

THE INTERNATIONAL HOMŒOPATHIC CONGRESS.

EDITOR OF THE HOMŒOPATHIC RECORDER.

The America Institute's Committee on the International Homœopathic Congress is endeavoring to give direction and character to the essays and discussion of the congress, and to this object more time and energy have been devoted than to any other part of the committee's labors. It would seem that as the themes and discussions of a national medical association naturally take a broader scope than those of a local society, so the work of an International Congress should be more comprehensive and far-reaching than even that of a national convention. This committee is, therefore, seeking to bring before the approaching Congress some of the broadest and highest questions that confront our profession in all its departments. It is important that the Congress should discuss, for instance, some of the broad and imperative issues of modern surgery, rather than the technical details of some minor or major operation—the influence of the Law of Cure in a whole realm of maladies, rather than the indications for this or that remedy in some particular disease—the construction of a *Materia Medica*, rather than the symptoms of an individual drug. To this end our committee has labored and, thus far, with most flattering prospects of brilliant success. Papers, bearing upon these classes of subjects, are in course of preparation by physicians selected from among those best qualified for the work, and others, equally distinguished in the various departments have consented to take leading parts in the discussion of the papers.

In order to correct a misapprehension, it may be stated that the object of the committee is not to control the congress, but to serve it. Undoubtedly the congress will adopt and enforce rules of its own, those governing the reception and discussion of essays included. This committee does not deem itself authorized to reject any Paper that may be offered, on any medical or surgical topic whatsoever. Its object is to *include* papers of a certain general character, but not to *exclude* anything. All essays, whether prepared at the instance of the committee, or as voluntary contributions, must be passed upon by the congress or by its delegated authority; but the committee will probably recommend and urge that such of the essays as are more or less in harmony with the views above mentioned shall take precedence of others, and it is quite likely that these will occupy nearly all the available time of the convention.

Notice is hereby given that to insure the publication of the title of any Paper in the "Annual Circular and Programme," said title must be in the hands of the undersigned on or before April, 5th, and the paper itself should be sent as soon thereafter as possible, to the chairman of the committee, Dr. T. Y. Kinne, of Paterson, N. J., in order that provision may be made for its discussion.

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SELECTIONS AND TRANSLATIONS.

ON EXTERNAL APPLICATIONS IN HOMŒOPATHIC PRACTICE.

By the Late Dr. Hirsch, of Prague.

MEMBRANOUS CROUP.—The efficacy of a powerful skin-irritant has repeatedly been demonstrated to me in desperate cases of membranous croup. I will give a few cases in print:

Case 1: It was in the month of November; the raw, moist atmosphere had produced so much sickness that I was about starting on my visits at a very early hour, when a gentleman was announced from the country, who wanted to see me in a most important matter. A distracted looking gentleman was ushered in, who strenuously begged me to accompany him on an outgoing train to see his four-year-old boy, afflicted with membranous croup in its highest stage. The report from the old-school physician, who had spent the whole night with the patient, sounded hopelessly desperate. With calomel, vomitives and embrocations it was sought in vain to stem the progress of the sickness, and as a last resort Homœopathy was to be given a trial. I told the gentleman that it was absolutely impossible to accede to his request, as many very sick patients needed an early visit. However, in answer to the lamentations and prayers of the desperate father, I was induced to make an effort to relieve the patient, and I accordingly gave him a plaster, about 1½ inches in diameter, made of the Resin of Euphorbium, spread on waxed tafeta (of which I always keep a supply on hand), to be applied to the outer skin of the throat, and for internal use he received six powders of Spongia and six of Hepar s. c., each in the 3d trit.; the

plaster was to be applied slightly warmed to the throat, and once every hour was to be administered a powder of Spongia, to be followed with the Hepar powders as soon as the cough should become loosened. It was one of the most joyful moments of my life when, next morning, the father, so desperate yesterday, entered, beaming with joy, and reported that the remedies had a most wonderful effect and the doctor had announced the child to be out of danger. As a rather frequent loose cough still supervened I gave him some more powders of Hepar 3d, and a few days later I received a really touching letter of thanks informing me of the convalescence of the boy.

I am convinced that in this desperate and already allopathically maltreated case Spongia and Hepar of themselves would not have sufficed to save the child.

Case 2: A girl æt. 3 years, of phlegmonous constitution, was afflicted since two days with membranous croup under old-school treatment. Things had come to such a pass that it was prognosticated the girl could not live through the day and tracheotomy was proposed as a last resort. Rather than assent to the fatal operation the parents, counselled by a friend, decided to consult a Homœopath. On my entrance to the sick chamber, the little patient just vomited, for the third time, a bluish fluid, *i. e.* a solution of sulphate of copper which had been administered as an emetic. Immediately thereafter the child presented all symptoms of incipient suffocation; bluish cast of countenance, widely distended *alæ nasi*, bending back of the head, intense restlessness, an evident struggle with a comatose state, and lastly the characteristic anæsthesia of the skin, a symptom always a precursor of the approaching end. Bouchert, of Paris, first called attention to this peculiar symptom, and this peculiar state accounts for the fact of the remarkable quietude of children during the operation of tracheotomy. As a matter of course, I could not give much encouragement to the parents, but applied at once one of the Euphorbium plasters to the throat, and advised to give her warmed milk frequently, but I refrained for the present from giving Homœopathic medicines on account of the preceding vomiting. On my return, after two hours, I found that the patient had coughed a good deal and with a stronger sound than before, but its looks and the distress in breathing were almost unchanged. The continued lack of sensitiveness of the skin was demonstrated by repeated pricks with a needle. The Euphorbium plaster stuck fast, however, and seemed to have its full effect on the skin, for a moisture commenced to ooze out at the edge and yet the child seemed not to feel its burning as would have been

indicated by gestures. However a decided reaction, both inwardly and outwardly, was certainly manifest which in such a desperate case must be considered a gain. Three hours had passed since the last vomiting, and now I proceeded to give Spongia 6, one drop every hour, and it was my intention to follow it with Iodium, but a written report which was sent a few hours later, at my request, stated that the little patient's cough was stronger and looser which induced me to send a few more Spongia powders.

Late in the evening, on visiting, there was decided improvement; breathing was still labored, but a slight rattling was noticeable, which pointed to a beginning resolution of the crupous exudations. The color of the face was normal, the bluish cast was gone, the insensibility of the skin much less, and pulse stronger, but still accelerated. I now changed to grain doses of Hepar s. c. 3, every three hours, and next morning the condition was so much improved that the child could be declared out of danger. The cough was loose, requiring less effort, breathing was easy, questions were answered with low voice, which did not yet sound quite normal; the child showed more interest and the expression was more natural. It partook of some soup and milk with a relish, and three days after we had the pleasure to see the nearly dead child well again.

I could relate a number of similar cases in which this resin plaster acted favorably, and especially in obstinate cases, or in such as were nearly hopeless by preceding Allopathic treatment. [From the *Popul. Hom. Zeitschr.*]

CONGENITAL HYPERMETROPIA.

A Clinical Case by Dr. Grossmann.—The Case was Diagnosed as Such by Two Prominent Oculists.

The sixteen-year-old son of a demented artisan was brought to me by his mother, who lamented his half-blind condition. Having finished his schooling he was to be apprenticed to a trade, but no master was willing to take him in this condition. Already in the "kindergarten" the teacher noted his defective vision, and later in school his condition grew so much worse that he had to use the strongest glasses. Patient was somewhat scrofulous and often troubled with angina. The mother evinced a great deal more confidence in my ability to benefit the case than I was able to feel.

In the beginning of August, 1884, I prescribed *Zincum 30*, a sovereign eye remedy, as I knew from experience. As he still attended school, three doses were given pro die. Within a few days vision became clearer, but several weeks passed without further improvement. In view of the scrofulous diathesis I interpreted another remedy, *Kali Bichr. 30*. This also did good service; the power of vision grew better. Yet the ever-changing conditions induced me always to go back to *Zincum*. And so November came on. The eyes pained, while using the strong glasses, so I ordered weaker ones, which were used without discomfort. I now gave the remedies in alternation; also three times a day, and amelioration progressed more rapidly; so that by May, 1885, the cure was completed. Much to the astonishment of the optician he had to furnish weaker and weaker glasses until at last none were necessary, and the boy found no trouble to find an apprenticeship. Up to date no relapse occurred. This is another proof of the potency of our Homœopathic remedies. Not only was an enhanced accommodation achieved but a considerable flattening of the bulb was rectified and a pronounced faulty refraction put to rights.—*From the Allgemeine Hom. Zeitung, December 25, 1890.*

ON EXTERNAL APPLICATIONS IN HOMŒOPATHIC PRACTICE.

By the Late Dr. Hirsch, of Prag.

ŒDEMA GLOTTIS.—Was called early in the morning on February 15th, 1876, to W. B., a man in good circumstances, æt. 64. Was informed that he complained the preceding evening of some pain in the throat and applied a cold compress to the neck. About midnight he was awakened by a hoarse, dry cough and the sensation as of a foreign body being lodged in the throat. The rest of the night was very much disturbed by frequent coughing, and towards morning the difficulty in breathing greatly increased. On entering the sick chamber I found the rather robust patient sitting on the bed, his feet, wrapped in a woolen blanket, on the floor, as the intense distress in breathing rendered a horizontal position impossible; his hands rested on his thighs, and on the nearly suffocating inspirations the head moved backward and forward, face a bluish-gray, the wide open eyes protruding, cold sweat on the forehead, total aphorexia with hissing and whistling efforts at coughing; the whole a picture of a high grade *Œdema Glottis*. The pulse was already quite small, weak and accelerated, heartbeat irregular. Death from

suffocation seemed imminent. Under these circumstances a powerful counter-irritant seemed to be imperative. At the next drug store some ethereal oil of mustard was obtained, a piece of blotting paper the size of a half dollar saturated therewith and quickly tied around the neck. An intense burning sensation became immediately manifest on the entire skin covering the larynx; the application was continued for two or three minutes, and in scarce fifteen minutes after patient, by nodding, indicated that some relief was experienced, which, indeed was also manifested by the expression of the face denoting less desperation and breathing becoming easier. Gratified, I left the patient for two hours, and was still more content when on my return the patient grasped my hand and with scarce audible hoarse voice expressed his thankfulness at the relief afforded. The cough gradually became more loose, and with *Hepar s. c. 3* amelioration rapidly progressed. In a few days a very copious accumulation of a thick, tough and very tenacious mucus set in, for which *Senega 6*, every two hours, afforded prompt relief. Six days from the beginning of the attack convalescence was fully established, and within a week after patient had fully recovered. Another similar case, but of less intensity, had been treated by me about eight years previous to this. The patient, a landed proprietor, æt. 40, of robust constitution, had attended the well-filled theatre the evening before, and on driving home in the raw night caught cold. After a few minutes in the carriage he shuddered and felt a rawness in the throat. Arrived at home he took several doses of *Aconite* and then slept a few hours, awaking in a light transpiration; but a harrassing cough and sensation of dryness in the throat hindered sleep. Called in the morning; I found the patient complaining of a hoarse, raw cough, tickling and scratching in the throat, with some difficulty in swallowing; pulse 90, skin moist, tongue coated yellowish. I diagnosed the case as a rather severe catarrh of the larynx; prescribed *Spongia* and *Aconite* in alternation every hour, and promised to call in the evening. But early in the afternoon I was called again, and he complained, with hoarse, scarcely audible voice, of the distress in breathing, and that the throat seemed to be steadily getting narrower. The anxiety and distress of the patient was intense, and I was also greatly alarmed, for on applying a tongue depressor a thick, reddish swelling appeared in the depth, evidently being the swollen mucous covering of the glottis. And instantly it recurred to me what I had heard from Apollon's lips: "One of the most dangerous affections is the swelling of the lip of the larynx—*œdema glottis*—especially on account

of its rapid lethal course." The recollection of these words enhanced my anxiety the more, as this was the first case that came under my observation. To put a stop to this progressing swelling a rapidly acting medicament was imperatively called for. A small vial of oil of mustard was procured at the nearest drug store and a few drops of the light yellow oil of penetrating smell was rubbed, with a piece of cotton, into the skin covering the Adam's apple, of the size of a half dollar, which occasioned an intense burning, but which was gladly submitted to by the patient, as he almost simultaneously experienced a relief in breathing, which became more pronounced after a few minutes, so that I ventured to leave him for a few hours, with the direction to send for a powder, which he was to take at once. The fact that, though the breathing was much relieved, the patient still complained of a sense of swelling or constriction in the larynx, the frequent hoarse, dry cough and the still much swollen mucous membranes of the glottis pointed to Lachesis of all the remedies that I studied, and I accordingly sent him a powder of Milk-sugar, moistened with a drop of the 12th potency. Visiting him two hours later he seemed improved, in so far as the cough sounded less hoarse and dry, and breathing was less labored; on a visit two hours later I was informed that the patient slept tranquilly since over an hour. I left another powder of Lachesis, to be taken should he grow worse, but at next morning's visit I was told that he had slept much and coughed but little during the night, and that the cough was gradually getting loose with expectoration. Breathing, to my astonishment, was normal, the swelling of the mucous membranes had almost entirely subsided, and the rapidly progressing convalescence enabled patient to leave his bed three days later. Very probably Lachesis, if given at once, would have prevented the spreading of the swelling of the mucous membranes, abated the whole attack and rendered superfluous the application of the external remedy, but show me the physician who, at first sight, will at all times succeed in selecting the right remedy. And in the first mentioned case the danger of suffocation was too imminent to permit me, in view of my previous success, to risk a possible loss of time in selecting the internal remedy.—*From Hom. Pop. Zeitschr.*

SAW PALMETTO.

The fluid extract of this invaluable berry (says the *Pacific Record of Medicine and Surgery*), is a tonic far in advance of the comp. hypophosphite, almost equal to the tincture of oats, but

has a special action upon the glands of the reproductive organs, as the mammæ, ovaries, prostate, testes, etc. Its action is that of a great vitalizer, tending to increase their activity, to promote their secreting faculty, and add greatly to their size.

It is especially indicated in all cases of wasting of the testes, such as follows varicocele, or is induced by masturbation, or which is often present in sexual impotency. In gynæcological practice it is much used to promote the growth of the mammæ; and in uterine atrophy dependent upon ovarian blight, its action is unexcelled.

But it is in the prostate gland that this remedy exercises its best effects. Out of every ten men nine have enlarged prostate, and one has atrophy, of same, at ages varying from thirty-five to seventy-five, the result either of early indiscretion, or excesses, or perversion of the sexual act, or sedentary habits, or from improperly cured gonorrhœa.

We could cite case after case of both morbid conditions, in which, by means of this agent, the size of the prostate was equalized, the difficulty of micturation relieved, the stoppage, dribbling, lack of force completely overcome, and the improvement in sexual power most steady and gratifying. A perfect rejuvenation follows the use of palmetto; the general nervous system becomes balanced and invigorated.

It will also allay irritation of the mucous membrane of the throat, nose and larynx. It has been used with decided success in marasmus, phthisis pulmonalis, bronchitis, acute and chronic laryngitis, etc. Dose 5 to 10 drops, three times daily in water.—*American Medical Journal, February, 1890.*

MULLEIN OIL.

I see by the *Journal* that many are beginning to use Oil of Mullein blows. The old school journals say that it is a new remedy of great renown in certain diseases of the ear. I made it for my preceptor over forty years ago, and he used it for deafness and inflammation of the ear, and I have always made it, and keep it on hand as a part of my armamentarium since. If a child has earache I make a little swab with absorbent cotton and dip it in my vial of Mullein Oil, and introduce it into the ear as far as I can, then close the ear with a pledget of cotton, and the little pet almost invariably goes to sleep. Many of my patrons keep a half drachm vial on hand.

If a man comes to me complaining of deafness, I examine his

ear for wax. The next thing is a syringe with milk warm solution of borax, say grs. xx. to water Oj., and use it freely as an injection, being careful not to use too much force. Then comes the Mullein Oil, about three drops morning and evening dropped into the ear and continued for some time; and in that way I have cured a great many. You will notice the improvement in their hearing in a short time. I also use it in nasal catarrh with frontal headache. R.—Take Oil Verbascum Flor., ʒss.; Solution of Cocaine 4 per cent., ʒss. M. Shake well. Introduce up the nostril as far as possible with a small swab two or three times a day. It has done wonders in my hands.—*R. C. Ely, M.D., in Eclectic Medical Journal.*

LATRODECTUS MACTANS IN ANGINA PECTORIS.

S. L. G., a man fifty years old, of bilious temperament, a dentist by profession, had slight attacks of angina after severe exposure and overexertion during "the blizzard" in March, 1888. He did not consider them of sufficient importance to consult a physician about them, but some months later, he had a suppurative prostatitis, which was followed by considerable prostration, and the attacks of angina became very severe. I never could get a satisfactory description of the character of the pain, and I never saw him during a paroxysm. The pain was brought on by exertion of any kind, and was especially frequent soon after dinner. The pain was sometimes felt in the left arm, but was usually confined to the cardiac region. I once or twice detected a slight aortic obstruction sound, but aside from this failed to find any evidence of organic disease. The usual remedies gave no relief, but *Latrodectus* 3c was of great benefit. Under its use the attacks gradually became less frequent and less severe. He has taken no medicine now for at least six months, and he tells me that although he occasionally has a little reminder of his former trouble, the attacks are so slight that he pays no attention to them. I have given the remedy in another similar case, with even more gratifying success. The attacks were very promptly arrested and have not returned, although nearly a year has elapsed. I think we have in this remedy, to which Dr. S. A. Jones directed attention in one of the issues of THE HOMŒOPATHIC RECORDER, a very valuable remedy in this painful affection. It is probably, as Dr. Jones suggests, in angina pectoris vaso-motoria that it will be found especially servicable.—*E. H. Linnell, M. D., in December, 1890, North American Journal of Homœopathy.*

Passiflora Incarnata.—I have used the *passiflora* for several years. I think it is an anodyne, sedative and soporific. I prescribe it in facial neuralgia affecting the fifth-pair nerves, in which it gives prompt relief given in doses of twenty to forty drops, to be repeated as often as necessary. It is also splendid in neuralgia in any part of the system. Recently I prescribed it in a case of neuralgia of the stomach, in doses of half a drachm, repeated two or three times. It gave prompt relief. So far as I have used it it has no superior in any form of neuralgia in any part of the system. I have also prescribed it in several cases of insomnia with good results. This is the range of my experience with the *passiflora*. It is said to be good in tetanus, with opisthotonos, trismus, and convulsions of children, but I have never had the opportunity to try it in these affections, hence I cannot say; but I cheerfully recommend it in any form of neuralgia.

Be sure to get a good, pure article, and give it in from twenty to thirty drops at a dose, to be frequently repeated until it gives relief.—*John A. Henning, M. D., in Medical Summary.*

A Strange Eye Remedy.—A gentleman who had used for many years all possible old-school remedies for a stubborn eye-catarrh was asked, on reaching Cairo in his travels, by his native servant why he used so many salvés and eye-waters? After explaining that his inability to read induced him to travel, the servant, who was also his interpreter, asked for permission to cure him. Perfectly amazed, the sufferer exclaimed: "What you, a fellahen, offerest to cure an affection which has withstood the skill of the most renowned oculists?" Whereupon he answered "Why not, for my remedy is simple and harmless, and consists solely in that you *refrain for half a year from washing or even wetting your eyes or eyelids*, with either cold or warm water. You will have to cleanse your face in front of a mirror, and must carefully guard your eye and, immediate vicinity from contact with your wet sponge." The simplicity and harmlessness of the remedy impressed the patient and in accordance with the old proverb "In dubio abstine," he commenced the very next morning to institute this new negative mode of cure. He merely wiped the exuding pus-like slime with disinfected wadding. With admirable patience and perseverance the patient continued this method day after day, and was able to note some amelioration after a week already. This increased from week to week, and he returned perfectly cured after the lapse of three months and re-entered upon his office which he