

well afford to be an exception to a general rule, especially if the loss of patronage be the consequence. Six years ago, when this *Journal* began its career, an advertiser, in sending "copy," would, perhaps, politely suggest that a little editorial notice would be acceptable,—some modestly do so now; a little later four notices a year was stipulated as part of the advertising contract; a little later we were told by several large advertisers that such notices "are worth more than the advertisement;" so—like a stone rolling down the hill, this custom has increased, until today the advertiser looks upon the "reading notices" as a part of his due; he pays you for a page, a half, or quarter page advertisement a year, or six or three months, and expects—some demand—a reading notice with every issue of the *Journal*, as "lagniape."

These "reading notices" consist for the most part of from two to three lines of commendation, to two and three pages of an elaborate article—written by some doctor, in which the merits of some proprietary medicine are brought to the reader's attention; consist of short (or long) letters to the proprietor, commendatory of his preparations; and as they are usually inserted in the journal to which they are sent, without alteration, that journal is made to appear as endorsing it, or it is taken, or mistaken, for the editorial utterances of the journal.

Well, like the little peach of the emerald hue, which brought so much grief and griping to "Johnny Jones and his sister Sue," it "grew and grew"—until it has attained to-day the proportions of a full grown and robust *nuisance*.

Many advertisers—our best patrons—send the *Journal* regularly, every month, articles taken from other journals, or written especially for the purpose, and very politely, it is true, ask that they be "inserted in the next issue of your esteemed journal;" and, for one, we always insert them.

It is not the advertiser's fault; who can blame them for taking all we will give—in the way of "lagniape?" It is our own fault. Publishers are themselves to blame for it; and if it continues to advance with the same speed and progress it has gained in the past two years, very soon there will be room in most of the smaller journals for—nothing else.

Why, sirs, to go through with the average journal, and then to fall upon two to five pages of "puffs"—for such they are—of nearly every article represented in the advertising page, or what is worse, to have one's reading interrupted every few pages, by such reading notices interspersed, reminds one of a circus and the side-shows;—in the midst of the performance, or just

after it is over, the voice of the side-show man swells on the breeze in melodious tones, and they vie the one with the other in sounding the praises of their several specialties, and in endeavoring to catch the attention of the passers-by.

Now, how is this to be remedied? All must see the injustice of it, not only to the publisher, but to the subscribers who pay for the journal. It is as unreasonable as to expect an accoucher who, having received a fee for a "delivery," is expected to visit the patient four to a dozen times afterwards, as "lagniape."

The Association of American Medical Editors will meet in St. Louis in October—for a special conference, it is announced. We have not been advised as to the special object of the conference, but we suggest that there is no subject connected with the medical publisher's business, which, in our judgment, demands more serious consideration than this very thing. Where is it to end? No one publisher likes to refuse a request of the kind from a prompt paying advertiser. We are all "clever fellows," and really like to be obliging—like to help make the "ads." pay, if we can—for the interest of the patron and publisher are mutual, to some extent; but it is not right to do so at the expense of our own interests, or to trespass on the rights of the paying subscriber. We lose subscribers by too much of this sort of business; and seriously, in our humble judgment, the time has arrived when a halt should be called.—*Daniels, Texas Medical Journal*.

The RECORDER has always refused "ads." when the conditions were that "pure reading" notices *must* be given. It has lost some business by this policy but, perhaps, gained in subscribers. By this course, also, its advertisers have the benefit of not being overcrowded. The best plan is to have a part of the journal set aside for such "notices" and have it paged with the advertising forms; such a department is honest to the reader. The habit of putting advertising insets throughout the body of the journal, as is so often done, is another most offensively vulgar practice. When a gentleman begins the perusal of an article, and, after turning a page or two, is confronted by a blaring "ad.," sandwiched in between the pages he feels like throwing the whole thing into the waste basket. Such vulgar intrusion is not only bad form but bad business policy, because while the "smart" advertiser certainly "catches the readers eye," it is only to excite his wrath and disgust.

Ranunculus bull. One of our most effective agents for the removal of bad effects from the abuse of intoxicating drinks.

A STRANGE CASE.

Translated for the HOMŒOPATHIC RECORDER.

Dr. Held, of Rome, presents the following in *L'Omiopatia in Italia*, 15th number, 1891: "It is a case of spinal irritation in a Polish lady. He visited the patient at the request of Dr. Brust, Homœopathic physician of Lemberg, under whose care she had been heretofore. The family occupied a small villa in a mountain village in Galicia. He was shown a pack of recipes by the most renowned professors of the universities of Vienna, Berlin, Heidelberg, and Würzburg. *Atropin*, *Belladonna*, *Hyoscyamus*, *Stramonium*, *Nux vom.*, *Strychnia*, *Argent. nitr.*, *Kalium* and *Natrum bromatum*, diverse aperient mineral waters, *Quinia* and *Valerianate of Zinc*, and many other remedies had been tried, indicating a nervous affection. On April 3, 1870, Dr. Held was conducted to the sick chamber. One side of the bed was protected with a mattress. In the bed lay a young lady of 17, blonde, emaciated, with palid face, blue eyes, with languid gaze, pale lips; her face expressed anxiety, a certain fear and lassitude. Her extremities trembled slightly. The clock struck eight. "Now, doctor," said the mother, "in five minutes the attack will commence." And, indeed, precisely at five minutes past eight the patient sat up in bed with a jerk, as if propelled by a steel spring, supporting herself on her hands, she raised her body about three inches, and with the rigid arms supporting the shoulders, she commenced a swinging motion with extended legs kept close together, at first slow, then faster and faster, until she touched the mattress which covered the wall on one side of the bed. Every five to seven minutes she would pause, then the arms would relax, she let herself fall on the bed, and took a deep breath, as if to regain strength. Yet, after two or three minutes, she would jerk up again and recommence the described motions and this for one hour; and so, that for precisely half an hour the velocity strength and extent of the motions increased, and the other half hour as gradually decreased, so that at 9:05 o'clock she would fall on the bed exhausted, sighing deeply, and then sleep for about half an hour.

On awakening she would obviously feel very much exhausted, but slowly would be dressed, and, supported on the shoulders of two servants, would drag herself to the adjacent dining-room, where she would partake of milk, bread and butter. Patient spoke with weak, scarce audible, voice, complained of great prostration of the whole body, her legs are unable to bear her, and feel as if made of cotton; they are paretic; with considerable effort

she can move and turn them in bed. After breakfast she passes her time sitting up, with reading, writing, or embroidery. About 12:30 P. M., she partakes of a Polish national soup made of carrots, bread, two soft-boiled eggs and butter, and some fruit, not too sweet. Her beverage is water mixed with very little Bordeaux wine. After this repast patient returns to bed to prepare, as she says, for the "minnetto." Precisely at 2:30 the same movements recommence, as in the morning, but the swinging is not as rapid, the feet not quite touching the suspended mattress. This attack lasts only half an hour, until precisely 3 o'clock. She then sleeps about an hour. She awakes less prostrated than in the morning, lets herself be dressed, and is brought out to the garden, where she is rolled about for a time in an invalid's perambulator. She is then left in the shade of a large tree, and passes her time until 6 reading and embroidering. At 6:20 she partakes of a supper consisting of milk, bread and butter or honey, fruit or marmalade. Towards 7 o'clock she is brought to bed again to await the third attack. It commences at precisely 8 o'clock, but in a different manner. Now, instead of the arms and hands the coccyx serves as support, forming a more or less obtuse angle. The rump is elevated about two-thirds of the vertical line, and the legs are extended, but not so close together as in the morning, the arms are extended rigidly sideways, and the fingers go continually through the motions of playing the piano; while the toes are continually in a jerking motion.

After 10 to 12 minutes relaxation of the extended muscles supervenes and the patient falls backward on the bed, but only to recommence the same motions after a pause of 10 minutes, and this continues until 10 o'clock. Then the patient drops asleep; this is tranquil for an hour but then broken by moanings and complaints, but only for a short time, when she sleeps again until morning. The number of swinging motions in the morning varies from 600 to 750, and those after dinner from 400 to 530. The mother of the patient kept an account of it. These daily pitiful exhibitions have lasted for six months already. As to the case Dr. Held reports the following data:

Miss M. K., aged 17, is the daughter of a still herpetic father and a lymphatic mother. Has not been afflicted with any skin disease excepting the measles;—was frequently subject to catarrhal and rheumatic conditions. Having developed with the 15th year, she menstruated tolerably regular every 40 days, but not too copiously until four months ago. During catamenia has light pains in the pelvis, and more severe ones in the left ovary.

Constipated since childhood, she only has a passage every two or three days without discomfort. She had a cheerful disposition, and is very lively and mobile.

About 18 months before Dr. Held saw her she began to become nervous; her cheerfulness gradually subsided, she became taciturn. She was easily fatigued, complained of pains along the spine. These increased, especially on slight pressure; walking became tedious, insecure; she could not stand long, and experienced at times slight trembling in the rump and jactitation of muscles of arms and legs. To this was added headache, especially in the occiput and neck, sending rays down to the shoulder blades. Appetite was gradually lost. Soon after convulsive movements occurred in the extremities several times daily, and sleep became disturbed and interrupted. She gradually lost her blooming looks, became pale, muscles relaxed and her strength decreased. Menstruation occurred but rarely. Then it was that the celebrities of the Universities of Vienna, Heidelberg, Würzburg and lastly Berlin, were consulted, and in addition to the remedies already mentioned electricity was applied. But all without avail, for despite these heroic measures her condition became worse, so that by January, 1870, above described condition became established. In April Homœopathy was appealed to, and Dr. Brust, of Lemberg, declaring the case one of Chorea magna, took her in charge. He used antipsorics, as *Sulphur*, *Belladonna*, *Silicia*, *Psoricum*, also *Gelsemium*, *Pulsat.*, *Nux.* and *Ignatia*, etc., but the sickness steadily progressed, and finally the weakness in the limbs assumed a paretic character.

Status præseus: Paleness of the skin of the face, lips and gums; deficient warmth, especially in the lower extremities; pulse 80, the tongue small, yellowish, taste often bitter, not much thirst, infrequent stools, total aversion to meat, the smell of which even occasions nausea, also aversion to sweets. Menstruation ceased. Between the shoulder blades there is drawing pain; in the lumbar region a pressing pain. The whole spinal column is sensitive to even light pressure, especially at the lower vertebræ of the neck; if a stronger pressure is brought to bear convulsive movements are manifested in both arms. Spinal vertebræ painful, especially the second, third, fifth, seventh, ninth and eleventh; the loin or sacrum also painful, as well as all the ribs and intercostal muscles. Also the liver and spleen give pain on pressure and are somewhat swollen. Slight pressure on the stomach occasions nausea, and pressure on the left ovary is painful. Sitting upright without support is irritating and very fatiguing.

The upper extremities seem to have sufficient strength; not so the lower. She can lift the legs for the purpose of adduction; she can move them sideways and extend them; but she evinces great difficulty in raising herself up without assistance; the legs don't support the body, they are as if made of cotton. There exists an extraordinary irritability to noise of any kind, more especially to thunder; and in these mountainous region thunderstorms are of frequent occurrence in summer.

Dr. Held diagnosed the case as spinal irritation, caused by a chronic spinal meningitis, and came to the conclusion, with the attending physician, to administer a dose of *Silicia* 200 in the morning, and during the day *Cuprum met.* 30 for 20 days, to await for the effect; and then to change the medicine, if called for. Not until November did the mother report that these remedies occasioned a slight but transient amelioration; and as by the end of December another remedy prescribed by Dr. Brust brought no change, she desired that Dr. Held should assume charge of the case, which, being fairly overwhelmed by letters from the family, the doctor finally consented to do. Then it came back to his memory that the late Dr. Wahle once told him, while speaking of remedies but seldom used: "Whenever you have a spinal affection in hand, where symptoms recur at a certain hour, then give with closed eyes (without second thought) *Rana bufo*, but give the preparation that my father made, and you will be surprised at the brilliant result." In remembrance of the counsel of so deep a thinker, Dr. Held sent the patient a small vial of *Rana bufo* 6, and one of the 15th potency, with the direction to dissolve 10 pellets in an ordinary glass full of distilled water, and to take three swallows of this a day. On January 30th she commenced, and took this remedy for eight days, then paused for six days, and then took the 15th potency in the same way for eight days, then paused for six days, and then reported.

A report from March 6 related that on February 19th, *i. e.*, at the time the taking of *Rufo* 15 was ended, the evening attack did not appear. On February 25th, the attack that always commenced at 2 P. M. ceased, and on February 27th, she gave (without orders) *Bufo* 6 for 4 days; this was followed on March 1st by slight contractions of the arms and legs for ten minutes. On March 2d the morning attack ceased; this had been growing perceptibly weaker for several days, and from March 3d the patient was free from all attacks, and then the remedy was stopped, the more so as the last dose of *Bufo* 6, occasioned palpitation of the heart, and disturbed her night's rest. Her spirits rose, and

the general condition was satisfactory. Only the anæmia and the paresis had now to be overcome.

On April 1st I ordered *Natrum mur.* 30, morning and evening, 5 pellets in water, to be taken for 10 days, then pause. Towards end of April somewhat better; *Natr. mur.* 30, repeated, but only one dose in the evening for eight days, then *Sacch. Lac.*, all through May. By the end of that month everything was much better except the paresis. Appetite was good, patient liked meat. The pallor of the face gave way to a healthy complexion; gums and lips had more color. Menstruation had reappeared, though scanty. *Plumbum met.* 30 had a favorable effect on the paresis, so that patient could sustain herself on the legs for a few minutes without assistance; but locomotion was impossible. In August she used for three weeks the bog-baths of "Marienbad" with good success. She could walk at first with two canes, afterwards with one. Menstruation appeared same as before the attack; she was cured. She made an extended travelling tour with her mother, returned to Krakow on October 1st, and attended a wedding about the middle of the month, at which, as well as on later occasions, she danced as blithely as any of the rest—much to the astonishment of all Krakow.

It gave us a good deal of satisfaction to reproduce this interesting case *in extenso*. It shows, as Dr. Held is fully justified in maintaining, the vast superiority of the Homœopathic over old-school treatment. And it reminds each one of us never to despair even in the seeming most hopeless cases.—*Allgem. Hom. Zeitung*, July, 1891.

SABAL SERRULATA.

By Will S. Mullins, M. D.

There has come to us Homœopaths within the last few years a remedy, the need and lack of which has left many a suffering man, and many a girl or woman, feeling "quite blue." The man because his prostate gland was too large, the girl or woman because her mammary glands were too small. The tincture of saw palmetto berries certainly fills a "long felt want."

Eighteen months ago, I commenced a series of clinical experimentation with the tincture of the berries, and with no specific indications or characteristic symptoms except the following broad pharmaceutical one: "It has special action upon the glands of the reproductive organs, tending to increase their activity, to

promote their secreting power, and add greatly to their size." Instantly the thought flashed through my mind of the great number of enlarged prostates in our city, of the greater number of women yearning and wishing and praying for larger breasts. I also knew that the ones with the enlarged prostate, the ones with small mammary glands, would gladly avail themselves of anything to decrease the one and add a charm of increased size and beauty, of velvety, downy softness to the others.

The first time in my life, and for purely scientific research, I went fishing for patients.

I found all I wanted, and the results obtained enable me to say, I am glad God brought into life and growth saw palmetto berries; yea, more, many men and several women are gladder still.

An old man, aged seventy-eight years, says that for last twenty years has had an enlarged prostate: despite all old and new school medication, that gland grew and flourished until his urine—from the glandular encroachment—had to be drawn with a catheter twice per day. Throbbing and pain in the prostatic gland extended to the testicles. Examination found the prostate as large as a small egg.

R. Tinct. of Saw Palmetto $\frac{3}{4}$ ss.
 Aquæ destillata. $\frac{3}{4}$ iv.
 M. Sig. One teaspoonful every two hours.

Within three days could pass some water night and morning, but failed to completely empty bladder.

Same prescription continued ten days, after which, with some straining, could do away with the catheter. Pain and throbbing in perineal region lessened. The prostate decidedly decreased.

Thirty days from time began remedy, micturition, three times per diem, slight straining. Examination revealed the gland reduced one-third. Took the remedy in much smaller doses for three months; prostate reduced over one-half.

Y., aged thirty-four came to me from an old-school M. D., after eighteen months of heroic treatment, mingled at times with damnable torture, having through their wise (?) and scientific (?) course of treatment already parted with one testicle.

Symptoms: Constant throbbing pain and tenderness in prostate gland, dull aching; at times, sharp cutting pains, extending to the right and only testicle. Epididymitis orchitis.

Pain on micturition, passes prostatic juice at every stool and when making water. Mucus at times, also a yellowish watery discharge from urethra; pulse, 96; temperature, 102.

Treatment as follows: Strapping the scrotum. Internally,

Aconite and *Clematis*. Called next day and found pulse 80, temperature, 100. Prescribed *Puls.* 30 and *Clematis* 6. Examination revealed enlarged prostate as a source of all his trouble. Was able to come to the office the next day. Prescribed the palmetto tincture, ten drops every two hours. After three weeks' use there was a decrease in the size of gland over one-half. Has now been under the same medication two months and a half. Neither mucus nor prostatic juice passes. Has gained twenty pounds in weight. Gland as near normal as is generally found in men who have been married a dozen or more years. Now taking saw palmetto, five drops, twice per diem.

Mr. Y., aged fifty-three, complains of some throbbing and tenderness in the region of the prostate gland; sexual weakness, erections too weak, and very little thrill.

Prescribed *Sabal serrulata* tincture, one dram in three ounces of water; M. Sig. two teaspoonfuls four times per day. After three weeks' medication, reported himself well.

Miss N., well-formed, consults me as to some way to enlarge her breasts. Prescribed saw palmetto tincture, five drops four times per day. Has now been under medication three months, with an apparent and satisfactory, yet slow increase in size of mammary glands.

Dr. P. Thompson, of this city, president of our State Board of Health, at my suggestion, prescribed saw palmetto for an old man of fifty-three with an enlarged prostate, and weakened sexual vitality. Not being a Homœopathist, he gave it in dram doses, four times per day.

Reports decided increase in glandular enlargement, and renewed sexual activity.

He also tells me he has been giving it to an old lady over sixty years of age, who has suffered for years with a bronchial cough, and with a decided improvement in her condition.

Have treated several other cases of prostatic troubles with just as satisfactory results.

Now, one must certainly conclude that in the *Sabal serrulata* we have a grand and precious remedy, specifically affecting the organs of generation in male and female.

Its indications, gathered from a clinical standpoint, are, in the male, enlarged prostate with throbbing, aching, dull pains; discharge of prostate juice; at times, discharge of mucus; also a yellowish, watery fluid, weakened sexual power, loss of thrill, orchialgia, and epididymitis orchitis, when associated with an enlarged prostate.

In women, weakened sexual activity, ovarian enlargement,

with tenderness and dull, aching pains; small, undeveloped mammary glands.

Also indicated in chronic bronchitis, with a wheezing, hard cough, worse on lying down and until 6 A. M.; worse in damp, cool, cloudy weather.

I trust these clinical facts will cause a further investigation of this precious remedy, which has already proved in my hands to be fraught with certain specific powers. It will certainly add more richness to what is already, to every true Homœopath, our precious materia medica.—*American Homœopathist*.

Henderson, Ky., July 27, 1891.

SUCCUS CALENDULÆ.

PENDLETON, ORE., Sept. 18, 1891.

I am using the Succus Calendulæ in spray, 25 per cent. sol., and on dressings to everything "raw" which comes in my way, and it is healing everything I am using it on. I never have seen anything equal to it. It stimulates granulation when wanting and modifies the same when too prolific, and is in every way an ideal local application.

Yours very truly,

H. S. GARFIELD.

To Messrs. Boericke & Tafel, No. 36 E. Madison St., Chicago, Ill.

CLINICAL CASES FROM FOREIGN JOURNALS.

Translated for the HOMŒOPATHIC RECORDER.

ANTIPYRIN—SYMPTOM. Mrs. K., of full-bodied, phlegmatic habit, was troubled every time she took *Antipyrine*, with a rather large vesicle on her lip, from which she suffered acute pain. But seldom will such a regularly recurring symptom be observed, and it certainly deserves particular notes as of clinical Homœopathic value. This remedy would seem to be related to *Rhus*, *Croton*, and especially to *Condurango*, although the last has flat ulcerations with rhagades in the corners of the lips.—*Dr. S. in L. P. F. fur Hom. for Oct. 1, 1891.*

GRAPHITES.—An elderly gentleman of spare habit, cachetic look, with complexion such as is seen in cases of carcinoma of the stomach, but withal bright and talkative, without any

difficulty of respiration, consulted me because of a pressing, stitching, boring pain in the region of the navel, also extending to the hypochondres and the small of the back. This pain prevented falling asleep until late in the night. This chronic ailment had decidedly increased during the last four or five weeks, and is accompanied by habitual costiveness.

In the morning patient feels best, while in the evening a decided aggravation sets in. At times a certain faintness was experienced which assisted in determining the remedy; for *Graphites*, is often indicated in anæmic conditions, such as paleness of face, decrepitude, etc., which explains its usefulness in convalescence from severe sickness, if accompanied by an annoying costiveness. *Nux vom.*, very useful in such cases proved of no effect, but *Carbs veg.*, ameliorated, and just this circumstance drew my attention to the mineral coal, *Graphites*, so effective in Homœopathic hands. Within eight days a great improvement was effected. Particularly grateful seemed to be a slight secretion of mucus, which seemed to come from the stomach, and which was expectorated without difficulty. The evening aggravation has ceased, and the tongue, until then rather dry and of a yellowish color in the middle, is now clean with a natural degree of moisture.—*Dr. Foullon.*

TYPHLOITIS STERCORALIS RHEUMATICA.—On May 30th, I was consulted by the proprietor of a flour mill, who complained of pains in the abdomen, without being able to locate them. The tongue was coated, with loss of appetite, and the man looked quite sick. The cause was a cold contracted during an evening walk. I gave *Bryonia* 1x, a dose, in water, every three hours. Very early next morning a messenger called me to the neighboring village, the patient being much worse, pains having prevented sleep all night. On examination, I found the corpus delicti in a rather hard swelling in the right side, which seemed to consist of a fecal impact, the usual accompaniment of an inflammation of the cæcum. The swelling was circumscribed, and of a uniform hard surface, not knotty. As I could not detect any error in diet, I was forced to declare it a case of rheumatic catarrhal typhlitis. There was no meteorismus, but patient was very restless and sleepless on account of pain, and could not take the least food without aggravating to intensity the abdominal pains. Even the harmless cocoa-shell tea made aggravations, as well as a drink of water. Prescribed *Bryonia* 6, and as patient had undoubtedly grown worse during the protracted ride in the cars and on a wagon while going home from my office the pre-

vious day, and as a cold was the primary cause, I prescribed *Aconite* 6 in addition to the *Bryonia*, and also gave patient in case he evinced a desire, thin farina gruel in water. I also ordered a warm cataplasma of bran over the swelling, and patient was directed to rub in some warmed poppy seed oil.

By the next day a decided amelioration was noticeable: the swelling was about the same, but he had slept an hour at a time, liquid food was tolerated better, and a copious perspiration had followed the exhibition of *Aconite*. Constipation existed since twenty-four hours, but he did not seem to be inconvenienced thereby, and as I had every confidence in the efficacy of *Bryonia*, which was still administered right along, I abstained from interfering with the usually so hastily administered clysters of soap-water. *Belladonna* was now substituted for *Aconite*. Patient sends a report, written by himself next day, that the painful induration seemed to diminish under the embrocation with the oil; it is smaller and softer, doesn't pain as much, on lying quite still; feels no pain now only on moving or rubbing in the oil; some discomfort is occasioned by incarcerated flatus, which, in fact, was the chief complaint of patient from the start. The letter closes with: "Sleep was good, have had no passage since Wednesday (two days); true, I ate very little. Whenever I eat or drink it still occasions discomfort. I have a good appetite." *Bryonia* is continued alone at longer intervals, inunction with oil is dispensed with; he still gets no clyster, I allow him to eat some cooked prunes (without their skins), and to drink the juice, but still strictly prohibit all solid food. On June 4th he reports that he had a voluntary passage on that and the preceding day; pains have ceased; was up several hours each day, but still feels very weak. As it may safely be stated that with returning voluntary stools, convalescence is established in cases of Typhlitis, it will be seen that this serious case was brought to a favorable resolution in from four to five days. In this case, under the continued use of *Bryonia*, copious spontaneous evacuations were brought about, the induration vanished, and merely left a sensation "as if something had become shortened" at that point, as I was informed later.—*Dr. H. Goullon, Jr., in Pop. Hom. Zeitung, Vol. IX., No. 1.*

SILICEA IN CANCER.—Among other things I found in a manual on Pharmacology by Schroff a remark, in speaking of *Natr. silic.*, that the late Prof. Schuh, one of the most prominent surgical authorities in Vienna, had recommended *Silicea* in cancer. I am in a position to furnish some precise information on the subject.

A number of years ago I treated a patient who had two scirrhus, highly painful nodules in her left mamma, on which I seemed to be unable to make a favorable impression. Finally the patient yielded to the entreaties of her relatives to consent to an operation, provided I would go with her and be present during the operation. Her wishes were complied with, and I proceeded with her to Vienna. At my instigation Prof. Schuh was called, who on examination declared his willingness to perform the operation. He preferred, however, not to be required to give an anæsthetic, as in his opinion without it a favorable result could more readily be promised. This entirely coincided with my views, and on the succeeding day the operation was performed in a masterly manner in thirteen minutes. On taking leave he requested my company, as he had an interesting communication to make alike important to me and the patient. During our walk he related the following, which I will endeavor to give in his own words: "Three years ago I was called to see Prince S., whom I found afflicted with cancer. The success was, frankly stated, unsatisfactory, though I did everything known in surgery for his alleviation during the succeeding two months. One day the Prince expressed a desire to give the much praised Homœopathy a trial, and that therefore he would like to interrupt my treatment. Accordingly Dr. Fleischmann was called, prescribed for the Prince, and what I casually heard a few weeks after, spoke much in favor of Homœopathy. A few weeks later I met Dr. F. on the street, accosted him, and asked how the Prince fared. And much to my astonishment he stated that within three weeks of the change of treatment the case assumed a totally different, even benignant, phase and that the Prince could be classed as convalescent. I was informed that the only remedy administered had been *Silicea*. I was firmly resolved to give this remedy a trial in similar cases; and though I could not get myself to use such infinitesimal doses I yet had *Silicea* triturated with sugar of milk in the proportion of one grain to 100, and, in my experiments, gave a few grains morning and evening. The first case that presented itself was the wife of a high civil dignitary, whom I had operated upon for the second time a few weeks before, and all indications tended to show that the malignant nature of her case was as virulent as ever. After a two weeks' use of *Silicea* the appearance of the wound was much improved, and in three weeks more the wound had closed and the patient remained cured. Since that time I have used this remedy in scirrhus cases, sometimes after the operations, sometimes when it seemed yet in time, even without an operation, and I must confess the success

was, as a rule, very gratifying; and now I request you to give this remedy in the same strength, and prepared by the same druggist, to your patient." And so I did exactly according to his directions. After a six weeks use of the *Silicea* the very considerable wound was entirely healed, and to-day, after more than twenty years, it has not reopened.—*Dr. Hirsch, of Prague, in Pop. Hom. Zeitung, Vol. IX., No. 4.*

HÆMORRHOIDS.—Mrs. R., æt. 25, of gracile constitution, but otherwise perfectly healthy, was troubled with mucous hemorrhoids, and, especially since about a year, to such an extent that after sitting for some time her underclothing was fairly saturated. The copious secretion was mucous, similar to white of an egg, stiffening the clothing. *Carbo. veg.* 15th brought, after a few days, considerable amelioration, which, however, lasted but a short time; the same was the case with *Carbo veg.* 3. Finally I administered *Antimon. crud.* 6, which on the third day already perceptibly diminished the flow, and the continued use of which, mornings and evenings, brought about a perfect cure within three weeks.—*In P. H. Z.*

HERPES.—Anna B., waiting maid, was troubled since several months with an herpetic eruption in the form of dark red spots, with a rough surface, on the left side of the neck, and later also on the left arm, on the back and on the right thigh. The form of the spots was mostly oval and some of the largest had attained the size of an egg. Only at rare intervals was she troubled with itching, her general condition being good. *Graphites* 2d trit., a few grains morning and evening, caused the herpes to become pale; they ceased to itch, and at the end of the third week the cure was complete.—*In P. H. Z.*

KALI BICHROMICUM.—Mr. U., a rare specimen of extreme obesity, who could with éclat have passed as the fat man in any museum, was afflicted with a chronic accumulation of phlegm, seemed fairly to be filled up with it, especially in the mornings. The usual domestic remedies, also all kind of mineral waters, were of no avail. I concluded that not much could be done for him. Evidently all internal organs had more or less of a fatty degeneration, which, in fact, was fat to whoever saw this formless colossal body. However, I prescribed a low trit. of *Kali bichr.* (2x) and ordered him to take a few grains in hot water every evening. Within about two weeks patient was able to resume his walks, extolling to the sky that wonderful powder.