

PERSONAL.

We all agree that "practice what you preach" is a good doctrine, but how many would be willing to "preach what you practice."

"Doctors all over are recommending not only the bicycles but the bloomers and all the new-women attachments." Dr. M. T. Martin, in *Medical World*.

Dr. C. E. Fisher has removed from Chicago to New York. What is Chicago's loss is New York's gain.

A RARE OPPORTUNITY. A physician of over twenty-five years' practice will rent office, with practice, on favorable terms; five years' lease, with privilege of renewal (accepted security). Retiring from practice on account of ill health. Call on or address W. RIDDLE GILLMAN, M. D., N. E. Cor. Ninth and Reed Sts., Philadelphia, Pa.

According to Benjamin Harrison, who ought to know, the President of the United States, is not officially notified of his election. He learns the fact through the newspapers and "just presents himself for inauguration."

Within a few weeks after the discovery of diphtheritic serum eminent scientists, all the way from Tokio to Poker Flats, announced the discovery of "serum" for all the ills of humanity.

"Who are 'allopathic' physicians, anyhow?" asks the *Buffalo Medical Journal*.

The fluid extract and drug store "tinctures" resemble the true Homœopathic tincture about as closely as a worm eaten dried apple does an apple just from the tree.

Dr. Hering will continue his interesting papers in March RECORDER. Last paper was received too late for February.

Dr. A. Becker has removed from 530 Milwaukee to 560 Chicago avenue, Chicago.

All things considered, we are inclined to think that "Jude the Obscure" was deservedly so.

The number of physicians who pin their faith to the law of similars is constantly increasing.—*Arndt*.

Potassiumorthodinitroresolate is the latest pharmaceutical from Germany. Push it along.

Dr. J. M. Hinson has removed to 391 Boylston St., Boston, Mass., where he will devote himself to eye, ear, nose and throat cases exclusively.

"I have decided to do no more forging around but to rely upon a firm I can have confidence in." From B. & T.'s mail.

Malcolm & Moss' *Regional and Comparative Materia Medica* is growing in favor as its plan becomes better known.

Boericke & Tafel are out with a new "Physicians' Price Current," for 1896. The cover is a beauty. Contents right.

Guess there'll be no war and we'll all go over to the Fifth Quinquennial, at London, in body or spirit and shake hands instead.

Boericke & Tafel have bought out the remainder of the edition of Dr. Dudgeon's translation of *The Organon*. A superb work that, notes alone worth the price of the book.

And lastly, subscribe for the HOMŒOPATHIC RECORDER.

THE HOMŒOPATHIC RECORDER.

VOL. XI. PHILADELPHIA AND LANCASTER, MARCH, 1896. No. 3.

EPIDEMIC DISEASES.

Influenza.

Influenza is usually spoken of as if the term expressed a certain well defined disease, having one definite cause, one definite poison, and a series of uniform and definite symptoms. To speak of it thus is an error, and may lead, and doubtless has led, to disastrous results in treatment. Since 1889 we have had three distinct epidemics of disease all called by the name Influenza. Now no two of these three epidemics presented the same symptoms, and no two were amenable to the same remedies, as I found by experience. These three epidemics were in fact three distinct diseases; and still they all went by the same name—Influenza. Perhaps this was inevitable, for it would be difficult to find new names for every new epidemic. But it is nevertheless important that we should not be led into error by mere names, as has too often been the case.

There is no more typical example of the epidemic or aerial class of diseases than is Influenza. To discover its cause has baffled all our materialistic philosophers. They have made sundry guesses, and some of these guesses have been so absurd, so far-fetched, that we stand amazed at the credulity of the propounders of them. It is really shocking to reflect upon the stupidity of mankind in general, and of medical philosophers in particular. Men whom we have been accustomed to respect for the solidity of their judgment and the justness of their conclusions in other respects, have, when speculating upon the causes which may have given rise to Influenza, proved themselves quite unworthy of their position as leaders of science. They have talked about "the floods in China," the origination of "a morbid germ in Russia," and I know not what besides. All

have been intent upon finding some *material* cause. They have all, with only two exceptions in England, ignored the existence of the influence of other worlds, or of all other atmospheres save that which the books on chemistry told them was composed of 21 parts of oxygen and 77 of nitrogen. Their ideas are stereotyped; all things, they seem to believe, must continue invariable—as it was in the beginning, so must it ever be, world without end.

Turning to a copy of the *Homœopathic Review* for October, 1891, I came across the review of a book by Dr. Parsons. The book is entitled "Report on the Influenza Epidemic of 1889-90. By Dr. Parsons, of the Local Government Board." It appears that the conclusions at which Dr. Parsons has arrived are extracted from the answers which he has received from questions put to "medical officers of health and others."

Here are some of the conclusions: "The epidemic, as a rule, follows the lines of human intercourse, and does not travel faster than human beings, parcels, or letters can travel." Presumably this means that human beings, parcels, and letters conveyed the infection of Influenza, which is altogether a false hypothesis. The disease was not spread by infection. The epidemic, therefore, had nothing whatever to do with "the lines of human intercourse," for it made its appearance here, there, and all over in a most erratic manner, and was completely untraceable.

"It is independent of season, climate, and weather." Quite a mistake this, for it was entirely dependent upon climate and weather, if these have any connection with our atmospheric air, which of course they have. It is true that *topographical peculiarities* made no difference; and if this is what is meant by "*climate*," then the statement is correct.

"The progress of the epidemic over the globe (starting from Russia) has been more rapid than in previous epidemics."

It has always been a common belief in England that Influenzas originate in Russia. Needless to say, this is a vulgar error; but *scientific* men should not follow in the wake of popular superstition. It is said that the Russians locate the *fons et origo* of Influenza in China, and that the Chinese refer it to Japan; of course no one could suspect that such a scourge would originate in our own Islands! The fact is Influenza did not originate in any country. It was not any mundane emanation; as I shall by and by endeavor to show. The next statement is amusing:—

"The bacteriology of Influenza is not yet settled, and the germ is still at large defying the detective powers of nations." It is, to do them justice, highly creditable to our scientific men that none of them claim to have discovered the *germ* of this disease. It is true there is no germ to discover, but this fact may not prevent some future genius from announcing that he has found it! So far, it appears, and no doubt the statement is true, the germ has defied "the detective powers of the nations." A most comprehensive declaration this.*

"Sifting the mass of evidence as to the etiology of Influenza, the author finds that the epidemic has been propagated mainly, if not entirely, by human intercourse, though not in every case necessarily from a person obviously suffering from the disease. The contagion once imported into a locality *may* propagate itself outside the human body in such media as damp ground or air contaminated with organic exhalations; but the fact of adjoining communities suffering at different dates seems opposed to the notion of the poison traveling far through the air. * * * It is possible, the author goes on to say, that the *specific germ* of the disease may multiply in appropriate media, e. g. in damp organically-polluted confined air, outside the human body."

Here we have the hypothetical "specific germ" again, which, however, has eluded "the detective powers of nations." The whole argument is a pure speculation of groping in the dark. It begins without a premiss and ends without a conclusion. Mark the next sentence.

"Knowing nothing of the causation of the disease we cannot scientifically and logically suggest measures for its prevention."

We were just now informed that the "*specific germ* of the disease may multiply," etc. Now we are told that "we know nothing of the causation of the disease!"

"Chapter X," says the *Homœopathic Review*, "is amusing, but is from the pen of another Medical Officer of the Local Government Board—Dr. Low. He has investigated the epidemic in Lincolnshire and East Yorkshire, and the suggestion is made that the epidemic began in Lincolnshire. The germs travelled over from somewhere and landed at Boston or Grimsby. Finding the soil of Lincolnshire to their liking (being an old malaria soil) the germs prospered and multiplied and wandered or were carried into other parts of Lincolnshire and elsewhere."

So after all, the Russian Influenza began in Lincolnshire! It

* All the quotations are from the *Hom. Review*.

is hardly worth our while to pursue these vagaries further, for they are not exhilarating specimens of either professional or scientific acumen.

I have intimated that amidst the general chaos which prevailed concerning the etiology of Influenza there were two men in England who attempted to make something like a rational explanation of the cause of the epidemic. These were the Rev. Thain Davidson, a Presbyterian minister, and Sir B. Richardson, M. D.

The following newspaper report will explain the Rev. Dr. Davidson's theory:

The Influenza.—a New Explanation.

Before proceeding with his sermon to young men last evening (Sunday), in Colebrooke-row Presbyterian Church, Dr. Thain Davidson spoke as follows: Everyone is just now talking about the Influenza; and all congregations are being affected by the prevailing epidemic, which is not so much a local or national as a terrestrial visitation. All kinds of theories are being broached to explain or account for it; but I have one to offer which I have not seen suggested, and which is by no means so fanciful as you might at first suppose. So long ago as the year 590 our globe passed through the tail of a comet, with such results that, as history informs us, the whole world was set sneezing; and it is more than conceivable that there was some truth at the bottom of this belief. It is well-known that the material which forms the appendage of a comet is a gas or ether so extremely attenuated that (as Sir John Herschel showed) you might look at the sun through a stratum of it a million of miles in thickness, and it would be only like the thinnest gauze. Moreover, the whole mass might not weigh more than a few ounces. Quantities or clouds of such materials are wandering about in space, though there be no head or nucleus attached; for just as there are comets without tails, so there are comets without heads, and, as a recent high astronomical authority asserts, "the tenuous matter is sometimes permanently lost to the body from which it emanated; and science does not pretend to track its further wanderings through space." There have been periods—possibly due to the same cause—when a singular and pungent odor, like that of chlorine, has been perceptible all over the world. Is it not conceivable that our planet is at present bowling through some such mass of rarest gaseous matter, which,

mingling with the atmosphere, produces those strange and uncomfortable effects which so many are now experiencing?

To some persons this hypothesis will appear to be rather fanciful, if not actually Quixotic. But before deciding to reject the theory I hope each one will suspend his judgment until the view of Sir Benjamin Richardson has been read. This is rather too long for the present article, so must wait until next month's issue of the RECORDER.

G. HERRING.

London, England.

TO CURE OR NOT TO CURE.

"One reason why Homœopathy does not move at the same rapid rate as it did in its early days is that many Homœopaths have ceased to believe that it is possible to *cure*. The old Allopathic notion that diseased conditions may be *treated*, but that who pretends that it is possible for them to be *cured* is *ipso facto* a quack, has taken possession of the minds of many Homœopaths, especially if they happen to be overweighted with scientific distinctions gained in the course of their passage through the Allopathic degree-conferring mill.

"Not in entire forgetfulness,
And not in utter nakedness;
But trailing clouds of [darkness] do they come
From their [Allopathic] home."

And more's the pity! For the clouds are apt to be so very thick and impenetrable that for all therapeutic purposes the bantling might just as well have never taken the trouble to be born at all. For true it is that only when the doctor's mind is stripped completely naked of the Allopathic notion that diseased conditions are incurable, and when this has been replaced by the genuine Homœopathic idea, that the business of the 'Doctor,' 'Physician,' 'Healer,' 'Medical Practitioner,' 'Therapist,' or 'Curer,' is to CURE, and that in whatever degree he comes short of this is he either a failure or a fraud, will the faculty of curing be expanded and developed to its proper dimensions. The genuine curing art is only as yet in its infancy, and for any man or number of men to set themselves up to say what are the limits of the curable is not only the height of presumptuous folly, it is a cruel imposition to boot."

"Among those who have thoroughly grasped the idea that the business of the 'Doctor' is to cure, there is no one at the

present day who is doing more strenuous and more brilliant work in exposing the fallacy of the old doctrines in the most telling of ways than the author of the work (*Delicate, Backward, Puny, and Stunted Children*) we have now under review."

"With the usual inconsistency of the bigoted, whilst denouncing the Homœopath for daring to lay claim to the possession of a means of cure, the old school almost unanimously admits that one disease is to a large extent curable, and that is syphilis. They even advocate a period of anti-natal treatment when either parent is known to be or to have been affected with the disease. But why should syphilis be an exception to all other diseases in the matter of treatment? Dr. Burnett has long ago shown that in the matter of the anti-natal cure of congenital defects syphilis is no exception. He now comes forward to show that congenital defects both of mind and body are curable if rightly treated even many years after birth. To those who have eyes to see, Homœopathy has many opportunities of tracing morbid states to their sources which Allopathy knows not of. Allopaths are mightily proud of themselves when they can trace coarse structural alterations in children to parental diseased states. How much more than this Homœopathy can do, we must refer our readers to Dr. Burnett's little book in order that they may find out for themselves. In the meantime Dr. Burnett shall give his own account of it in his 'Foreword.'"

"In his daily work the practical physician meets with a number of abnormal states that are not readily classified: I refer more particularly to those abnormal conditions of children that I have attempted to indicate in the long title of this little treatise. We say of certain children that they are delicate, backward, peculiar, odd, stunted, puny, and the like, without being able exactly to state what disease they are suffering from. The development of a given child receives a shock from a fall or fright; or its further growth is arrested by some acute disease, such as measles or influenza; or a child is glum, taciturn, excitable, or what not, and yet people hardly know what is wrong or how to set about putting the wrong right. Again, some children do not see, hear, or speak properly; or they are unclean in their habits, wet their clothes or their beds, and cannot be taught nice, sweet ways like their fellows.

"This little work is intended to show that such abnormalities depend upon physical conditions that can be put right by properly chosen remedies, and in no other way so well."

"Dr. Burnett has done a most useful work in delineating the *diathetic* indications of a number of remedies, more especially the nosodes; and all who would be abreast of the times must make themselves familiar with his writings. That his observa-

tions recorded in this little book, marvelous as they may seem, are none the less genuine, our own experience is amply sufficient to confirm."—*Homœopathic World*.

HOMŒOPATHIC THERAPEUTICS OF SKIN-WARTS.

Translated from *Berliner Zeitschrift fuer Homœopathie*.

The Skin-warts are of such common occurrence that they are lightly thought of, same as other pathological phenomena of everyday occurrence, but which are nevertheless not at all unimportant for the healthy condition of our organism. Whenever they are noticed it is out of cosmetic considerations. It can certainly not be disputed that their appearance on the hand or even on the face in great numbers and ugly forms is enough to disfigure the finest hands and the most handsome face and many a well-formed miss would give anything to get rid of them.

If they are removed surgically there is generally left a not less disfiguring scar and hence the gain for cosmetic is very small.

Homœopathy, following in the wake of Hahnemann, recognizes in these malformations of the Skin-tissue more than a local disease and dares to include warts in the dominion of internal medication.

In this effort she has met many high triumphs.

Histology teaches us that Skin-warts are not only a thickening of the epidermis, but that they are based upon a morbid development of the papillar bodies. They are forming out of small red spots which rise to reddish, transparent little hills. We can observe with the magnifying glass that they stand in more or less regular lines, rows or squares which arrangement they owe to the peculiar position of the papillæ of the Skin. The skin covering the little hills changes at first very little, but later on becomes thicker, duller looking until at last the lines separating the single papillar growths are irre recognizable.

The warts sit either smoothly on a broad flat basis or are thicker toward the top like a stem or split in numerous parts, for instance when the papillæ, grow much and the covering of the epidermis is rent and peels off (Crown-warts.)

Through every papillæ runs a small vascular twine which causes bleeding whenever we cut into a certain depth. Pedunculate warts can easily be raised up from the skin together with the papillæ which form their basis, but they grow mostly again

in the same place. If the warts are left undisturbed they usually remain for a long time, often for a life time unchanged, but disappear sometimes spontaneously. If irritated by scratching, cutting etc., they become inflamed, the horny layer of the epidermis is knocked off and a lively cell formation on the surface of the papillæ gives the wart the form of an abscess with papillar basis. In the cuticular layer of such maltreated ulcerating warts form sometimes an ulcerating papillar abscess, yes even an epithelial cancer.

Regarding the ætiology of warts, we find that a single wart on the fingers may be of purely local origin such as pressure, but when they appear on the face, on the nose or on the upper extremities often in great numbers the cause is undoubtedly a constitutional one. The father of the Science of Medicine, Hippocrates, has already made in his Aphorism III, 26, the interesting remark that he finds on children besides other diseases (tonsillitis, swollen glands, etc.), often pedunculate warts. We, in fact, observe these skin formations, especially frequent at a youthful age, particularly on girls at the time of puberty and often in great numbers and disfiguring form on the fingers or middle-hand. At maturity and when the body gets stronger they disappear themselves, but an anæmic hydrogenoid constitution retains them often for years, yes for a lifetime. They have been especially observed on young people who are addicted to masturbation, as they suffer often, not only from a deranged nervous system but from anæmia and hydræmia, as well.

After these general remarks we will endeavor to collect the material of cases which the Homœopathic literature supplies, adding some of my own observations.

We will, however, let the remedy precede the cases just as in Homœopathy the physiological proving on the healthy precedes the clinical experiment. As a remedy for warts we find first of all:

Dulcamara. Hahnemann and his disciples proved this important remedy (which had a good reputation before) very early and discovered that it develops an extraordinary effect on the skin-tissue. It is said in the *Observation of Others*, Vol. I, R. A. M., 279: "The hands were covered with a kind of wart such as he never had before." Espanet describes these warts as smooth, sometimes transparent; they rise quickly and appear in numbers. The face and hands are chiefly affected. Our literature unfortunately contains very little of this clinical experience with

Dulcamara. Only Knorr recommends its use for warts, especially on the face.

Rhus. The wart generating effect of this remedy is more suggested than definitely spoken of. The proving says: The parts of the skin coming in contact with the juice became thick and hard as leather. The juice makes the skin hard as dressed leather; after a few days the hardened places peel off. Knorr (*Allg. hom. Zeitung* V, 321) says:

I have found *Rhus* 12, 15, 30 a few drops repeated, only useful against such warts (and this in many cases) as infest the fingers and hands, have a broad base, are of the size of a lentil, a pea or larger, fleshy at the base, but consist in greater part of a horny, coarse, uneven, thick epidermis, feel rough to the touch and hard like a brush, are not sensitive, the surface of a dirty yellow-gray color and at times covered with black bristles, diminish gradually in height and circumference, until the hard cicatrized surface can be rubbed off with the finger and the healthy smooth skin appears. These warts disappear slowly.

Case. A woman thirty years old, short, sanguine, had large and small warts on both hands which resisted all irritating treatment so far.

Prescription: *Rhus* 9, 1 drop. In two weeks they began to get smaller and in three weeks the smallest disappeared. Those left were treated externally with *Rhus* 6 and permanently removed after two weeks more. *Arch.* VI, 2, 21. Gross.

Thuja. This potent remedy, thoroughly proved by Hahnemann and his followers is the wart remedy par excellence. But not only do simple warts on the skin yield to this remedy but it is found efficacious also in figwarts or condylomata forming on the genital organs and immediate surroundings, of sycotic and syphilitic origin.

As characteristic peculiarities of the *Thuja* warts will be observed: their broad base and conical form, and the fissuring of the outer covering of the older and larger ones.

Three children of Dr. H. also took this remedy, *i. e.*, the potencies from the first to the thirtieth. None of the children experienced any subjective changes; but on the oldest boy, æt. ten, there appeared six, his brother, æt. four, had five and his sister, æt. seven, had three warts on the hands. On the oldest boy, who seemed to be specially predisposed, the number of warts increased even after he ceased taking the remedy until he had

twenty-two of different size by December 22d, while by that time those of the younger boy had disappeared, all but one. It is singular that in these provings this remedy, which usually produces a series of important subjective symptoms, seemed to have concentrated its whole force on the cellular tissues and to have spent it in the production of warts.

We shall now give some clinical cases:

Dr. Frank, of Osteracle, whose hands fourteen years ago were covered with warts, drove them away with antimonial soap. About four years ago there appeared at the left nostril a broad sessile somewhat moveable growth at which he often picked sometimes till it bled. In time a regular flat wart developed of the size of a pea. Dr. F. rubbed it several times a day with *Thuja* θ , and after a few days the wart became black with many fissures on the surface. The doctor removed this chapped surface with the knife and the growth increased again, but its surface remained smooth, hornlike. The doctor again applied the remedy externally, when the same change of condition as last time took place by the next day. He continued the same procedure, with intermission, and the wart steadily decreased in size, so that within four weeks it had entirely vanished.

Some interesting testimony relative to the wart-producing capacity of *Thuja* in favorable subjects is found in the records of provings of the family of Dr. Huber.

The doctor's wife, always predisposed to warts, had also one on the back of the left hand when commencing the proving. From June 18 to 28 she took ten drops of the mother tincture every day. While very little affected generally, there appeared on the fifth day several warty excrescences on the skin of both hands the size of millet seed; these increased in number until she had sixteen altogether. These differed in sizes according to the tinea of their appearance. Not until two weeks after the close of the proving did they cease to increase. The largest were the size of a pea, and with these the originally smooth surface had become fissured and rough; the others remained smooth. This condition lasted until the middle of August, by which time the prover observed that the larger warts collapsed; in the centre a small depression was formed with a hard raised rim. After awhile this elevation caved away and with it the wart disappeared. On September 10 there were still 8 warts left, and on December 12, five months after the proving, all but one small had disappeared.

A boy, aet. fourteen, of scrupulous habits, had thirty to forty warts, chiefly on the back of his hands. They varied in size from millet seed to that of a pea, the surface of the smaller ones was smooth and horny, that of the larger was rough, punctuated, resembling cauliflower. In consistency they were not very hard.

On October 6, patient received of *Thuja*, five drops, and continued same every evening, and he was directed to wash the warts with diluted tincture every day. Although the boy was quite irregular in applying the remedy, every one of the warts had disappeared by November 17, or within less than 6 weeks; not even a discoloration of the skin remained to show where they had been.

MAGNESIUM PHOSPHORICUM: ITS VALUE AS AN ANODYNE.*

By W. Theophilus Ord, M. R. C. S. Eng., L. R. C. P. Lond.
FROM JOUR. BRITISH HOM. SOC.

When I was a student, a well-known and successful old school practitioner gave me this advice: "If you wish to succeed in practice, remember that your first duty is to relieve pain; and to win the confidence of your patients always give some anodyne to those who are suffering."

This advice was of doubtful utility, for at the time it was given *Opium* and its alkaloids were the only real anodynes available. Since those days, however, the advent of the chemical compounds, phenacetin, antipyrin, exalgine and others, have enabled those of our brethren who ignore the law of similars to relieve neuralgia and nerve pain far more promptly than was possible for them a few years ago.

Now we, as Homœopaths, rightly consider that the value of such drugs is very restricted, and that, in fact, they more often do harm than good, and we believe that the "law of similars" is actually all-sufficient for such cases, when properly applied in the form of the correctly indicated remedy.

Here, however, we meet with a practical difficulty. Our *Materia Medica* is vast and our intellectual conception of its details is necessarily limited. When hurriedly called, perhaps

*Presented to the Section of *Materia Medica* and Therapeutics, November 7, 1895.

late at night, to a case of violent neuralgia, it must be a severe temptation to some of us (to which, personally, I have often succumbed) to give a good dose of phenacetin, or some similar drug, rather than compare minutely the symptoms—which it may be practically impossible to correctly elucidate at the time—and then to prescribe strictly in accordance with our guiding law.

And this is an important point, which, if we as Homœopaths intend to hold our own in such cases, must be faced by us. For I have known patients desert Homœopathy because an old-school practitioner, accidentally called in, relieved their sufferings by antipyrin far more rapidly than their regular Homœopathic attendant had been able to do with his *Aconite* or *Belladonna*.

Have we, then, any drug sufficiently Homœopathic to acute nerve pain to be able to compete successfully with modern old-school analgesics—to be, in fact, a Homœopathic anodyne, by which immediate relief to pain may be insured, whilst our specific remedy is correcting the pathological condition which has produced the neuralgia?

I believe that in *Magnesium phosphoricum* we have such a remedy, and since the drug, though largely used in America, has not yet gained a footing with us on this side of the water, I desire to give you a brief *resumé* of its action to-night.

Magnesium phosphoricum is one of the so-called tissue remedies, and was first used by Schüssler, the reviver of the old idea that those salts which exist as essential constituents of the organs affected, could be used as remedies in disease. It is undoubtedly true that *Magnesium phosphoricum* has been found by analysis in many body tissues, notably in brain, nerves and muscle. But it is not necessary for us to accept this as an explanation of its remedial action.

We know that certain foods, fish and especially oysters are rich in phosphorus, and we find them valuable as brain and nerve nutrients in disease, but the biochemical school do not therefore call them tissue remedies, as, to be consistent, they should.

As a matter of fact, Schüssler's theory seems little more than a peg upon which to hang the Homœopathic action of twelve valuable remedies, which behave strictly in accordance with the law of similars. These he recommends on the same indications and in accordance with the same principles by which Homœo-

paths have for long successfully prescribed the majority of them. Of these twelve remedies, *Calcarea phosphorica*, *Calcarea fluorica*, *Ferrum phosphoricum*, *Silica*, *Natrum muriaticum*, *Natrum phosphoricum* and *Natrum sulphuricum* are old friends, dished up afresh with their Homœopathic indications under the guise of the biochemical theory of their selective tissue action. The other five drugs had not been used Homœopathically before Schüssler introduced them, though they differ but slightly in chemical formation from those that have, and the indications for their use as given by Schüssler are obviously based on the provings of their nearest chemical allies as used by ourselves. Of these, *Kali chloratum*, the chloride of potassium, closely allied with the chlorate of potash (an old and well-proved remedy), has already taken its place as a valuable addition to the drugs which act specifically in chronic catarrhs of the middle ear, and is highly recommended in this condition by Professor Houghton, in his "Clinical Otology." We may then be encouraged to examine *Magnesium phosphoricum*, in the light of its Homœopathic indications, for it will prove, I believe, so valuable an addition to our *Materia Medica* that we can readily afford to overlook the dubious auspices under which it has been brought to our notice.

It is generally admitted that a compound of two elementary drugs possesses the leading properties of both of them, usually in an increased degree. Examples of this we have in the *Iodides of Arsenic* and of *Mercury*, the *Phosphate* and *Fluoride of Calcium* and many others. From this point of view, *Magnesium phosphoricum* comes to us with high credentials. The value of all drugs containing *Phosphorus* in nervous disorders is well-known, and of *Magnesium* we also have provings and clinical evidence that show its action on the nervous system to be marked and characteristic.

You will first wish to know what has been done towards establishing *Magnesium phosphoricum* on a well-proved foundation of its own. Although the remedy has not been thoroughly proved, enough has been done to clearly define its action, and to suggest definite indications for its use. It is not mentioned in our valued "Cyclopædia of Drug Pathogenesis," though the other salts of *Magnesium*—the *Carbonate* and *Chloride*, which were proved by Hahnemann and his disciples—both find a place there. The provings, such as they are, of *Magnesium phosphoricum* have been arranged systematically by Dr. H. C. Allen in