

since the time of Floyer and Hoffman has been regarded as a universal remedy; and which Priessnitz and his followers, hold forth as possessing almost specific virtues in Scrofula. But M. Blich, of Christiany,\* who so largely tested the virtues of water, says, "In Scrofula, I promised myself much from the Priessnitzian method, and the more so, because baths were long considered a principal remedy in its cure. There was no disease, however, in which the results were so unfavourable; for of six patients, 3 died, 2 were relieved, and only 1 cured; and even in this instance, it is not known whether the disease has returned.

I think, therefore, that it is to the concurrence of the air, the baths, the food, and the exercise enjoyed by those who were treated at *Forges*, rather than to the water alone, that the good effects claimed for it should be referred.

Whether or not any specific virtue over scrofulous glands be conceded to the use of Mineral Waters, it is certain that their value in cases of articular Scrofula is highly estimated; but to complete the resolution of articular swellings, several seasons are believed to be necessary. M. Pagès, in speaking of the waters of *Barèges*, says: "I possess a certain number of observations of white swellings, which medical men would regard as cases for amputation, and for which indeed the operation had been recommended, which have got well under the use of these waters."

Lemolt, in speaking of the waters of *Bourbonne* and *Balaruc*, says, "After twenty years of observation, I can affirm that the *Bourbonne* Waters, if used for a sufficient length of time, will cure most diseases of the lymphatic system."

The following table exhibits the only correct numerical results we possess on the influence of Mineral Waters in the cure of Scrofula; the facts are derived from the Reports of the Inspectors of Mineral Waters in France.

\* Schmidt's Jahrbucher.

## SCROFULOUS ENLARGEMENTS.

	Cases observed.	Cures.	Ameliorations.	No benefit.	Deaths.
Bourbonne . . . . .	29	2	16	11	0
Balaruc . . . . .	46	14	16	14	2
" . . . . .	13	0	5	8	0
Mont d'Or . . . . .	19	3	5	11	0
Nérès . . . . .	4	0	2	2	0
Bagnoles (Lozère) . .	78	17	33	23	0
Bagnères de Luchon .	41	14	10	17	0
	230	50	92	86	2

## ABSCESSSES, ULCERS, FISTULÆ.

	Cases observed.	Cures.	Ameliorations.	No benefit.	Deaths.
Bourbonne . . . . .	132	57	62	13	0
Bourbon l'Archambaut .	43	18	15	10	0
	175	75	77	23	0

The above Table implies, I believe, as favourable an estimate as can properly be made of the influence of Mineral Waters in the cure of Scrofula, and certainly the result does not show that they exercise any very decided curative influence over the disease.

That they have been more indebted for the credit they possess to the enthusiasm of friends than to the faithful register of the cures, which it is alleged have resulted from their employment, is I think true. And no doubt M. Patissier was near the truth when he said, "Les eaux minérales naturelles guérissent quelquefois, soulagent et consolent toujours."

The impression I derive from what has been stated is, that however strongly public opinion favours the opinion that Sea-air, Sea-water, Sea-bathing, and Mineral Waters, exercise a direct curative influence over Scrofula, no proof of this direct influence has ever been furnished. I do not deny but that scrofulous patients subjected to their influence have, during the treatment, undergone a marked improvement in the general and local symptoms of the disease; but it is probable that persons so suffering would have de-



rived equal advantages from a judicious treatment not including either of those agents.

## SEASON.

There remains for our consideration one element, whose influence is always felt, but never fully admitted in the treatment of Scrofula, namely, Season. I am convinced that beyond every other agent, except food, it is the one whose influence is greatest in the excitement of the cure of Scrofula.

I have fully satisfied myself that scrofulous cases are most numerous and most aggravated in spring and the beginning of summer; that they are least frequent and most ameliorated as the commencement or the middle of autumn; and that at the one period, they have been aggravated by the cold of winter, at the other they have been ameliorated by the warmth of summer; and this has happened when all other influences have been apparently unchanged.

When do we send patients to the sea-side? Precisely at the season when they would improve any where. When do we find any remedies best succeed? Precisely when the season is becoming favourable. When do we find all medicinal agents comparatively powerless? Precisely when we get no help from the season. True it is we may take a poor child from the streets in the depth of winter, and give him good food and lodging, and his disease will be improved, and this without reference to the season; but then we have improved nutrition. But let a poor child remain at home, and we shall usually find every specific fail to improve his condition until favoured by season; and let almost any one of the unsuccessful remedies be used when the end of spring comes, and its apparent good effects will soon be obvious enough. Now if that position be correct, it must be evident how defective the estimate of every plan of treatment is, which does not include the influence of season.

## GENERAL SUGGESTIONS.

Having considered separately the agents employed in the treatment of Scrofula, we will now bring them together for the purpose

of showing what general plan of treatment should be followed in this disease.

Let us suppose that we have to do with a child of ten, presenting the scrofulous constitution, marked by general debility and by the presence of glandular tumors in the neck;—that we cannot tell whether scrofulous matter has been deposited in those glands, but we have reason to hope not. If the season and the circumstances of the party permit of it, immediate removal from the place where the disease was developed, is the first great point to be attended to; the place of removal is less important. A dry warm locality, favourably situated for exercise, is, I think, best: but if no difficulties are presented, a change every month or two is still better than a lengthened sojourn in one place. The food should be plain, good, and sufficiently nutritious; animal food may be taken in small quantity a second time in the day, if it be well borne; sloppy food should be particularly avoided—the clammy tongue of Scrofula can frequently be changed by food alone. As much active exercise should be taken as can be borne without fatigue; and to ensure this, varied amusement must be provided. There is nothing which imparts so much vigour to the circulation as healthful exercise—there is nothing which tends more to extinguish Scrofula than a vigorous circulation. The sleeping-room should be airy, and the surface of the body should be well rubbed with warm flannel before the child is dressed. If these measures can be carried out, a case of Scrofula in which the deposit is not made, will usually yield.

But it may happen that the appetite is bad, the tongue furred, and the stomach unfit to discharge properly its allotted duties; in some cases an emetic, occasionally administered, will clean the tongue, and the appetite will quickly improve, and we are then warned that the stomach is better prepared to do what is required of it; but still the remaining portion of the digestive surface may be in a disordered state. The bowels may be constipated, because they have lost tone, or they may be relaxed, because they have acquired a morbid irritability. The evacuations may be clay-coloured for want of bile, or they may present a redundancy of that fluid. Under those circumstances, or any of them, medicines may afford us the means of correcting the evil. Thus, supposing the stools to be wanting in a proper admixture of bile, mild mer-



curials, calomel or grey powder, with rhubarb, will stimulate the liver to perform its appropriate functions; supposing there is much intestinal sluggishness associated with that of the liver, warm purgatives will be found useful; supposing all the secretions to be preternaturally acid, alkalies with bitters may be indicated.

Or, it may be, that the digestive mucous surface is too much wanting in tone to profit by what we have done for it, and may require Wine, Bitter Ale, Bark, Iron, Iodine, Barium, or Mercury, assisted or not by alkalies, to enable it to digest properly the food which is brought into contact with that surface, and to derive a proper nutrition from such food. The choice of the particular agent is a matter for the discretion of the medical adviser in the particular case; what is best in one instance will not be so in another.

In a case where the general health has not greatly suffered, Mercury, Iodine, or Barium, as alternatives, may do well; in a case where the pale surface, the flabby textures, the languid circulation are prominent signs, some tonic, such as Iron or Bark will be more clearly indicated; in some instances, the Cod-liver Oil will exercise a favourable influence on nutrition. To do more with respect to the selection of a particular medical agent than affords these general indications is hardly desirable.

If a deposit of scrofulous matter have taken place in one or more glands—it will not completely subside—it cannot, I believe be absorbed; either it may become quiet, and cease to irritate, assuming a calcareous character, and remaining dormant for years, or it may excite inflammatory action around, suppuration may take place, and a way may be made for its evacuation externally. The latter is not, however, the usual termination of a tumid gland in a scrofulous constitution—of twenty cases of glandular enlargement, scarcely one will go on to suppuration—but we cannot tell in how many of the cases of chronic enlargement the scrofulous deposits may have taken place.

When suppuration has taken place, and even when fluctuation is apparent, it is extremely difficult to point out an unvarying line of practice. The rule I conceive is clear enough, that unless ulceration be inevitable, the surgeon should not interfere, either with the caustic or the cutting instrument; but in individual cases,

the embarrassing point is the solution of the question whether ulceration be inevitable. Every surgeon has seen collections of fluid where the integuments were thinned and purpled, suddenly shrivel up and be absorbed, but no one can say what may happen in any particular case. It is true, that the cases in which fluctuation is apparent, and in which the absorption of the fluid is observed, are a small minority; and the safer rule is to conclude, and act upon the conclusion, that the integument will give way.

As much destruction of integument, and much subsequent deformity may result from the gradual thinning, preparatory to the fluid making a way for itself, it is best to anticipate that result. If this be done at a comparatively early period, the cutting instrument is the appropriate agent for the purpose; if it be done tardily, when the integument is thinned and of a violet colour, the caustic so applied as to destroy the thinned integument, will occasion less deformity.

I am by no means disposed to underrate the value of the commoner local agents in the treatment of strumous glands; though such glands are the indication of a general evil, they constitute in themselves a local one also; and as general remedies are often powerless to arrest the progress of the disease, it is important to ascertain what may be reasonably expected from direct treatment. Upon the constitution itself, it is of course not pretended that we can act by the means I shall now indicate. I think that when the signs of inflammatory action are unequivocally manifested, by pain, heat, and redness, such inflammation may frequently be treated with advantage, like common phlegmon—by leeching and cold. The common notion is adverse to this treatment, because “scrofulous patients should not be lowered,” but such patients bear small local bleedings much better than is usually supposed. Where the tumor is more chronic, frictions with Mercurial or Iodine ointment are sometimes found useful.

If change of air, good food, and exercise, cannot be procured, the difficulty of treatment is in a ten-fold measure enhanced, and the chances of cure infinitely lessened. For good food, pure air, and proper exercise, the vaunted anti-scrofulous specifics are a poor compensation; we may try one after another, and often find all fail. All that is left to us in such cases, and unhappily they are many,



is to endeavour to improve the mucous surfaces and the blood by the alteratives, and tonics. In this way we can do some good; but it can avail but little to labour by medicine to make the stomach fitter to digest good food, when the patient cannot procure such food.

## CHAPTER XI.

## CONCLUSION.

THIS Work has been written at intervals spared from professional duty, and amidst those distractions of thought which frequent interruptions occasion, and has been composed at distant intervals, during which my own opinions have undergone modification; so that it is probable there will be found some positions wanting in precise accuracy, or stated without the qualifications by which they ought to be accompanied. For defects of such a character I do not fear a harsh judgment, when the labour of collecting and classifying my materials is considered, exceeding as those materials do, any collection which I believe has ever before been made for a treatise on a single disease.

And now that the task I have undertaken has been brought to a conclusion, I would shortly allude to a question which has forced itself upon my attention, from the beginning to the end of the inquiries in which I have been engaged, namely: What is the influence of civilization upon the physical vigour of a people? There can be no question, I apprehend, that it tends to the preservation of weak and ailing members of the community, who would not be reared under less favoured circumstances, but who are thus made the parent stock from which families take root.

Although the materials which we possess, do not enable me to offer any positive evidence on that question; and although some of the results which have been indicated, in the preceding pages, would seem, at first sight, to favour an opposite conclusion, I entertain a strong belief that the races which now occupy the more enlightened countries of Europe, have physically degenerated, and that civilization, including as one of its agents, improved medical science, has contributed to that result. Under a less advanced civilization, the