crack and suppurate after slight injury. Chilliness and heat associated with some local suppuration, as in tonsillitis, abscesses, etc.

Conditions.—Worse, from cold air; uncovering; from use of Mercury.

Better; from warmth, wrapping up warmly; (Ars.) in damp weather (Caust.).

Compare: Acon., Spong., Sul., Sili.

Clinical.—Hepar will correct the tendency to suppurate or tardiness of healing so often troublesome after even slight, superficial injuries. Use first the 6th and later the 20th potency.

HYDRASTIS.**(Golden Seal.)**

This remedy has been for many years a most popular one with Eclectic physicians and in later years increasingly so with Homeopaths.

It acts on the mucous membranes, especially about the mouth, throat and stomach; causing a thick, yellowish catarrhal secretion. A "catarrhal" drug of the first class.

In torpid liver, jaundiced skin with weak, "tired" exhaustion, Hyd. is often curative, also in chronic inflammation of the bladder, and uterine catarrh. In catarrhal or inflamed conditions of the throat, it may be used both locally and internally by placing a few drops of the tincture in water and using as a gargle or with a syringe. The lower preparations and tincture generally used.

Experience with Hydrastis in recent years convinces me that it has been a neglected remedy, and that it will yet fill a larger place all its own in the list of every day remedies.

It may be classed with such remedies as Bap., Merc., Nux and Podo.

IGNATIA.

(St. Ignatius Bean.)

GENERAL OUTLINE OF ACTION AND USES.

The nervous system is profoundly affected by Ignatia, also the emotional element. The mental faculties are so influenced as to produce the most opposite states, contradictory and vacillating. Ignatia is useful in hysteria especially with persons of a sensitive, nervous temperament, whose symptoms are apt to call for this remedy. Bad effects from grief, and disappointments, with brooding, sighing and weeping. Extremely impatient with the least pain or contradiction. (Cham., Nux Vom.)

GUIDING SYMPTOMS.

Mind and Head.—Changeable mood; weeping and sadness, changing to jesting and laughter. Sharp pain in a small spot, as though a nail were being driven into the brain.

Eyes, Ears and Face.—Spasms of eyelids and twitching of the muscles of the face, with neuralgic pains. Zigzag flickerings before the eyes. One cheek red, the other pale. (Cham., Pho.) Roaring or itching in the ears.

Mouth and Throat.—Sour taste and eructations. Stitching, sharp pains in tonsils and throat, worse when not swallowing and better when swallowing solid food. Desires sour things (Hep. sul.) but averse to spirituous liquors and tobacco; the latter aggravating most other symptoms. Constriction in throat.

Stomach.—Very characteristic is the sensation of weakness, goneness and emptiness in the pit of the stomach, as after long fasting, with constant sighing. Hiccough, worse after eating, or smoking tobacco. Indigestion, regurgitating of food, with aversion to ordinary food, but craving indigestible articles. (Calc., carb.) Indigestion preceded by grief, disappointment, worry and emotional disturbances.

Abdomen and Bowels.—Some distention and flatulence, yet sensation of “goneness” in upper abdomen. Some cutting pain and rumbling about the abdomen, with much complaint and exaggeration in hysterical subjects. Itching and stitching pain in rectum, with constriction and soreness as in fissure or internal piles. (Lyco., Lach.) Ineffectual but constant urging for stool. (Nux) Alternate constipation and diarrhea (Nux.)

Urinary and Sexual Organs.—Urine excessive and light-colored in hysterical or excitable subjects. Incontinence, or retention of urine. Suppression of menses from excitement and grief. In morning sickness, painful labor and dysmenorrhea, with mental and emotional symptoms of Ign. Nausea, yet hungry; contradictions in general, as thirst during a chill. Sighing yet full of laughter.

Respiratory Organs.—Dry, nervous cough, with weak voice and hoarseness. Irritation in larynx and constant cough which can be suppressed for the time. Lungs not involved, yet constantly taking deep breath.

The cough and chest symptoms all aggravated by tobacco smoke.

Extremities.—Jerking of limbs on falling to sleep. (Cham., Cina.) Tingling and numbness in limbs. (Acon.) Hysterical spasms. Pain in sciatic nerve, worse at night, better from rising and moving about. (Rhus. tox.) Generally worse on approach of cold weather. (Dulc.)

Sleep.—Sleep is light. Hears every noise. (Coffea., Cham.) Child awakens with screaming as after frightful dreams. (Apis., Bell., Cina.) Chewing motion of mouth in sleep. (Bry.) Troublesome dreams **after** grief and disappointment.

Fever.—In intermittent fever, with **thirst during** chill but not during the fever. External heat but no thirst. (Gels.) Surface very sensitive to cold air, also to slight touch while firm pressure relieves. (China.)

Similar.—For similars see Acon., Coffea., Cham., Nux, Puls., Lyco. The mental and emotional disturbances of Ign. are pre-dominant and in time lead to disease for which Ign. may be the only remedy. The Ign. patient needs wise and kind suggestions quite as much as sympathy.

Conditions.—**Worse**, from grief, mental emotions; from coffee, from odor of tobacco smoke.

Better, from warmth; hard pressure (China.) walking; swallowing.

IPECACUANHA.

GENERAL OUTLINE OF ACTION AND USES.

Action is somewhat limited, but well defined. The respiratory organs, and the stomach and bowels, are chiefly affected. Useful in attacks where persistent nausea is present. In whooping cough, or any spasmodic cough, as in asthma where there is nausea and difficult, wheezy breathing. Also in any hemorrhage where the blood is bright red, with the characteristic nausea.

GUIDING SYMPTOMS.

Irritable and difficult to please. Face pale, with dark rings about the eyes. (Cina., Ars.) Coryza, with cough and sneezing. Frequent attacks of nosebleed, the blood being bright red. (Acon., Bell.)

Mouth, Throat and Stomach.—Tongue clean, sometimes yellow or white, with bitter taste. Saliva much increased. (Merc.) No appetite, except for dainties and sweet things, with bad effects from eating the same. Also from rich food, unripe fruit, and ice-cream; attended with nausea and vomiting of bile, blood or mucus. Cutting, clutching pain about the stomach and navel.

Stool.—In cholera infantum with green, watery or bloody mucus, or fermented, light yellow stool, with colic and nausea. (See Cham., Bell.)

Sexual Organs.—Menses too early and too profuse, with pain and clutching about the abdomen, with

nausea. Useful in uterine hemorrhages, profuse, bright red, with nausea and pain. Persistent nausea of pregnancy.

Respiratory Organs.—The cough and breathing are spasmodic and suffocating as in asthma and whooping cough; worse from motion, better from fresh air, with much rattling of phlegm. (Tartar emetic) whooping cough with nosebleed. Child becomes livid with the cough, with convulsions even rigid. Ipecac often useful in long continued cough following measles. Hemorrhages from throat and lungs. Infantile pneumonia, with rapid breathing, face blue, or pale, with vomiting. (Tartar emetic.)

Fever, Skin, Sleep.—In malarial fever with marked periodicity with nausea during chill and fever. (Eupato.) Skin lax, face often blue and pale, in lung and bowel affections. The sleep is disturbed by sudden starts, (Bell., Igna.) moaning in sleep with eyes half open. (Apis., Bell.) Nausea as will be observed by referring to gastric and sexual organs is the predominating “key-note,” also the same in whooping cough for which it is second only to Bell.

Conditions.—Worse, from unripe fruit; rich food and sweets; from veal; from lying down, from slight motion.

Compare: Ars., Acon., Bry., Cham., Tart.

KALI BICHROMICUM.**GENERAL OUTLINE OF ACTION AND USES.**

A useful remedy in catarrh and ulceration of the nose with obstructions, thick greenish or tough stringy discharges, loss of smell and a fetid odor from the nose. Laryngitis, hoarse croupy cough with tough, stringy tenacious mucus which is drawn out in "strings" is very characteristic of Kali Bi.

In the later stage of croup, with cough, perspiration and exhaustion, similar to Hepar, but with less phlegm; the cough often dry and croupy as in membranous or diphtheritic croup with above guiding symptoms.

KALI CARBONICUM.**GENERAL OUTLINE OF ACTION AND USES.**

A remedy of value in disease of the respiratory organs. It may be considered in connection with Bry., Hepar, Calc. and Nux. The pains of Kali carbonicum are like Bry., sharp, especially about the chest.

The extreme sensitiveness to cold is like Hepar, and Calc. and the time of aggravation, especially the cough—is like Nux. The cough of Kali is often suffocative and in paroxysms, like the whooping cough, for which in the latter stage it has often been curative. The puffing bag-like upper lids, the cough, sharp pains, worse at 3 or 4 A. M., worse from cold or cold

draught are the chief characteristic of Kali carbonicum.

In neglected colds, whooping cough, chronic pleurisy and weak heart—this remedy proves most useful.

LACHESIS.

(The Venom of the Trionocephalous.)

GENERAL OUTLINE OF ACTION AND USES.

Profound and destructive action on the blood, which becomes dark or black as in malignant diphtheria, or intestinal hemorrhage in typhoid. The surfaces of all parts affected, as in carbuncle, diphtheria and threatened gangrene are extremely sensitive to the slightest touch and often livid in appearance. (Hepar sul.) The curative action upon the sexual organs of women, especially for diseases growing out of the climateric, attended with mental derangement, and insomnia,—make it our most valuable remedy. Lachesis has proven, beyond question, its curative powers in the most malignant cases of diphtheria, infected wounds, and gangrene.

GUIDING SYMPTOMS.

Mind.—Sad and distressed in mind, especially on awaking. Occasionally cheerful, very talkative, but soon lapses into depression, and dwells upon fancied or real grief and sorrow. Restless and shifting about from place to place. Vacillating in conversation, with

suspicion and jealousy. Mental symptoms generally worse after sleep, even short nap in day-time. Great mental activity. Talks rapidly, but not correctly about any subject.

Head.—Heat and pressure on vertex. Rush of blood to head and face at climacteric period. (Calc., carb.) Headache worse in morning or after sleep, extending to the root of the nose. Headache from heat of sun. (Glon.)

Eyes, Ears, and Nose.—Dim, black flickerings before the eyes. (Phos.) Pain in the ear with sore throat, all very sensitive to the slightest touch. Nosebleed. Face livid or bloated, with great aversion to anything tight about the neck. Hot flashes, with rush of blood to face and head.

Throat and Tongue.—Often useful in sore throat beginning on left side, with swelling externally and internally. The surface is extremely sensitive to touch. Cannot endure the bands of clothing about the neck. Tonsils dark purple color, with much pain on swallowing, especially liquids, which escape through the nose. All worse after sleeping, or from the slightest touch about the throat, sense of suffocation and general aggravation follows. There may be dryness, or increased saliva with offensive, fetid breath. The tongue dry, cracked, and on attempts to protrude, it trembles and catches in the teeth.

Stomach, Abdomen and Stool.—Very sensitive over the stomach and abdomen. Cannot endure weight of clothing. Useful in inflammations resulting from in-

temperance. To be thought of in cases of chronic appendicitis and ovarian inflammation, especially during the climacteric period. Painful piles with bleeding. Stool very dark, like blackened blood, and very offensive, as in typhoid or diphtheria.

Female.—Often indicated during and after the “Change of Life.” The **flashes** of heat, palpitation, suffocating fainting spells, with headache and pressure on top of head, are all reliable characteristics. The menses, if they have not ceased, are generally too late and too scanty. Mental disturbances; even well-developed insanity.

Respiratory Organs and Heart.—In diphtheritic croup; suffocation and choking after short sleep, with gasping for more air; must take deep breath; pain and anxious feeling about the heart. Constricted feeling about heart, with livid countenance. (Cactus.)

Sleep.—There may be wakefulness in nervous cases, growing out of climacteric; or sleepiness but unable to sleep except in naps, in acute cases; yet in either, the characteristic of “**aggravation after sleep**” is **equally reliable**, whether in the mental symptoms of the semi-insane, or the local suffering of diphtheria.

Fever.—The hot flashes of Lachesis are oftener without, than with fever. They often culminate in the face and head, sometimes with hot perspiration. Fevers of low type may require Lachesis.

Skin.—Carbuncles and boils, with bluish purple surface, very sensitive to touch. Dissecting wounds.

Erysipelas, or wounds that become dark or livid, with malignant tendency.

Characteristics.—The dry, red tongue, the livid surfaces painful to the slightest touch, the marked **aggravation after sleep**, the sore throat beginning on the left side, the hot flashes and heat on vertex, are “key-notes” of great value, and they are often present in some of the most malignant cases which Lachesis, with its unique symptomatology, has cured.

Lachesis has few similar or complementary remedies.

Conditions.—**Aggravation**, after sleep; after nap in day time; from touch, pressure, weight of clothing over abdomen; sore throat on left side.

Amelioration, from warm applications, from loosening all clothing about neck.

Compare: Hepar, Lyco., Bell., Ars., Calc. carb.

LILIUM TIGRINUM.

(Tiger Lily.)

GENERAL OUTLINE OF ACTION AND USES.

Has a marked influence upon the female sexual organs, producing many symptoms, (probably reflex), upon the mind and head. It has been found of unquestionable value in displacements of the uterus and ovaries, especially in younger women. If local and

mental symptoms correspond, a cure of a good percentage of these troublesome cases, if not of too long standing, may be anticipated.

GUIDING SYMPTOMS.

The prover is low-spirited, with much weeping and constant apprehension of some illness or disaster. **Restless and hurried in manner** with much aversion to being left alone, many symptoms like hysteria. Irritable and aggravated by any kindness, unreasonable about herself and hopeless, with **great depression**. Some headache in vertex and over the eyes, with dim, confused vision and heat about the eyes and lids.

Abdomen and Back.—Weak, dragging down sensation over the stomach and abdomen, a lame, sore feeling in the back and sacrum, palpitation and pain about the heart, all worse from standing, all characteristic of *Lilium* and very often can be referred to some abnormal condition of the sexual organs.

Urinary and Sexual Organs.—Frequent urination with feeling of weight about the bladder and rectum. Sensation of great pressure and dragging down, as if the contents of the pelvis would be expelled unless restrained by pressure of the hand upward. Pain and congestion of the uterus and ovaries with scanty flow of menses (except when walking about). Some sharp pains with aching, burning feeling in the ovaries which is worse from exercise or pressure. Only a few of all our well proven remedies can simulate and none can duplicate *Lilium*. Among those remedies having some

similarity of action, especially upon the sexual organs, mention should be made of Apis., Bell., Bry., Helon. and Sepia.

LYCOPODIUM.

(Club Moss.)

GENERAL OUTLINE OF ACTION AND USES.

The action of Lycopodium upon the stomach and bowels, also upon the kidneys and liver, is very marked. Indigestion of the flatulent type, involving both stomach and bowels. The mucous membrane of the lungs, digestive and other organs, is profoundly affected. The nervous system and mind often disturbed by the above conditions, correspond to the proving of Lycopodium; also the lithic acid constitution with renal calculi. Symptoms are generally worse from four to eight P. M. This seemingly innocent substance has, when properly potentized, proven to be a most valuable remedy.

Mind.—Confused thoughts, with difficulty in speaking or writing the right words. Loss of confidence in self, with aversion to work, or taking up any new work. Memory weak, slow to comprehend. A great remedy for **overworked brains, with the peculiar indigestion** of Lyco. (See stomach and intestinal symptoms.) Melancholy and irritable with chronic indigestion. (Nux., Ign.)

Head, Face, Eyes and Nose.—Confused, heavy feel-

ing in the head. Throbbing on leaning the head backward, and after coughing. Face sallow, with blue circles around the eyes. Eyelids inflamed, ulcerated, with pain in the eye, worse at night and from artificial light. Obstruction of the nose, with dry catarrh, worse towards morning. **Fan-like motion of the wings of the nose is a key-note** of value especially in disease of throat and lungs.

Throat and Mouth.—Tongue coated, with bitter or sour taste. Blisters on tongue. Dryness of mouth, without thirst. Toothache relieved by warm drink. **Sore throat, generally beginning on right side, passing to the left.** Swelling of sub-maxillary glands. Constricted feeling in throat preventing swallowing, so that fluids escape through the nose as in tonsillitis and diphtheria; worse four P. M. Better from swallowing warm fluids.

Stomach.—After eating very little, there comes a **sense of fullness which prevents eating more.** The same after drinking. “Feels so full.” A most reliable “key-note.” Distention of stomach and abdomen. Chronic dyspepsia, with acid, burning risings. (Carbo. veg.) The stomach and abdomen **seem full of gas, with sense of fermentation.** (China and Carbo. veg.) No appetite, no thirst; **constant sense of satiety.**

Abdomen.—Flatulent intestinal indigestion with much distention, rumbling and fermentation; generally worse after eating, and in the evening. In **chronic diseases of liver, and gall-stone colic,** Lycopodium has proven useful, when the general symptoms and ap-

pearance of patient called for it. Pain through the region of the liver and stomach, with bitter, watery substance rising in the throat. Palliative in cancer of the stomach when the symptoms correspond.

Urinary Organs.—Pain in the kidneys, relieved by urinating. Red sediment, resembling red sand, the urine being scanty. Uric acid diathesis, with renal Colic from the passage of calculi. Chronic inflammation of the kidneys and bladder, with stomach and intestinal derangements. The urine may be bloody and passed with straining. The severe pain from passage of calculi has often been relieved by a dose of Lyco.

Respiratory Organs.—In sub-acute pneumonia, with some remaining hepatization, cough and rapid breathing, Lyco. is often useful. Chronic bronchial catarrh, especially with old people with cough, profuse expectoration and sense of constriction of chest. In disease of respiratory organs, attended with fan-like motion of the wings of the nose, Lyco. is often the remedy.

Extremities.—Swelling of feet and limbs. Stiffness and soreness of joints from lithic acid deposits.

Skin.—Not clear and normal. Sallow, with eruptions. Eczema and hives.

Sleep.—Troublesome dreams. Wakening with start and tired feeling in morning. The aggravation from 4 to 8 P. M. and the persistent sense of fullness after eating or drinking but little, are features that crop out in most cases that require Lyco.

Conditions.—Worse, 4 to 8 P. M.; right side; warm

applications; after eating little, gives sense of over-eating.

Better, from warm food and drink; after midnight.

Compare: Lach., Carbo. Veg., Puls., Nux, Salac. carb.

Clinical.—In any form of indigestion where the symptoms are marked (see stomach and abdomen) Lyco will quickly cure even though of long standing.

In chronic diseases of the kidneys where the so-called "red sand" sediment is found, or frequent attacks of passing calculi occurs, it not only relieves the pain but remedies the condition of the system which causes their formation.

MERCURIUS.

(Quicksilver.)

GENERAL OUTLINE OF ACTION AND USES.

No remedy produces a more profound effect upon the glandular system and bones than Mercurius. The salivary glands are stimulated to great activity and in sufficient doses complete salivation follows with all its attendant symptoms about the mouth, tongue and teeth. Perspiration is often profuse especially at night, quite offensive and affords no relief. Mercurius has proven one of our most useful remedies in dysentery, coryza, quinsy and sore throat. The symptoms calling for Mercurius are quite definite and there need be no confusion with other remedies. In rheumatism and syphilis, Mercurius should be considered.

GUIDING SYMPTOMS.

Mind.—Irritable, morose, slow of speech, with fear of losing reason.

Eyes and Ears.—Eyes and ears inflamed, with much secretion of mucus and an excoriating discharge. Eye symptoms worse at night. Offensive discharge from the ear with pain extending from throat to ear, with swelling of the glands and salivation, may occur in connection with mumps, sore throat or chronic catarrh with aggravation at night.

Nose.—Coryza with much sneezing, watery discharge from the nose which becomes sore and raw. Discharge may become acrid thick mucus and catarrhal.

Mouth and Tongue.—Gums become swollen, soft and bleed from slightest touch with saliva greatly increased. Tongue nearly covered with a thick, whitish yellow coating, with much saliva and a fetid, offensive breath. Tongue often swollen and flabby, showing the imprints of teeth in the side. Ulcerated about the tongue and mouth. Dental periostitis with pain and soreness.

Throat.—Swelling of the glands, enlargement of tonsils. Various forms of sore throat with the above symptoms, especially the saliva, offensive breath and characteristic appearance of the tongue are present.

Stomach and Bowels.—Some distention and sense of soreness over the region of the liver, with yellow, jaundiced appearance. Acute or chronic catarrhal in-

flammation of the bowels with frequent mucous stool. **Dysentery** with almost constant straining or tenesmus which continues after each stool. Passages are often bloody, slimy mucus. Most symptoms worse at night and during damp, cold weather (Dulc.) The skin is inclined to be yellow with much perspiration which is quite offensive and worse at night. Patient worse instead of better from perspiring.

The symptoms of Merc. are clean cut and unmistakable.

Conditions.—Worse, at night; wet damp weather; (Rhus., Dulc.) perspiring; cold damp nights; (Dulc.)

Compare: Podo., Hepar, Phos., Dulc., Rhus.

Clinical.—In dysentery Merc. has always been one of the first to be considered. The symptoms are definitely stated in the above. The same may be said of Merc. in the different forms of sore throat, mumps and quinsy.

MERCURIUS BIN-IODIDE.

(Bin-Iodide of Mercury.)

GENERAL OUTLINE OF ACTION AND USES.

Before the time of Diphtheria Antitoxine this remedy in the form of the 3rd decimal trituration was much used by many Homeopaths, especially in certain forms of diphtheria and sore throat, which in the main were characterized by symptoms calling for Mercurius. That it was curative in many cases, I can personally testify and it has not yet been cast aside after

the fashion of some "popular remedies" for its use was doubtless based upon the law of similars and will always be found useful.

Always used in the form of a trituration and familiarly known as the "pink powder."

NATRUM MURIATICUM.

(Common Salt, Triturated for Use.)

GENERAL OUTLINE OF ACTION AND USES.

General action is very marked upon the blood and skin as is shown by faulty nutrition, emaciation and anemia. The mental symptoms are marked and resemble those of Ign. and Nux. Very irritable, sad, weeping, all worse from being consoled. Headache, chronic or periodical, especially of young school girls attended with irritability, backache and loss of flesh, even though living well. Eyes, weak and give out on reading or writing, the letters or objects become confused. In coryza, worse in the evening with sneezing, watery discharge, loss of smell, and taste; later stages of cold with catarrhal headache and blisters about the nose and lips. Nat. is well nigh specific. Much thirst with aversion to bread and tobacco smoking. (Ign.) The urine is increased and often involuntary when coughing (Phos.) or walking followed by burning cutting pain (Canth.) useful in intermittent fever, especially after abuse of quinine. Chill occurs regularly at 10 to 11 A. M. with severe head and backache,

fever blisters about the lips and nose. Fine rash about the forehead and temples. *Natrum Muriaticum* should be considered as in the class with *Nux vomica*, *Ignatia* and *Cantharis*.

Clinical.—All who have prescribed *Natrum*, well potentized have not been disappointed with the results. It covers a wide field; the mental symptoms are marked and often occur. A useful remedy for nervous, discouraged, “broken down” school girls with much headache, etc.

NUX VOMICA.

(From Seeds of *Strychnos*.)

GENERAL OUTLINE OF ACTION AND USES.

Nux vomica is a remedy of very wide application, a drug that seems to affect every organ and tissue of the body. This doubtless is due in part to its profound action upon the whole nervous system. Hence its frequent use, which probably exceeds that of any other homeopathic remedy. It is an important clinical fact, long established by our ablest observers, that *Nux vomica* is very often the best remedy to begin the treatment where, previously, the patient has been dosed with cathartics, drugs and nostrums of all sorts, also including the ill effects from liquor and strong coffee. *Nux vomica* corresponds to the *nervo-sanguine*, irritable temperament; hard to please and easily displeased. (See guiding symptoms.) Valuable in disorders growing out of sedentary habits, in-door life, mental work, strain and worry, dissipation, especially

intemperance, with loss of sleep and the usual accompanying irregularities of such a life. Unless some other remedy is clearly indicated, especially in subjects of dissipation and drugging it is always well to give *Nux vomica* for a few doses, at least, or to continue it, at longer intervals, so long as improvement continues; after which the indicated remedy should be sought for and administered in the usual way.

GUIDING SYMPTOMS.

Mind.—Great sensitiveness; easily disturbed, and irritable over the slightest offence; impatient and unreasonable in conversation; averse to mental work; inclined to be drowsy during the day, with sensitiveness to noise and light; prefers to be left alone; hypochondriacal mood. **Bad effects of mental overwork.**

Head.—Headache, generally worse in morning on awakening, with vertigo and fullness of head, especially after loss of sleep and abuse of strong drink and coffee. Confusion, with feeling of intoxication, worse in morning or after dinner. Headache aggravated by noise, light, or any opposition. Headache from **over study and night work**; with pressure, vertigo and drowsiness during the day. **Worse in morning.**

Nose, Eyes, Face.—Useful in some forms of **dry catarrh**. The nose is stuffed up, **especially at night**. Colds with some watery discharge by day, but stopped up at night. Colds of infants, with stoppage of nose. Colds, or catarrh, with dull aching over one or both eyes, generally worse in the morning. Eyes inflamed

from nightly debauch, with twitching of muscles. Face sallow, pale, distressed. Eruptions on forehead and face. **Twitching of muscles of the face and limbs.** Face looks sallow from biliousness and dissipation.

Mouth.—Small cankers and blisters on tongue, gums and cheeks. Sour, bad taste in morning. Dryness of tongue and mouth, especially after dissipation.

Stomach.—Cutting, griping pain, often in paroxysms. Worse after eating, the pain extending towards the back. **Indigestion caused by high living;** especially from highly seasoned food, coffee and liquor. May be vomiting of sour undigested food. Pain in region of stomach, as if sore and raw.

Abdomen, Rectum, Stool.—Some distention, tenderness and pain over region of liver and abdomen. Torpor of liver with constipation, in persons of sedentary habits, who incline to dosing, especially with cathartics. Constipation usually characterizes a Nux vom. patient; but in acute affections, as in dysentery, there is often a condition equally characteristic; stool very frequent, sometimes constant urging, but ineffectual, or only a small stool, it may be of bloody mucus. Loose-ness of bowels after cathartic medicines, etc. Constipation and diarrhea alternately. Growing out of chronic constipation, hemorrhoids may develop with soreness and pain in the rectum, with bleeding, itching and frequent desire for stool. Especially useful in patients of sedentary or dissipated habits, nervo-sanguine temperaments, irritable and hypochondriacal.

Urinary Organs.—Frequent urging to urinate, passing only a small quantity each time; marked irritability of bladder, with bloody urine. May be passage of calculi with pain extending to the back or to the genitals.

Respiratory Organs.—The action of Nux on the respiratory organs is comparatively limited; yet it should be thought of in cases that have been previously dosed with crude drugs, or those who have acquired diseases of the lungs through a life of dissipation and exposure, which results in a complicated condition. Nux may be indicated in asthma which is always worse at 3 A. M. or with morning aggravation, with usual agonized breathing and great irritability on slightest provocation. A constant, **dry cough**, worse in the morning and **from any mental effort**, is often relieved by Nux vom.

Neck, Back, Extremities.—Lameness in muscles of neck or wry neck from cold. **Lumbago**, worse at night. Back feels weak, lame and tired; worse in morning. **Legs feel unsteady and weary**; walking seems irksome. **Inclination to sit or lie down**, after moderate exercise. **Twitching of muscles** amounting to spasm and not confined to extremities, but discernable in any part of body, as in tetanus or chorea.

Sleep.—Uncontrollable drowsiness during the day and evening; but wakeful after midnight, especially after 2 or 3 A. M.; with feeling in morning of **unrest and fatigue** so great as not to be easily overcome. The mental and physical derangement for which Nux is

often curative is generally followed by wakefulness as a result; hence the selection of Nux for sleeplessness must always be based upon the condition and history of the patient as a whole. The same principle is axiomatic in all genuine homeopathic prescribing. The comprehensiveness of Nux vom. results in some similarity to many other remedies, in some particulars at least. However like all other remedies it has a well defined sphere of action all its own,—and the guessing prescriber will fail with Nux if due regard is not paid to the well known and authenticated indications of this very useful remedy.

Conditions.—Aggravation; after prolonged drugging stimulants, dissipation, loss of sleep; 3 A. M. and in morning generally; mental exertion and sedentary habits; coffee, tobacco and high living, over-eating.

Better, in evening; at rest.

Compare: Bry., Lyco., Cham., Coff., Ign.

Clinical.—Indigestion in its many forms and causes, gastritis, constipation, and dysentery often find a remedy in Nux. Headache from catarrh or dissipation especially where the mental symptoms correspond. As has often been observed, Pulsatilla is generally a “woman’s remedy,” so Nux. for obvious reasons may be called the “man’s remedy.” Look well to the cause of illness when Nux. is being considered.

PHOSPHORUS.

GENERAL ACTION AND USES.

Phosphorus, like several of our most useful drugs, is a virulent poison. Its action on the entire mucous membrane of the respiratory and alimentary tract is such as to cause acute inflammation and finally destructive processes and hemorrhage. It disorganizes the blood and produces fatty degeneration of the heart and liver. Phosphorus is useful for exhaustion, emaciation and persistent bleeding from small, trifling wounds. Often in cough and hoarseness, in the second stage of pneumonia and bronchitis. Incipient tuberculosis, with frequent persistent hemorrhages from the throat and lungs. Weak, fatty heart, chronic diarrhea and conditions where emaciation and weakness are conspicuous. Phos. acts most favorably on persons who are of slight build, tall and slender, such as are predisposed to lung and tubercular diseases.

GUIDING SYMPTOMS.

Mind and Head.—Mental and physical weakness with disinclination to exertion. Apathy and dread of conversation. Some forms of insanity or softening of the brain, with mental depression and melancholy. Tired feeling in brain with vertigo worse in the morning. Heat, pain and pressure in the head, following mental strain. Falling out of the hair, which seems dry and lifeless.

Eyes and Face.—Often useful in disease of the eye, cataract and disease of the optic nerve. **Black, float-**

ing spots before the eyes. Sight dim at night with green halo about the candle light. Face pale, ashy, with puffiness about the eyes. **Circumscribed redness in one or both cheeks.** Swelling and disease of the lower jaw-bone.

Nose and Ear.—Hearing difficult. Swelling of the nose with much dryness and obstruction, **frequent bleeding.** Disease of the bones of the nose with catarrhal discharge.

Mouth.—Gums diseased and bleed easily. **Dryness of tongue, mouth and throat** with burning sensation and **thirst for cold water.**

Stomach.—Regurgitation of food by mouthfuls without nausea. (Bry.) **Thirst for cold water which is vomited as soon as it becomes warm.** (Ars.) Gastritis, with pain and burning (Ars.) Sense of **weakness and goneness** in the region of stomach and **abdomen.** Often palliates suffering in ulcer of the stomach.

Abdomen and Stool.—Constant sense of **weakness and goneness in abdomen,** especially in feeble persons with **chronic diarrhoea** and disease of the bowels. May be some distention and coldness with pain from flatulence. Chronic diarrhoea. Stools watery, copious, **painless, worse in the morning.** May be undigested, bloody or greenish mucus. After stool, **exhaustion** and sense of “all goneness” in abdomen. May greatly palliate in cases of advanced chronic disease when the above characteristic symptoms are present.

Urinary and Sexual Organs.—Urine bloody; menses

too profuse or too prolonged; especially in feeble, anemic women at climacteric period, who are despondent and full of mental and physical weakness.

Respiratory Organs.—**Hoarseness** or loss of voice with dry cough either from cold or from prolonged loud talking, generally worse evenings and from talking or laughing. The larynx feels raw and sensitive to cold air, (Hepar, Rumex.) which increases the cough and hoarseness. **Tightness** and oppression across the chest with suffocated feeling and cough which is much worse from lying on left side. Bronchitis or pneumonia with rapid breathing, bloody sputa, oppression and weakness. Heart action often irregular with a weak, frequent, small pulse. Phosphorus often useful after **Aconite** or **Bryonia**, and when hepatization has taken place. Guiding symptoms must be regarded, whether about the chest, face, tongue or elsewhere, all having value in accurate prescribing, regardless of the organs involved, or the name of the disease.

Back and Extremities.—Sensitiveness and burning along the spine. Numbness and weakness of the extremities with pain as in neuritis, disease of the bones and ulcers that bleed on the slightest touch or irritation.

Skin, Fever and Sleep.—Skin often pale, waxy. Small, livid purple spots beneath skin. The slightest injury persists in bleeding. Fever of low or hectic character as in tuberculosis, or chronic disease of the lungs and bronchi. Fever may be marked as in typhoid

pneumonia, with **one** or both cheeks bright red, tongue and mouth dry, craving cold water. Perspiration with exhaustion and diarrhea. Inclined to sleepiness during the day, with wakefulness at night, especially **before midnight**.

Aggravation.—From lying on **left side**, getting wet. Worse morning and evening, from using too much salt, from use of voice, cold air.

Amelioration.—From lying on right side, from cold food or water. Phos. has always been much used in diseases of the respiratory organs, not as a routine remedy, but because of the definite guiding symptoms which are so often present in colds, laryngitis, bronchitis and pneumonia. **Phos.** in some respects resembles Ars., yet the mental symptoms, time of aggravation, etc., are quite opposite.

Compare: Ars., Ceba., Lyco., Sepia., Sul.

Clinical.—Phosphorus is one of the oldest but not one of the most frequently used remedies, however it has a well defined sphere of action not filled by any other remedy. The clinical features of Phos. are sufficiently set forth under the head of Outline of Action and Uses.

PODOPHYLLUM.

(May-Apple.)

GENERAL ACTION AND USES.

The stomach and bowels are markedly disturbed by Podophyllum. In palpable doses it resembles the Mer-

curials in its action on the liver and salivary glands. Few remedies are more efficient in painless cholera morbus and cholera infantum. (See Verat.)

GUIDING SYMPTOMS.

Vertigo and headache in morning. **Rolling of the head** from side to side in the case of children, with diarrhea and threatening brain involvement. Tongue coated white, with **much saliva**, foul taste and odor. (Merc.) Difficult teething with grinding of teeth and rolling of head, especially in infants and young children with diarrhea or cholera infantum.

Stomach and Bowels.—Nausea and vomiting mucus, green watery fluid, and bile. Acute indigestion with **constant gagging** but cannot vomit. In jaundice with marked inaction of the liver,—**light clay-colored, chalky stool** and high-colored urine. The stool in summer-complaint is generally watery, **copious and painless**; sometimes light color or yellowish, generally **very offensive, even like carrion**. Worse in the morning or at night, and during hot weather. After stool there is often exhaustion, even fainting, with constant sense of goneness and emptiness over the region of the stomach. The **gagging or empty retching, the painless, watery, offensive stool, with rolling of the head**, form a combination of symptoms often seen during the period of teething, attended with more or less serious bowel complaints. Podo. is surely indicated in such cases and prompt relief will follow its administration. In some cases of torpid liver and jaundice, the **lower triturations, 1st to 3rd decimal**, seem to

have been most efficient. In all others cases the 6th., 30th. or 200th. have proven far preferable.

Compare: Merc., China, Ars., and Ipecac.

PULSATILLA.

(Wind Flower.)

GENERAL ACTION AND USES.

Pulsatilla is pre-eminently a woman's remedy and especially for gentle, mild, yielding dispositions, the opposite of Nux and Cham. Instead of becoming irritable and impatient over trifles, the patient is given to tears and sadness, (Ignatia.) Puls. has a most extensive action on the mucous membrane, especially of the nose, mouth and stomach. Its fever symptoms are slight, with little or no thirst. The "guiding symptoms" will show how it may be frequently most useful in menstrual derangement, especially of young women. For indigestion, this remedy has a large sphere of action and needs only to be selected with reasonable care, to demonstrate its great every-day value. In some cases if neuralgia and rheumatism characterized by constant shifting of pain from one part to another, it often proves curative. The Pulsatilla patient longs for fresh air which ameliorates, whereas the hot, indoor air aggravates all symptoms. Persistent chilliness, chilliness with the pains. Often useful in measles, after Aconite. After eating fat pork or rich food, with symptoms of acute indigestion following.

GUIDING SYMPTOMS.

Mind and Head.—Timid, tearful and irresolute. Easily discouraged, full of care, craving sympathy and weeping over trifles. Mental and emotional disturbances growing out of some derangement of the menses, especially in young women or those passing through the climacteric period. **Vertigo** with pain in forehead and side of head, worse when lying down and in warm room. The symptoms of "Mind and Head" are all better in the open air, and worse towards evening. Headache and vertigo caused by indigestion, with bursting, throbbing pain worse from stooping. Confusion of head after night-watching, dissipation or emotional excitement.

Ears, Eyes and Nose.—Pain, throbbing and pressure in the ear with threatening abscess from cold in head and throat. Discharge of pus from the ear with deafness. All symptoms apt to be worse at night or towards night. Eyes inflamed, with bland discharge after measles and catarrhal colds. Dimness of vision on rising, with dizziness. **Styes**, with swelling of lids and free lacrymation. In colds and catarrh of the nose bland, non-irritating discharge, Puls. is one of our best remedies. **Stoppage of nose** at times, and later a free discharge of yellow or greenish mucus, with loss of smell and some soreness of the nose. All worse in hot room and generally worse towards evening.

Mouth and Tongue.—Toothache relieved by cold water and aggravated by anything warm, worse towards night. (Bell. and Coffea.) **Greasy, foul, bad**

taste in mouth in the morning, as from deranged digestion. Tongue coated with thick, yellowish-white, slimy mucus, worse in the morning and after eating fat, rich food and pastry. Thirst is rare in a Puls. patient.

Stomach.—Very frequently used in disorders of the stomach. Craving acid and refreshing things, with aversion to fat food which has been eaten too freely, causing indigestion. Some pain and discomfort an hour after eating, particularly rich pastry, or ice-cream; with distention and flatulence. With the acute derangements there is seldom any thirst, as in the case of *Ars.*, neither the nausea and vomiting in such a persistent degree. Some nausea, with disagreeable risings of food and drink.

Abdomen, Stool and Urine.—Distention and rumbling in abdomen with intestinal indigestion from fat food, ice-cream and fruit. Cramping, cutting pain low down in abdomen in painful menstruation. Stools watery, worse at night or very changeable, no two alike. After fruit and rich food. External or internal piles that become very painful and sore, with much itching about the parts. The nightly diarrhoea, from any cause, is characteristic of this remedy. *Pulsatilla* has often cured that troublesome weakness of children, involuntary micturition at night in bed, also the same when coughing. (Phos.) Urine is usually profuse and voided frequently, with some tenderness over the bladder but no pain.

Sexual Organs.—Very sure remedy when the

menses have been suppressed or interrupted by getting the feet damp or wet; also from other causes when the patient complains of pain and cramps in abdomen, with constant chilliness and weeping. (See Cimicif.) The pains of labor characterized by the above symptoms are often palliated and the delivery hastened by a few doses of this remedy.

Respiratory and Heart.—Cough towards evening or at night, worse on lying down. Cough with evening hoarseness. Expectoration of greenish yellow mucus. Cough loose during day and tight at night. Has to sit up to quiet the cough. Palpitation and suffocation when lying on left side. Heart action disturbed from indigestion after fat, rich food with much flatulence. Feeble circulation and constant chilliness with all complaints; yet patient must have doors open to get fresh, cool air.

Back and Extremities.—Muscles of the neck and back feel lame, as if sprained, especially through small of the back extending to the hips. Useful in the back-ache of women suffering from uterine and menstrual disturbance. Swelling and pain in knee joints. Pain in joints of feet, especially the heel.

Skin and Sleep.—Itching over the whole body, worse on getting warm in bed. (Sul.) Eruption resembling measles. Sleepy in afternoon and evening but wakeful at night, restless and tossing about. Dreams full of fright and excitement.

Fever.—Puls. is not often useful in fever, except such as may arise from indigestion or catarrhal colds.

There is often chill or chilliness with most of the ailments for which **Puls.** is indicated but, as a rule, there is slight if any fever, after the chill. Very seldom any thirst after the chill or during the fever. The ever-changing symptoms, the **shifting pains from one part to another** are general characteristics of this remedy which, combined with the more definite guiding symptoms, affords curative results. The causes of aggravation and amelioration are marked and different from any other remedy, and successful prescribing must take both into consideration.

Conditions.—**Aggravation**, from rich fat foods; towards evening; in warm closed room.

Amelioration, In open air; in morning; lying on painful side (Bry.) Cold applications.

Clinical.—With the exception of Acon. and Nux. no remedy is so often prescribed as Puls., and for the derangements of the stomach none is so often given as Puls. The guiding symptoms are definite. Very often indicated in the disorders of the female sexual organs. See Guiding Symptoms. Catarrh and the after effects of common cold often makes a quick finish under the use of Puls. The mental symptoms and temperament should never be overlooked.

RADIUM BROMIDE.

GENERAL CHARACTERISTICS.

The history, properties and provings of Radium form a subject of absorbing interest. Dr. Dieffenbach of New York City, a high authority, gives a summary

of some of the physical properties of the radium compounds showing their radio-activity and also their property of rendering other substances radio-active.

He states as follows: "They give off heat; they give off light; their rays penetrating opaque bodies; they give off a gas or emanation. Radium compounds also have the property of rendering **other substances radio-active** if brought in contact with them. This is a very important property which has opened up a new world in physics and chemistry."

Although a comparatively new homeopathic remedy it promises to be a most useful one for a class of diseases most difficult to cure. In rheumatism and kindred diseases, gout and lumbago, also some of the worse forms of skin diseases and cancer it has already accomplished many cures.

The clean-cut homeopathic indications for Radium are very similar to *Rhus. tox.* Verification of the most excellent proving are in order. My experience with the 12/x and lower potencies has resulted in the production of many of the radium symptoms recorded in the provings. Hereafter I shall incline to make more frequent use of the 30th and higher potencies.

The foregoing furnishes only hints of this unique and as yet undeveloped remedy. Adhering strictly to my original plan and statement in preface I have included only such remedies and their indications as have been thoroughly tested in actual practice. Radium from present indications will soon attain such a place.

RHUS TOXICODENDRON.

(Poison Ivy.)

GENERAL ACTION AND USES.

The first and most noticeable effect of *Rhus tox.*, is upon the skin and superficial tissues, especially about the face and hands; producing an inflamed, scarlet appearance not unlike scarlet fever or erysipelas. On the deeper tissues, muscles and ligaments it develops a condition closely resembling acute rheumatism, for which it is often most useful. Also in la grippe and severe colds with the characteristic lameness and pains. (See "Guiding Symptoms.") In typhoid fever, Hahnemann, one hundred years ago, was first led to use *Rhus tox.* and *Bryonia*, with curative results at that time unknown. It has stood the test of a century, and the indications which led him to give it will always remain our guide to its selection. Clinical facts of importance show that *Rhus* is of great value for ailments following severe strain of muscles and ligaments; also for bad effects from working in water or from getting wet. Erysipelas and eczema, especially of the vesicular variety, have found their cure in *Rhus tox.*

GUIDING SYMPTOMS.

Mind and Head.—Low, mild delirium about **hard work and long journey**. Dull of comprehension and slow to reply, as in early stage of typhoid. Vertigo when rising and beginning to move. (Bry.) Dull headache, pain in back of head and neck. Meningitis

in eruptive fevers, especially scarlet, with redness of the surface, **great restlessness** and mild delirium. **Erysipelas** of the scalp and face.

Eyes.—Eyelids swollen, **blister-like**, with **itching** and **burning** as in erysipelas. Inflammation, redness and mucous discharge. Diseases of the eye in rheumatic subjects, especially iritis. All symptoms worse from getting wet. **Eyeballs lame and sore.**

Ears, Nose, Face.—Pain in ears with discharge of bloody pus. Tip of nose red and puffy. Nosebleed. Coryza with sneezing and cough **after getting wet.** Face fiery red as in scarlet fever or erysipelas. (Bell.) Intense itching and burning of face, which may be dotted with **fine blister**, eczema-like eruptions. Swelling of face, swelling of parotid and sub-maxillary glands and about the ear.

Mouth and Tongue.—Fever blisters about the mouth and chin. Stiffness of the jaw, teeth feel too long, and sore. **Tongue red, dry** and cracked or coated **except at tip, which is red**,—the latter very characteristic. Mouth apt to be dry with thirst in erysipelas and low fevers.

Throat.—Sore throat after getting wet, or in cases of scarlet fever when general symptoms correspond. Generally swelling of the glands and face, with drowsiness, restlessness and delirium. (Bell., Apis.) threatening typhoid.

Stomach and Abdomen.—Nausea and vomiting. Much thirst for cold drinks, craving beer, oysters and

milk. Soreness in abdomen as if beaten, in threatened typhoid. Some distention and pain in abdomen, especially the right side as in appendicitis, or impending typhoid.

Stool.—In acute disease where Rhus is indicated there is apt to be diarrhea. (Ars.) Bry. is the opposite. Stools bloody, watery or bloody mucus. May be pain in back and hips with great restlessness, and fever.

Respiratory Organs and Heart.—In typhoid pneumonia with a dry, teasing cough. Pneumonia after getting wet or working in water, with rheumatic pains and great restlessness. Hoarseness and cough worse in damp weather, which aggravates nearly all the symptoms of Rhus tox.—la grippe with cough, aching in back and limbs,—spitting of blood.—Heart symptoms from violent overexertion, or in rheumatism with aching in left shoulder and arm, worse at night, cannot be quiet or sleep; all worse in damp weather and after getting wet. Pulse fast, symptoms better on taking exercise. Frequently worse after having been long quiet or on first beginning to move, but better after continued exercise.

Neck, Back and Limbs.—Stiffness of muscles of neck. Backache which is better from lying on something hard or from firm pressure. Acute affections of the spine from getting wet or lying on damp ground, and for acute rheumatism from the same cause. Sciatica with acute pain and numbness of limbs worse in damp weather and at night. Bad effects from strain by lifting. In the Rhus tox. patient the restlessness

of the extremities is marked. Cannot remain quiet. Extreme restlessness both mental and physical. Cannot lie or sit on one position because of an irresistible desire to shift about, **tossing in bed or walking about**, which gives momentary relief; after which the same restlessness returns. Swelling of ankles. Muscular pains in back and limbs from working in water. Pain and stiffness on beginning to move, but **better from continued** exercise. Worse in damp weather a reliable characteristic of Rhus.

Skin.—When there is intense itching and burning of the skin on any portion of the face or body, especially if it presents fine, watery vesicles with roughness and fiery redness; Rhus is well indicated. In erysipelas large blisters may form, especially about eyes and nose. In eczema with yellow, watery discharge, which later forms dry scabs covering the face, ears and scalp. The skin symptoms are generally worse from heat and from application of water or exposure to cold air. (Sul.)

Sleep and Fever.—Often useful in sleeplessness with vivid dreams of fatigue and hard work. Restless, cannot keep the limbs quiet, constant tossing about, with more or less fever. Streaks of chilliness alternated with heat, run through the whole system.

Conditions.—**Aggravation**, after getting wet; in damp rainy weather; at night during rest and on **beginning to move**.

Amelioration, when moving about; from dry warm weather, warm applications, changing position.

Compare: Acon., Ars., Bell., Bap., Bry., Gels., Apis., Arn., Lach.

Clinical.—The clinical features of this valuable remedy are sufficiently set forth in the general outline. There is no disease for which Rhus. may not be indicated and curative if only the sharp, well defined indications are present. Making mention of certain diseases for which remedies are most used is by no means intended as any limitation on their use but rather as suggestive and as a time saver and aid to the less experienced prescriber.

RUMEX CRISPUS.

(Yellow Dock.)

The proving and use of Rumex is somewhat limited. Its most frequent and successful use has been for a "troublesome cough," usually laryngeal or bronchial in origin and far more prevalent during the cold months of the year.

GUIDING SYMPTOMS.

The cough is worse from cold open air, better from warm room and at night. Cough ceases after covering the head with the bed clothes. (Hepar.) Cough generally dry, often spasmodic and usually worse in the evening and after lying down. Constant disagreeable tickling sensation in pit of throat and upper bronchial region, worse from cold air or touch. Here, as with other remedies, the conditions of aggravation and amelioration are important and often furnish a "key-note" to the remedy having all the other indications.

SEPIA.

While the provings of **Sepia** are very complete, it is doubtful whether it has been used as often as it should have been ; at least the author pleads guilty. All provings and its use in practice demonstrate its great value in disorders of the female sexual organs, especially some forms of displacement. Many of the symptoms of the mind, back, abdomen and pelvis are quite similar to **Lili tig.** and **Helon**, both newer remedies, yet well tested and not found wanting. The mental symptoms of each are characteristic.

GUIDING SYMPTOMS.

Apathy, depression, forebodings and irritability. The **complexion**, especially about the eyes and cheeks, is often **brownish yellow**, sometimes called "**liver spots**", which with tenderness and distention over the stomach and liver has led to the use of **Sepia** in chronic diseases of these organs, and with good results. (**Lyc.** **Sul.**) **Sepia**, like **Igna.**, **Sul.**, **Phos.** and **Podo.** produces a feeling of great **weakness**, **emptiness**, or an "all gone" feeling over the pit of the stomach such as often occurs in disorders of the uterus and nervous system.

In displacements and disorders of the uterus, with backache, bearing down or pressure in the pelvis as though everything would issue downward, especially on walking or standing; **Sepia** together with **Lili-tig.** and **Helon** should be considered, also **Bell.** Painful menstruation, leucorrhœa and irritation of the bladder are generally present. **Sepia** is pre-eminently a

woman's remedy and in chonic cases, if well selected, will result in a permanent cure.

SILICEA.

GENERAL ACTION AND USES.

Upon the mind and nervous system, its action is quite similar to Nux and Ign. Upon the bones, skin, and glandular system, similar to Hepar Sul., Calc. carb. and Phos. Where there is profuse perspiration and prostration, especially in connection with supplicative processes as in tuberculosis, abscesses, felon, etc., Silicea may be preferred to Hepar. Minor symptoms and conditions of the patient should facilitate the choice.

GUIDING SYMPTOMS.

Mind and Head.—Very sensitive to noise or any annoyance, becomes peevish and irritable. Difficult to think, with brain-fag and great sense of weariness. Severe headache, often better from warm application or binding head tightly. Pain often begins in base of brain and extends over the head to the eyes.

Face, Etc.—Chronic catarrhal conditions, with tendency to suppuration in or about the eyes or ears. In quinsy and diseases of the teeth and gums, especially dental abscess, Silicea has rendered valuable service.

Abdomen and Bowels.—Distention with **chonic constipation** and diseases of the liver. Swelling of the in-

ginal glands. Rectum feels paralyzed, with very little power to expel stool, which is often associated with contracted sphincter. Piles and even fistula are indications for Silicea.

Respiratory Organs.—Useful in second stage of laryngitis, bronchitis, pneumonia and tuberculosis, when the expectoration becomes thick, yellow and purulent with loose cough generally worse at night and on lying down. The general symptoms of the patient, **perspiration**, **emaciation**, and prostration must be considered here.

Extremities and Skin.—Defective finger nails with tendency to inflame and supurate on each margin. Pain in tip of finger threatening suppuration. Pain and weakness in hip and knee. **Chronic and profuse sweating of the feet** with carrion-like odor and worse every evening. Ulcers and injuries of the skin heal slowly and inclined to supurate. (Hepar.) Abscess and felon may call for Silicea.

Chill and Fever.—Much inclined to chilliness, cold hands and feet, general **lack of the normal heat of the body**. Inclined to chilliness at night preventing sleep. Fever of hectic character from impending or advanced suppuration, followed by persistent perspiration worse at night. May be useful after impure vaccination.

SPONGIA TOSTA.

(Roasted Sponge.)

GENERALITIES.

Clinical experience with *Spongia* in cases of croup has been handed down from generation to generation. The indications for its use from the first were reliable, and essentially the same symptoms form our guide to-day. The same is equally true of all our well proven remedies which have been in use from the days of Hahnemann, who of all provers was the most capable and diligent. In acute diseases of the larynx, especially croup, *Spongia* holds an important place. Other remedies may precede or follow its use in a case of croup. In the first or the febrile stage, *Acon.* may be better indicated than *Spongia*, and later on *Hepar* may claim the preference over either *Acon.* or *Spongia*. The more accuracy in differentiation the quicker the cure.

GUIDING SYMPTOMS.

The cough or croup that calls for *Spongia* is usually void of phlegm, is **dry and barking**, often **suffocative**, worse on inspiration. (*Acon.* worse on **expiration**). Sense of constriction in larynx with great hoarseness. Breathing rapid and difficult as though a **plug were fast in the larynx** preventing passage of the breath. The **first symptoms**, (cough and suffocation), may rouse the patient from sleep. There is very seldom any sore throat in a *Spongia* case.

Clinical.—The practice of alternating *Acon.* and *Spongia* in cases of croup has long been a custom with some and

condemned by others. If the indications are clear for either remedy it is well to give it alone, although I have found prompt results following either plan.

SULPHUR.

GENERAL ACTION AND USES.

Sulphur is one of the first remedies to be thought of in all cases of chronic disease. In acute diseases Sulphur may be called for, especially in scrofulous subjects or where the well-chosen remedy fails to give the usual results. In the case of suppression of an eruption by external treatment or otherwise, resulting in acute aggravation of chronic diseases, it often restores the patient by returning the eruption to the surface. As a deep-acting, constitutional remedy, it has no equal, and in the treatment of both acute and chronic diseases it is indispensable. Its very wide range of action becomes most obvious when one studies the following "guiding symptoms."

The more visible effects of Sulphur are manifested by its action on the skin, glandular system and mucous membranes. Sulphur reaches out to help those of weak, faulty, defective constitutions as well as those who have been the victims of maltreatment. It matters not how long the disease has existed; if only Sulphur is selected according to the guiding symptoms, it will cure the patient. Of course due time must be allowed; for as a general rule the more chronic the disease the greater the time required for a real cure.

GUIDING SYMPTOMS.

Mind.—The disposition of the Sulphur patient is generally irritable and depressed, seldom happy or agreeable; impatient and easily vexed; low spirits, taking pleasure in nothing; religious melancholia. Inclined to be selfish and indolent.

Head.—Heat of the head and coldness of feet. (Bell.) Fullness and heaviness of the head with some vertigo. **Heat on top of the head** with pressure and sensitiveness of parts (Lach.) Eruptions and dryness about the scalp with falling out of the hair. Acute brain diseases from the sudden disappearance of an eruption. (Bry.) Symptoms often aggravated by washing parts. **Infants** or children who always become furious on putting them in the bath.

Eyes.—Redness of the lids with discharge of mucus and tears. Styes and ulceration of the lids with much itching and burning. (Puls.) Chronic catarrhal inflammation of the eyes with general indications for Sulphur. Symptoms worse from bathing the eyes, also from bright light and at night. Vision dim, with dark spots floating before the eyes. (Phos.) A few doses of Sulphur will very often start improvement, which has ceased under a well-chosen remedy, after which other remedies act as usual.

Ear and Nose.—Discharge of pus from ear or bad effects from sudden suppression of the same. Roaring in the ears with rush of blood to head worse at night. Hardness of hearing with dryness of the ears. Itching and dryness about the nose, with stuffed feel-

ing, which is worse indoors. Offensive odors from nose. (Puls.)

Face, Mouth and Throat.—Eruptions on face and forehead, mixed with fine, black pores of the skin. (Hep.) Swelling about the face, especially the lower lip. (Hep.) Swelling of the glands about face and neck, with pale, sick look as from long illness. Lips are very red and often swollen. The child is voracious, crowding everything into the mouth. Tongue coated whitish, with red tip and borders. (Rhus.)

Stomach.—At 11, A. M., patient has faint all-gone feeling in stomach, which is not a sense of hunger. At times, ravenous hunger but after eating a small quantity a sense of fullness prevents eating more. (Lyco.) Nausea, fullness and heaviness about the stomach.

Abdomen.—Distention with much rumbling like fermentation, in the abdomen. (Lyco.) In constipation and chronic disease of the liver, Sul. is often indicated. Soreness over the abdomen, with much flatulence, occasionally diarrhea and hemorrhoids.

Stool or Rectum.—A form of chronic diarrhea, painless, generally worse in the morning driving the patient out of bed, sometimes called the "army diarrhea," has very often been quickly and permanently cured by Sul. Stool watery, bloody, mucous and offensive. Distressing itching and redness about anus, especially with children. In some cases of chronic constipation when general symptoms point to Sulphur, a permanent cure may be anticipated.

Urinary and Sexual Organs.—Chronic weakness of bladder, with involuntary urination at night. Disease of kidney with frequent, painful, burning urination. Violent itching and burning of the surface, worse after bathing. Suppression of menses in feeble women, with congestion of the brain followed by depression and irritability.

Respiratory Organs and Heart.—Respiration embarrassed; wants all the windows open. (Puls.) **Second** stage of pneumonia when indicated remedies are slow to act, or the case comes to a **stand-still**. The head is hot; hands and feet cool. The dry cough is constant. A few doses of **Sul.** will promote perspiration and reduce hepatization; after which other remedies may be more beneficial. The cough may be dry, or there may be much rattling of mucus. Pressure and oppression over the chest. (Pho.) May be useful in incipient tuberculosis following after neglected pleurisy or pneumonia. Sharp pain in region of heart, worse at night with craving for fresh air. (Puls.) Circulation not normal, head hot, feet and hands cold.

Extremities.—**Burning in the feet and hands at night**, has to put them out of bed. Violent **cramps** in muscles. Rheumatic pain in limbs and back. Most symptoms of Sulphur are **worse from standing** and better from open air. Sulphur patient often stands, walks and sits in a **stooping position**.

Skin.—Sulphur produces and cures a great variety of eruptions, all of which are generally worse from bathing, and attended with itching and burning which

are worse when the air strikes the parts or when getting warm in bed at night. Eruptions, pimples and black pores on the face and forehead of young girls. (See Hepar.)

Sleep and Fever.—The sleep is broken by frequent starts. (Cina., Bell.) Vivid dreams; blood rushes to the head after wakening, and no more sleep. The fever is generally that which arises from organic disease or local cause, and is not a marked feature of this remedy. The underlying causes, when sought out, may be found to call for Sulphur. In chronic diseases where the history of the case is not clear or sufficient, and where no other remedy is plainly indicated, it is well to give Sul. If it fails to make a complete cure, it will not fail to prepare the way for the use of other remedies. If improvement follows the use of Sul. it should not be interfered with by giving another remedy, neither should it be repeated too often. Improvement in chronic cases is generally slow, but the observing, experienced prescriber soon learns to be satisfied with that, and will hesitate to take any action that may interfere with the same.

Conditions.—Aggravation, when standing, at rest; 10 A. M.; washing, bathing, (child) warmth of bed; suppressed eruptions.

Compare: Puls., Calc., carb., Hepar., Lach.

Clinical.—A single dose of the higher potencies of Sul. is my way of using this unique remedy. It should be given oftener in the beginning of chronic cases, and as a finisher in acute ones.

TARTAR EMETIC.

(Antimonium Tartaricum.)

GENERAL ACTION AND USES.

The use of this remedy has been confined largely to diseases of the respiratory organs and generally to the later stages where conditions often become alarming. This remedy like Carbo. veg., Arsen., China and Verat. alb., has often come in at the last hour and rescued the patient from a most precarious condition.

GUIDING SYMPTOMS.

The Tartar emetic patient, whether expectorating or not seems to be distressed with a constant rattling of phlegm in the throat and bronchi, such as is apt to occur in the second stage of bronchitis or pneumonia. In the more severe cases there may be choking and suffocation with pale, cold face, even livid, with cold perspiration, a weak and rapid pulse with general exhaustion approaching collapse. Important in diseases of young children, in whooping cough or asthma, where the mental symptoms often resemble those of Anti. c. Other symptoms of minor importance are produced by Tart. em. Drowsiness, exhaustion and free perspiration; tongue coated, pasty, thick white or dry, red and dark brown, as in typhoid pneumonia. Thirst for cold drink, acids and fruit. Cough and gasping alternately with shortness of breath, obliged to sit up. The action of Tart. em. (like Ars., Carbo. veg.) is generally very prompt. For every emergency, homeopathy seems furnished with "emergency remedies," provided they are rightly selected.

VERATRUM ALBUM.

(White Hellebore.)

GENERAL ACTION AND USES.

Veratrum produces such a sudden and profound prostration as to closely resemble the collapse which often occurs in cholera and cholera morbus. The heart action is very feeble, the skin becomes cold and bathed in cold perspiration, especially on forehead and face. Vomiting and purging with colic and at times cramps in muscles. Veratrum has established its curative virtues in many epidemics of cholera, cholera infantum and cholera morbus. To be thought of in ptomain poisoning, malignant whooping cough, painful cramps, dysmenorrhœa with diarrhœa. See guiding symptoms for specific indications.

GUIDING SYMPTOMS.

Mind and Head.—Excitement, raging and delirium with desire to escape. Malancholia with sullen indifference. Pain seems to drive to madness, (Cham.) with cold sweat on forehead. In some forms of acute insanity, and puerperal mania, Verat. has proven a valuable remedy. Some vertigo and pressure about the brain, with sensation of ice on the vertex.

Face.—Pale, sunken, anxious, (Ars.) bluish cold, with cold sweat, especially on the forehead. The pinched features and cold sweat are often present in sudden attacks of vomiting and purging. (See Ars., Camphor and Carbo veg.) The face symptoms of Verat. presents a fair picture of cholera in its various forms.

Mouth and Stomach.—Tongue pale and cold in collapse. Dryness of mouth, craving for water. (See Acon., Ars.) Occasionally great hunger and thirst, craving juicy things. **Vomiting of food and water** soon after swallowing the same, with continued nausea and gagging, (Ars.) profuse, watery mucus and blood with distention of the abdomen, cold sweat and utter exhaustion. (Ars.) Nausea and vomiting increased by motion or by drinking.

Abdomen and Stool.—Severe, sharp, cutting, colic pain in abdomen (Colocynth) with distention and tenderness. Griping and cutting pain soon after eating with coldness in abdomen. **Stool often thin like rice-water**, as in cholera, always profuse and frequent, with exhaustion and cold sweat. Stool painful with cramps, worse after eating fruit and drinking cold water, and at night. Exhaustion and involuntary stool. Great exhaustion to faintness after stool, which is generally copious.

Sexual Organs.—Severe cramps and copious, watery stool before or during menses. May be vomiting and cold perspiration.

Respiratory Organs.—Some severe forms of whooping-cough accompanied by vomiting and diarrhea, with sense of exhaustion after such paroxysm with choking and blue face, cold sweat on forehead, constriction about the larynx with suffocated feeling before and after cough. In bronchitis of old people, with much phlegm on chest and cold sweat. (Tart em. and Carbo.

veg.) The pulse weak, almost lost, rapid and irregular, especially after any exertion. (Ars.)

Fever and Chills.—Much chilliness predominates, creeping from the head to the toes, with thirst during the chills. (Ign.) Coldness of the skin with cold perspiration. Face is cold and distorted. Chilliness in the back. Hands and feet cold. Heat follows or alternates with chilliness with much thirst through both. The chills and fever of Verat. are usually such as precede or accompany violent attacks of stomach and bowel trouble and, while they are to be regarded in selecting the remedy, they are of minor importance compared to the few characteristics or key note symptoms which run all through the provings of this remedy. The unmistakable exhaustion and collapse, the cold perspiration, the vomiting, purging, are safer and more reliable indications for the use of Veratrum. The action of Verat. is always prompt. When well indicated a single dose will often so change the condition for the better that a repetition of the dose becomes unnecessary.

Similar remedies: Ars., Carbo. veg., Camphor, and Tart. em.

Conditions.—Aggravation, from motion, drinking or eating (vomiting). After fruit and indigestible food (cholera morbus).

Amelioration, walking about and from warmth.

Compare: Ars., Ipec., China, Carbo. veg., Colo., Tart. em.

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