

was still very sensitive. From here he went West in a few days, was gone some two or three weeks, when he returned, suffering the worst torment, he said, that he had ever endured. But this time it was from a VERY EXTENSIVE ERUPTION UPON THE SKIN. Upon examination, we found it an eruption of very small vesicles at first, which soon became pustular, though none of them were larger than the head of a pin, and they stood so thick together that, as the points of them came off in the process of suppuration, the entire skin was abraded over large surfaces. His chest, back, shoulders and arms to the wrists, were almost one continuous raw surface, while the abdomen and legs were nearly half covered with the eruption, all itching, smarting and burning at times, he said, intolerably. Here, then, was the cause of all this man's sufferings for over half a century. When it was acting upon the mucous coat of his stomach which had been its seat for life, excepting the preceding nine or ten months, it caused dyspepsia primarily, and secondarily upon this, sick-headache; when it was transferred to the lung it seated upon and abraded the free surface of the mucous membrane of the bronchial tubes in that lung, which caused a waste of albumen from the blood, thereby leaving the blood-corpuscles in excess, and they congested the lung, resulting in an abscess which destroyed a portion of the lung, and then took on tuberculous action and became consumption. When it was driven out of the lung by curative treatment, it returned to the stomach and developed

the identical conditions there that it had before; and when, finally, it was driven out of here, by a continuance of the same curative means, it came upon the skin, and was there to all appearance radically cured in two or three months, with the same drug that had done all the rest, for from first to last we gave *nothing but Sepia, and this in no other potency but the 1200th*. Could anything show more clearly the terrible ravages of cutaneous diseases when they act internally? Could any case better illustrate the action of the law of Metastasis as we laid this down in our last number? Or, finally, could the results of medical treatment be more satisfactory than in this case?

If any of the details above narrated shall seem extreme, we can assure the reader that they have been prepared with care from a record made at the time, and that no error has been allowed a place among them.

DYSENTERY.

BY ROLLIN R. GREGG, M. D.

[This paper was prepared for, and read before the Erie County, New York, Homœopathic Medical Society, in the spring of 1866, and a copy requested for publication, but it has never before been published.]

(Continued from page 88.)

I now pass to the evidence of a transfer of the disease under consideration, from the rectum and colon, to other parts and organs, through the agency of what has been, and in fact is now, regarded by al-

most the entire body of our school, as good Homœopathic treatment. This evidence consists chiefly in two reports which I find in print; one from the pen of Dr. Dunham, of New York, whom we all have reason to respect for the much that he has done and is still doing to advance Homœopathy; the other from the pen of Dr. Boyce, of Auburn, N. Y., who is less generally known to the profession, but whose report is none the less important and unmistakable in the direction in question. But, before proceeding further in this matter, I wish it distinctly understood, that I do not bring up these reports to raise an issue with their authors. On the contrary, I use them simply because they contain the very clearest and best proof that I can find, on record, to illustrate my position, and out of the candid consideration of which, I hope much good may come to Homœopathy.

Dr. Dunham's report, which was prepared, as appears, for the Homœopathic Medical Society of Cayuga county, New York, was published in the *Hahnemannian Monthly*, of December, 1865, and is, so far as I copy from it, as follows. He says:

"From the nature of my business I have not been called to treat many cases of dysentery. Three forms of that disease, however, have come under my observation in this city and its vicinity during the present summer.

"1. In one of the adjacent cities, I have seen several cases in consultation and have heard of others, which presented the following history:

"The disease began with moderate febrile excitement and with symptoms, both local and general, which clearly indi-

cated Mercurius. Under Mercurius, the cases improved until nearly convalescent on about the third or fourth day after the disease had fairly declared itself. At this period the amelioration ceased; the patients became drowsy and stupid, the urine was scanty, and that which was secreted was retained in the bladder; the appetite failed entirely; emaciation was very rapid, and the patient presented a strong resemblance to one in the second stage of a severe typhoid fever. Some of these cases lingered in this condition, causing great anxiety to the attending physician, until Opium was administered. Under this remedy (given in the 200th Potency) rapid improvement took place. The secretion of urine became free, and the intelligence clear. The appetite returned, as did likewise the dysenteric symptoms. The latter seemed to require Mercurius again, and under this remedy the patients made satisfactory recoveries."

What the Doctor says of the second form of the disease, though of interest, does not contain anything applicable in the direction of our present investigation, and therefore I omit it and pass on to the third form which he gives. Of this he says:

"3. In the city of New York, several severe and rapidly fatal cases have been reported, to me, though I have not seen any such. The patients (all children) were taken with dysentery of only moderate severity, and which seemed to indicate Mercurius, or Nux Vomica. Under this remedy the evacuations ceased, and the patients appeared to be convalescent. On the third or fourth day (when there had been no stool for eighteen hours), suddenly the patients sank into a complete collapse, from which no treatment, no remedies, internal or external, no stimulants of any kind, sufficed to restore them. Homœopathic and Allopathic treatment were equally unavailing. In the space of six to twelve hours death occurred. In one case there was green, watery vomiting during the collapse; in another dark hæmorrhage from the rectum."

I will now make such comments upon this report

as I think the good of Homœopathy justly demands. There is in it, more especially in the first section, the clearest evidence, I think, that could have been given in an unconscious way—and it has all the more weight from this fact—to show that the disease, or at least the exciting cause of it, was, in all the cases mentioned, driven from the rectum and colon by the treatment pursued, and by this means compelled to continue its action upon other parts or organs of the system, which are *more* vital than those upon which it originally seated. In those cases which the Doctor classifies under the first form of the disease, which came under his observation, the transfer was evidently made to the mucous membrane of the kidneys, causing acute albuminuria. He says that the improvement from Mercurius, the first time it was administered, ceased on the third or fourth day, and then the patients became drowsy and stupid, the urine scanty, etc. Here, we see, are two of the most prominent symptoms that could arise, to lead us to suppose we have to deal with acute Bright's disease. Scanty urine, as is well known, is one of the leading pathological evidences that it contains albumen, and in the cases given, the brain was evidently poisoned by the retention of urea in the blood. But the Doctor says nothing in regard to the urine being albuminous, nor whether tests were made to determine this. It would have been of importance to have had this done, though perhaps none of the urine could have been obtained, as he says what little was secreted was retained in the blad-

der. But, however the facts may have been, in this respect, we see that under the administration of Opium 200th, the secretion of urine became free and the intelligence clear. And *just so soon as those symptoms were relieved, the dysenteric symptoms returned.* Can anything be more clear, then, than that the dysentery had not been cured, but that its exciting cause was driven by medicines to act upon the kidneys and perhaps other parts for the time, and when this secondary condition was relieved by medicine, though another drug, that it was driven back to act upon its original seat in the rectum just as it did before the transfer? Now another very interesting feature presents itself. The Doctor says Mercurius seemed indicated again, and under it the patients made satisfactory recoveries. But if this drug did not establish a curative action in the first instance, as we have seen that it did not, that it only, in fact, transferred the disease to more vital parts, causing much more alarming and dangerous symptoms, I contend that it could not have cured in the second instance of its administration to the same patients, if given in the same potency and the doses at the same length of interval. Instead of this, the disease must have been driven again to seat upon other parts or organs, where by the vital strength of the part, it was forced into a more or less dormant condition, to be developed in the future in some acute or chronic form of disease. It evidently did not go to the kidneys again, as no mention is made of symptoms from these organs; be-

sides, they were probably sufficiently strengthened by their reaction from the first attack, to resist a return of the disease there a second time. Happily Dr. Boyce's report will be seen to throw some light upon these points in Dr. D.'s cases, when we come to consider that.

In the third form of dysentery which Dr. Dunham reports, there was evidently a transfer of the disease also to other organs, and, like the cases mentioned in the first form, this transfer appears to have been brought about solely with medicine, though no evidence is given that it was in these patients driven to the kidneys. He says these cases were of only moderate severity, that under the remedy that seemed indicated, which he states was either Mercurius or Nux Vomica, the evacuations ceased, and the patients appeared to be convalescent, when on the third or fourth day, JUST THE LENGTH OF TIME THAT THE BAD ACTION SHOWED ITSELF IN THE FIRST CLASS OF CASES, they suddenly sank into a complete collapse, from which no treatment sufficed to restore them, and death occurred in from six to twelve hours. From the course these cases apparently took, and the symptoms developed, I think the transfer must have been to the mucous membrane of the small intestines and stomach. Indeed the Doctor says there was, in one case, green watery vomiting during the collapse, which is proof there must have been some trouble with the stomach in that case, at least. In another there was dark hæmorrhage from the rectum, which probably arose

from the excess of blood-corpuscles left by loss of albumen, and expelled through ruptured capillaries in the mucous lining of some portion of the intestinal canal. Now, let it be borne in mind, that this terrible condition, which was fatal in *every* instance, was *not* the fatal culmination of the *dysenteric* action, nor was the collapse caused by the exhaustion from that action, for it is distinctly stated that the dysentery was of only *moderate* severity, but the fatal state immediately succeeded the *relief* that medicine afforded the *dysenteric* symptoms. Well, then, was the dysentery cured? Clearly not, but the cause of it was driven, as with the first class of cases, to act upon other and still more vital parts, where death was the *invariable* result. The difference in the action of the disease in the various localities, it will be readily comprehended, arose solely from the different symptoms which each organ attacked must necessarily give.

I now turn to Dr. Boyce's report, which I find in the November number of the *American Homœopathic Review*, for 1863. That part of this report which I copy, succeeds an account of a case of poisoning with Arsenic, from which the Doctor claims to have seen clearly the indications for giving Arsenicum in dysentery. He says:

“Two children, twins of eighteen months, were attacked with dysentery. The first was taken on Tuesday, Sept. 22d, 1863, with vomiting of ingesta, followed by very offensive watery stools, described by the nurse as smelling like rotten eggs. On Wednesday morning commenced to pass the peculiar stools