

by his enemies, defeat them ultimately with their own weapons, found a school of thought and practice in medicine, write a legion of books, etc. and yet make two fortunes in the practice of his profession.

Germany had shackled one of the most brilliant of her sons in every possible manner, had driven him from one city and one Kingdom to another, and had eventually buried him in a sort of hermitage in the small duchy of Anhalt Cöthen. From this obscure place he was brought into the very heart of European life and intellect and was permitted to practise without the imposition of any condition with which the German countries seemed to be pregnant and he was thus brought into immediate contact with his disciples not only in France, but from all European Countries, England and America.

( To be continued )

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### Syphilis : Its History, Symptoms and Homoeopathic Treatment.

DR. A. K. BHATTACHARJEA, CALCUTTA.

( Continued from Page 174 )

*Hepar Sulphur*—Chancreous ulcer on prepuce. Ulcer discharging bloody pus, smelling like old cheese with sensitive edges tingling, burning and pulsating sensations. The discharges may be corroding. It is frequently needed in cases where Mercury has been abused and Mercurio-syphilitic condition has been produced ; 200 potency is usually preferred.

*Hydrastis can*—Lotion is used, externally for ulcers with stringy discharge, the compound power of Calendula, Hydrastis and Boric acid is also used with great advantage.

Internally in 200 potency is also very useful in above conditions.

*Jucaranda*—Heat and pain in penis, phimosis, chancroid and itching pimples on glans. Prepuce painful and swollen.

*Kali-bichromicum*—Chancres ulcerating deeply. Ulcers with stringy or jelly-like discharge; ulcers with punched edges. Itching and pricking at the glans penis. 30 or lower may be used.

*Mercury*—Is the most important remedy in first stage.

"Where Mercury has not been previously employed we prescribe it for all sores which present an indurated base and margin, whether they secrete and are covered with a tenacious or thin offensive matter, and we should most unwillingly dispense with this valuable remedy in such cases, notwithstanding the bad repute it has acquired in the frightful effects which have so frequently arisen from its abuse in the hands of our allopathic brethren." The above is a quotation from Dr. Laurie's "Elements of the practice of physics, page 482," in Dr. Berjeau's book. Dr. Berjeau himself adds, "The more particular indications are spreading and deeply penetrating ulcers on the glans and prepuce or pale red vesicles breaking into small ulcers on these parts, the chancres bleed readily, are very painful, and secrete a yellowish white fetid pus, ulcers with inverted red edges and a cheesy bottom or circular ulcers with inflamed base, accompanied, in females with swelling of vagina."

Dr. G. Jahr gives it in the following terms. "The chief remedy is *merc* [viv. or solub.]. But in the *Primary chancres* cure is seldom accomplished by the high dilutions which often only aggravate the sufferings by irritating the nervous system." The most certain method of curing recent *chancres*, in the acute state, is to administer every

day, or, at least, every other day, a dose of one quarter of a grain of the 3rd trituration of *mercury*, until a perceptible amelioration takes place, without being influenced by the appearance of the ulcers during the first few days. *No recent chancre is healed without a previous aggravation of its symptoms* but on continuing the use of *mercury*, healthy granulations will, plainly be perceived at the bottom of the ulcers at the end of 8 or 10 days, [ an experienced eye will often detect on the 4th or 5th days, ], which will increase daily while, at the same, the ulcer will occasionally bleed, and the margins begin to be depressed.

"When the chancre has passed from the acute state to the *chronic* state, though it is still *primary*, it will be sufficient in the majority of cases, to administer three doses of the 3rd triturations of *merc.* at the interval of 48 hours, allowing the medicine to act after the 3rd dose without doing anything further. It is but seldom that it is found necessary to repeat *merc.* at the end of three or four weeks" Mercury has been acknowledged by all authorities as the most important remedy for the treatment of *primary lesion*.

Dr. Mc. Clelland's indications for the different preparations of mercury will be very useful and is quoted below :—

"*Mercurius sol.*—(Generally preferred to the *vivus*) this preparation seems accurately adapted to the typical Hunterian chancre, as well as to the development that follows. Thus we find Chancre, with indurated base and margin, induration of the inguinal glands. Excessive languor with fever and sweat which usher in the secondary symptoms. Erythematous and papular eruptions, ulcers in the throat etc. all of a milder type. The throat, at first dry and itching becomes filled with excessive secretion, the fauces and tonsils are inflamed, swollen and ulcerated. Rupia with violent itching, becoming worse in bed. Excoriated spots which bleed easily syphilitic maculæ,

pain in the bones with restlessness, worse at night. Exostosis, caries, necrosis. Emaciation with slow hectic fever. Swelling and induration of liver.

*Mercurius cor. Sub.*—(Merc. Cor.) this more active preparation of Mercury corresponds to a similarly acting syphilitic virus. The chancres are more inflamed and painful. The ulcers have a lardaceous bottom and secrete a thin ichorous pus. The bubonic symptoms are more acute and the secondary manifestations more prompt than usual in making their appearance. It is particularly useful in iritis and in affection of the conjunctiva accompanied by acrid discharges, in soft flat condylomata or mucous tubercles (Goullon used it as a wash for primary sore. Hofrichter recommends it in exostosis of the tibia, which advice, Jahr confirms and adds that he has found it of value also in exostosis of cranium. The swellings upon the tibia, are attended by sensations at night as if the bones would break. Muller and Yeldham both advise it in ulceration of the mouth and fauces).

*Mercurius iodatus flava*—the yellow iodide seems best indicated in painless chancre and where the glandular system is largely implicated. The inguinal glands are swollen, quite large, although not much disposed to suppurate. The tonsils are enlarged and the secretion of the throat is not so profuse, but rather tenacious. It is, perhaps, the best preparation when the testicles are involved. In the secondary and many of the sequellæ it is often better suited than either of the preceding. Helmuth prefers this form of Mercury to any other in the treatment of the early stage of the disease.

*Mercurius*.—the Chloride deserves more attention than it receives. It has been used in much as the same class of cases as the Merc. sol. and specially when the eyes and ears are implicated. The roseola is bright red. It acts

well in infantile syphilis when the symptoms are less violent than those which require the Bichloride.

*Mercurius Præ rub.*—The red præcipitate is called for where the chancre shows a disposition to become phagedenic, and the various ulcerative processes become destructive. (Jahr recommends the Merc. præc. rub. when the Merc. sol. does not seem to act with sufficient force. In old neglected Hunterian chancres, cartilaginous, violent red induration and swelling of the prepuce following the removal of Hunterian chancre by cauterization. Frinks recommends it for syphilitic destructions of the tonsils, fauces and palate, also for syphilitic exantheas, especially the tubercular and pustular forms for cutaneous ulcerations and osseous affections). Care should be taken not to continue lower too long.

*Cinnabaris*—This is one of the most useful of the mercurial preparations particularly in secondary and tertiary forms of syphilis. It is in those cases where there is what might be called a "sulphur substratum" that this combination of sulphur and Mercury is most curative. Chancres with hard bases in scrofulous individuals, the middle of sore becomes raised and fungoid. Indurated bubo, iritis with pains in supra-orbital region, commencing at the inner angle and passing around to the temple. It is suited to the whole range of syphilo-dermata. Circular ulceration of the skin, mouth and throat Jahr says that Cinnabaris forms the transition from the remedies for destructive syphilis to those for fungoid vegetations. He thinks it of value when the chancre is on the point of becoming fungoid and finds it of great use in neglected chancre if no Mercury has been used. Clotar Muller uses it in complicated cases of syphilis (scrofulosis and previous mercurialization.)

*Mercurius nitrosus*—Frinks recommends this remedy in the most inveterate and malignant forms of syphilis and Rammel has used it with success in the treatment of filiform

figwarts. The old school uses it as local application in scaly and tubercular syphilides.\*

*Sepia*—Indolent chancre, burning, itching and scurfy herpes præputialis. Eruptions on glans and labia. Chancres on glans and prepuce. Potency 6 or 30.

*Silicea*—Chancres with raised edges. Inflamed, irritable and painful chancres with discoloured thin and bloody discharge. No granulations formed in the sores or there are only very weak granulations. Painful eruptions on men's veneris. Moist or dry eruptions on genitals with intense itching. Potencies 3x, 30 and higher are used.

*Sulphur*—As an intercurrent remedy for chancres in unhealthy subjects is recommended by Dr. Berjeau, where the disease threatens to assume a bad type and particularly where the bottom of the ulcer is covered with the characteristic lardaceous secretion with discharge of fetid ichor, but it is usually in superficial ulcers with raised margins that its greatest results are manifested.

*Thuja*—Whitish chancres with hard edges. Chancres with splinter-like pain accompanied with gonorrhœa, Superficial ulcer with unclean base and itch violently.

( To be continued )

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In typhoid fever the first prescription is all important. If this be right the subsequent course is easy ; if wrong no subsequent skill or effort may be able to rectify the error. In no other disease is this more important. Let the physician, then, spare neither time nor pains to find the right remedy at first. Having found it, *keep to it*—change it for no other, but for the strongest reason, namely, *greater resemblance to the elements of the case*.—STUART CLOSE, M.D., from unpublished notes.