

Remark: On the 13th day of the month (early morning) the patient bathed himself without my direction as he had a pollution the previous night. Patient got a relapse or a paroxysm of the fever the same day and did not continue under my treatment. He was not cured with *Bar. carb.*, as he discontinued medicine and violated rules to be observed by patients. He resorted to Kabirajee treatment.

Case III. Patient, Ramzân Behârâ; age, 12 years; date of first attendance to dispensary, 12-8-95; 9 A. M.; disease, intermittent fever.

Symptom: Type, quotidian. Time, 1 P. M. Prodrome, yawning, stretching; chill slight, of short duration; *no thirst; horripilation;* heat slight whole night; *no thirst;* feels chilly with every current of air coming in contact; slept all night; sweat upper parts of body, upper extremities, thorax (anterior and posterior parts); *no thirst;* apyrexia complete. Bowels open occasionally; no stool yesterday, no stool this morning; had itch once but no itch now; tongue clean and moist, and some papillæ raised, as in aphthæ; enlarged spleen; pupils dilated; urine reddish occasionally.

Treatment: *Bar. carb.*, 3d (trit.), about a grain a dose, one dose just now, daily one dose.

Diet: Sago and milk.

13-8-95. 9:30 A. M. No fever yesterday; felt feverish heat this morning at about 5 A. M.; one stool this morning, free and formed; appetite good.

Attended one day more. Got no more medicine; placebo given 13th and 14th.

Result; Recovery.

Case IV. Patient, Matiar Rahmân Kahn Choudhury; age, 22 years; a student; disease, intermittent fever, three days. First came under treatment 21-8-95, 9:30 A. M.

Characteristics: Type, quotidian. Time, between 2 and 3 P. M. Prodrome, yawning, stretching. Chill severe, shaking for about half an hour; *no thirst; horripilation;* no aching of limbs or of head; not alternating with heat. Heat severe, restless; *no thirst;* continued till about 11 P. M.; headache on vertex, but not much; drank water once, taking some sugar candy, but *not for thirst.* Sweat scanty all over body; *no thirst;* lasting for

about half an hour, alternately with heat. Apyrexia, complete.

Bowels not opened yesterday, no stool to-day; day before yesterday had two liquid stools, of yellowish color, with slight bad smell. Since about four or five years he gets alternate diarrhœa and constipation; diarrhœa one day, then no stool three, four or five days; but since he has been at home (since about three months) this tendency of alternate diarrhœa and constipation has been less. Tongue broad and indented on both sides, colored on the posterior part. Urine reddish, passes with burning sensation. Giddiness of head since about four years. Intestinal worms, both thread- and *round-worms* seen occasionally. Taste insipid. Burning sensation of soles of feet and palms of hands, but sometimes this sensation increases with heat of the parts. His face and ears become red if he studies for few hours. Occasional, momentary burning sensation in the upper part of one eye-globe, then in the next eye-globe some days after this, but not simultaneously in both eyes. Headache on vertex with spasmodic contraction of nape of neck. This headache has been since three years. Headache increases with speaking, coughing, sneezing; *increases with lying down or with sitting; amelioration with standing and walking in the open air.* Before this fever had exposure to rain, though slight, and slept in closed, damp room. No appetite.

Mind weak, body weak; *increase of headache when thinking of it. Psoric.* Enlarged spleen. With some grey hairs on head.

Treatment: *Bar. carb.* 3d (trit.), about one grain a dose, one dose given, to be taken at about 12 o'clock, day.

Diet: Sugar candy.

22-8-95. 8:30 A. M. No fever yesterday and last night, but felt burning sensation of soles of feet and palms of hands last night; no stool; urine reddish; appetite good; sound sleep last night; taste good.

Treatment: Placebo.

Diet: *Khoi* and milk.

23-8-95. 9 A. M. Yesterday fever at about 3 P. M., with no chill but only heat and sweat appeared alternately, heat then sweat, again heat but less, then sweat, and in this manner the fever subsided. Bowels opened once yesterday, stool being normal, no stool to-day; urine reddish; no headache or heaviness of head yesterday during fever. Passed about four round-worms were found, all dead. Pulse full, slow and weak. Taste

better. Good sleep last night. Appetite good. Tongue broad but not so much indented,

Treatment: *Bar. carb.* 3d (trit.), one dose as above, to be taken as above.

Diet: *Khoi* and milk.

24-8-95. 8:30 A. M. Yesterday, feverish heat at about 4 P. M., with less severity than that of the day before yesterday, continued till 9 or 10 P. M. With no headache or heaviness of head. Sweat, with alternate heat about three times, with no thirst; one normal and free stool yesterday at about 3 P. M. with three dead round-worms; urine reddish to-day; no headache. Appetite better. Sleep good. Taste good. Spleen somewhat reddened. Scabies on body all healed.

Treatment: *Bar. carb.* 3d (trit.), one dose as above.

Diet: *Atâ* bread, milk and sugar candy.

26-8-95. 10 A. M. No fever and no other complaints yesterday; one normal stool this morning with no round-worm. Urine not reddish; tongue broad and indented on margins. Pupils dilated. Sleep not good last night. Appetite and taste good. Feels better.

Treatment: Placebo.

Diet: Rice, vegetable curry and milk.

Result: Recovery

Remark: The underlined conditions above well indicate the medicine. After the first dose administered it showed some show of improvement, I thought the first dose would do, so the next dose was placebo, but that was not the case, the symptoms got worse after the second dose. So the medicine was continued three days more, one dose per diem with full recovery. After the last dose was used the patient got his conjunctiva injected with burning sensation. This state of the eyes vanished with discontinuance of the medicine giving here a hint to us that *Bar. carb.* may produce the above conditions of the eyes.

Case V. Patient, Shiekh Ramzan, aged about 15 years. Disease. intermittent fever, since about a fortnight; date of first attendance to dispensary, 19-9-95, 7:30 A. M.

Characteristics of the case: Type, quotidian. Time, 6 P. M. Prodrome, yawning, stretching, chill; chill severe, shaking; *no thirst; horripilation*; some days slight thirst of small quantity of water; aching of joints of limbs; headache; heaviness of head;

sleep till commencement of heat; heat moderate; *no thirst*; no aching of joints of limbs; no headache; no heaviness of head; sweat moderate; *no thirst*; no aching of joints; no headache; no heaviness of head; apyrexia complete. Bowels open daily twice, stool normal, with no bad smell; urine not colored; appetite good; taste insipid; sleep not good; tongue clean and moist; pupils dilated; itch about four months past, few remaining up to yet; vaccinated; chronically enlarged spleen; exposure to rain and damp.

Treatment: *Bar. carb.* 3d (trit.), about a grain a dose, one dose given just now.

Diet: *Khoi* and sugar candy.

20-9-95, 7:30 A. M. Very slight chill last night at about 8 P. M., lasting about one and a half hours, with no thirst, with horripilation; slept during chill; then heat lasting about the same time; with no thirst; the sweat moderate for about an hour. Last paroxysm was of less severity and shorter duration than the previous ones.

Treatment: *Bar. carb.* 3d (trit.), one dose as above.

Diet as above.

21-9-95, 8 A. M. Last night at about 9 P. M., got fever with chill, with no thirst, chill lasting about half an hour; then heat with no thirst, heat lasting about an hour; then sweat with no thirst, sweat lasting about half an hour; then remission; horripilation during chill; one costive stool yesterday; last paroxysm less severe than its previous one; urine slightly colored; sleep good; taste insipid; much improvement of fever.

Treatment: Placebo.

Diet: *Khoi*, milk, sugar candy.

22-9-95, 8:30 A. M. Fever at about 9 P. M. last night, but less than that of the nights before the last, for about half an hour; two stools yesterday; no stool this morning; slept last night; appetite good; taste insipid.

Treatment: Placebo.

Diet as above.

23-9-95, 6:30 A. M. No fever yesterday but only tightness of head at about 9 P. M. for about half an hour, having no chill, no heat, no sweat, and no thirst; one hard but formed stool at about last evening; no stool this morning; good sleep last night; appetite good; urine very slightly reddish; sweated last night during sleep.

Treatment: Placebo.

Diet: *Atá* bread, milk, sugar candy.

24-9-95, 7:40 A. M. No fever yesterday and no tightness of head; two stools yesterday; stools normal morning and evening; one normal stool this morning; morning urine colorless, but that of afternoon colored slightly; taste good; food tastes well; appetite good; sleep good; spleen somewhat reduced; tongue clean and moist; pupils slightly dilated.

Treatment: Placebo.

Diet as above.

25-9-95, 8:10 A. M. Worked yesterday to prepare fuels, after which labor he perspired; felt chilly after the sweat was over; again chilly in the evening; heat following the chill and then followed no sweat; thirst, and drunk during chill; horripilation during evening chill; two free stools yesterday; one normal stool this morning; slept last night; appetite and taste good; urine slightly colored.

Treatment: *Bar. carb.* 3d (trit.), one dose as above.

Diet as above.

26-9-95, 8:45 A. M. No fever yesterday, only heaviness of head and headache of left temple; two normal stools yesterday; one stool this morning; appetite, sleep and taste good; much sweat during sleep last night.

Treatment: Placebo.

Diet as above.

27-9-95, 8:45 A. M. No more complaints; two stools yesterday; one stool this morning; taste, appetite and sleep good.

Treatment and diet as above.

29-9-95, 6:45 A. M. Fever night before last, but no fever last night, the fever changing into a *tertian type*. At first the type was quotidian. Patient expressed, though the type was changed, yet the fever was gradually lessening. Two stools daily; urine not colored; appetite, taste and sleep good; feels better.

2-10-95, 7:30 A. M. No more medicine.

Result: Recovery.

Remark: Aggravation produced, as I think, the change of type.

Calcutta, India.

A. W. K. CHOUDHURY.

IN REGARD TO THE HOMŒOPATHIC DILUTIONS.

It is noteworthy that the proofs of some of the cardinal teachings of Homœopathy have been furnished by its adversaries. In the records of old school-medicine Hahnemann found the facts that corroborate the law of similars, and he cites, in his *Organon*, the instances of cures made in accordance with it. In his *Chronic Diseases* he procures from the same sources the evidence of the pernicious effects of the repercussion of cutaneous eruptions, in defence of his doctrine of *Psora*. He left his *Dynamization Theory* unsupported by anything other than his mere *ipse dixit*. Here are his statements:

§ CCLXIX.

“The homœopathic system of medicine develops for its use, to an unheard of degree, the spiritual medicinal powers of the crude substances by means of a process peculiar to it, and which has never been tried, whereby only they all become penetratingly efficacious and serviceable, even those that in the crude state gave no evidence of the slightest medicinal power on the human body.

§ CCLXX.

“Thus two drops of the fresh vegetable juice mingled with equal parts of alcohol are diluted with ninety-eight drops of alcohol and potentized by means of two succussions, whereby the first development of power is formed, and this process is repeated through twenty-nine more phials, each of which is filled three quarters full with ninety nine drops of alcohol, and each succeeding phial is to be provided with one drop from the preceding phial (which has already been shaken twice) and is in its turn shaken, and in the same manner at last the thirtieth development of power (potentized dilution x), which is the one most generally used.”

This paragraph has the following foot-note: “In order to preserve a fixed and measured standard for developing the power of liquid medicines, multiplied experience and careful observation have led me to adopt two succussions for each phial, in preference to the greater number formerly employed (by which the medicines were too highly potentized). There are, however, homœopaths who carry about with them on their visits to patients the homœopathic medicines in the fluid state, and who yet assert

that they do not become more highly potentized in the course of time, but thereby show their want of ability to observe correctly. I dissolved a grain of soda in an ounce of water mixed with alcohol, in a phial, and shook this solution continuously for half an hour, and this was in dynamization and energy equal to the thirtieth development of power."

How magisterial; but—only five years later—he writes: "What is to prevent him (the homœopathic physician), in order that he may obtain powerful dynamization, in place of giving a few slovenly shakes (whereby little more than dilutions are produced, which they ought not to be), giving, for the preparation of each potency, to every phial which contains one drop of the lower potency to ninety nine drops of alcohol, ten, fifteen, twenty, fifty, and even more strong succussions, performed against some hard elastic body."

How the new light made him blink! He interpreted phenomena and coined names for the occasion with fatal facility. "Spiritual medicinal powers"—a figment; "potentization by succussion"—a baseless hypothesis. "Two" succussions in 1833; "ten, twenty, fifty, and even more" in 1838! All this is the load that Homœopathy has been obliged to bear—and it *has borne it successfully*.

That the *pathogenetic* power of a drug could be increased by dilution was established by Drs. Christison and Coindet so early as 1823, and in the instance of *Oxalic acid*. These observers found that this poison "acts much more readily when diluted than when concentrated; dilution having nearly the same effect as increase of quantity."

It must be distinctly understood that dilution does not increase the lethal power of the poison, but only the pathogenetic. Judging, then, from this feature, Hahnemann's claim of a "development of power" by *dilution* is established. That succussion added increments of energy is not proven.

The Scotch physiologist, Fletcher, says that Hahnemann was aware of the two-fold action of medicines, giving primary and secondary symptoms, "and it is to insure their primary without fear of their secondary action, that he inculcates the expediency of giving them in inconceivably small doses." Then from this point of view dilution increases the therapeutic power of a drug; the minimized dose producing just that degree of reaction which abolishes the existing symptoms without adding

to their intensity and thus producing secondary symptoms from the drug induced over-reaction.

That the chemical energy of a drug could be increased by dilution has lately been demonstrated by an American physician, Dr. J. H. Kellogg, of the Battle Creek Sanitarium, in some experiments relating to substances which impede starch digestion.

The following table of results are significant to the homœopathic physician:

Oxalic acid.	Time.	Orange juice.	Time.
1-10,000	No action	1-200	11 minutes
1-15,000	25 minutes	1-500	4 minutes
1-20,000	19 minutes	Apple juice	
1-30,000	4 minutes	1-50	45 minutes
Lemon juice		1-200	4 minutes
1-200	No action		
1-500	42 minutes	Vinegar	
1-2,000	9 minutes	1-200	No action
1-5,000	7 minutes	1-5,000	40 minutes

"Experiments were also made for the purpose of determining comparatively the influences of the substances upon the action of malt diastase upon starch."

Oxalic acid.	Time.	Vinegar.	Time.
1-2,000	No action	1-10	10 minutes
1-5,000	5 minutes	1-200	2 minutes
1-10,000	2 minutes		
Lemon juice.		Lactic acid.	
1-10	No action	1-200	No action
1-200	2 minutes	1-2,000	5 minutes

From all of which it follows that dilution energizes a drug therapeutically, pathogenetically and chemically.

Isomerism appears to indicate that the action of a drug is dependent upon its molecular arrangement. Dilution separates the molecules; succussion can affect this separation more speedily and at the same time more thoroughly. That such a molecular separation enhances the chemical energy is seemingly shown by the inhibiting influence of *Oxalic acid* upon the digestion of starch—a dilution of one part of the acid in ten thousand exerts no action, while one part of the acid in thirty thousand arrests starch digestion in four minutes.

But we are wrong in presenting this hypothesis of molecular separation in explanation of the fact. We have nothing to do with the *explanation*; only the *accomplished fact* concerns the therapist.

All the talk and writing about molecules and atoms is also purely hypothetical; both the molecule and the atom are philosophical concepts and their acceptance as proven realities is the rock whereon not only the cheap philosophers of Milwaukee are wrecked.

It was Newton, not Hahnemann, who said, "*Hypotheses non fingo.*" Newton remained the meek servant of Nature; Hahnemann's sturdy self-reliance made him a dogmatist. He was also of such towering self-conceit that nothing disturbed his equanimity. It was urged to Walt Whitman that he "contradicted himself." Well, then, said Walt, I *contradict myself*. Hahnemann's self-contradictions are uncorrected; and yet again in the history of man the feet of clay are a reproach to the golden head.

But, leaving his hypotheses to his human frailty, what have not the accomplished facts of his practice done for the human race? Ah, he yet remains *The Master*.

S. A. JONES.

Ann Arbor, 2d of Sept.

PRINTERS' ERRORS.

Editor of HOMŒOPATHIC RECORDER.

Please allow me to correct four of your printers' mistakes in my article on "Dynamization" in the August number.

On page 357, line 12, I wrote "curative *efficacy*;" the printer has got it "curative *IN efficacy*." On page 359, line 17, I wrote "*fresh* infusion;" the printer has it "*first* infusion." On line 23 I wrote "*soluble*;" the printer has it *IN soluble*." On line 33 I wrote "*insuperable*;" the printer has it "*inseparable*." Thus I have been made to talk arrant nonsense. I know that you were suffering from an excessively high temperature in America about the time the above was printed, and perhaps this may have effected not only the printer but also the proof-reader. Therefore, they must be excused.

I will take this opportunity, also, of replying to the letter of Dr. Ehinger, in the same issue of the RECORDER. Dr. Ehinger complains that in the article on "Diphtheria" I did not mention the potency used—*i. e.*, the potency of *Kali carb.*, I presume. Well, I did not use a potency at all, but the pure salt. As to "repetition," I usually give a dose every three hours until the

temperature falls. I quite appreciate your correspondent's cause for complaint, and I hope this reply will be satisfactory.

Respectfully yours,

GEO. HERING.

Aug. 31, '96.

A NEW HOMŒOPATHIC HOSPITAL.

The medical hospital building of the New York Homœopathic Medical College, at Sixty-third street and the Eastern Boulevard, was formally dedicated and opened on Tuesday, October 6th, with ceremonies befitting the occasion. At the western end of the college grounds a large platform had been erected and tastily ornamented with the national colors, bunting and potted plants. In the space between the college and hospital buildings and facing the platform were placed the seats for the guests—far too few for the large audience. A small, though very able band provided the music. Four thousand invitations had been issued and those who responded were the representatives of the wealth and refinement of the metropolis.

The ceremonies were opened by the band playing a Sousa march to the strains of which the faculty of the college, in full regalia of cap and gown, marched from the college building to their places on the platform followed by the members of the board of trustees and by many prominent men of the local homœopathic profession. After an opening prayer by the Rev. Dr. John Wesley Brown and the "Pilgrim's March," from Tannhäuser, by the band, the Hon. Rufus B. Cowing, president of the board of trustees, made the opening address. He showed the necessity for this medical hospital in connection with the older Flower Surgical Hospital; showed how the surgical hospital had been taxed to its fullest capacity ever since its opening and predicted the same for the new medical hospital. He said that it was not generally known that treatment, both surgical and medical, was practically free here; the ambulances are sent to the aid of the ill and injured in the densely populated districts of the city without cost, and preference is always given to those who are least able to pay. He complimented and thanked the members of the Woman's Guild, to whom, he said, was due the success and completion of the undertaking.

After more music Dr. William Tod Helmuth, the dean of the college, arose and received a most cordial reception. He spoke

of the twofold character of the new hospital; first, of its great benefit to the poor of the city in restoring the sick to health and in making even death lose much of its sting; and, second, of the great benefit to the students of the college in having the advantages of practical examples of diseases and not being obliged to gain their knowledge only from the theories as laid down in books and as expounded by the professors.

Following Dr. Helmuth came General James R. O'Beirne, Commissioner of Charities, who delivered the oration of the occasion. He made an eloquent address, acknowledged the praiseworthy work and noble charity of the ladies of the Woman's Guild, and expressed gratification that the modern and humane system of homœopathic treatment had taken so firm a stand among the charitable institutions of New York. In finishing he read a list of the contributors and amounts donated for the building and furnishing of the hospital, which cost about \$100,000, and expressed the hope that in the near future other buildings dedicated to the same cause would be erected on other parts of the college property. With benediction, by Rev. Dr. Brown, and more music the ceremonies came to an end and the hospital and college buildings were thrown open for inspection.

The new hospital is a substantial, red-brick building of four stories, and has been constructed to agree with the architectural features of the Flower Hospital and the college. The fittings of the rooms and wards are of the latest and most improved design, especially the maternity ward, which is arranged in a thorough and tasteful manner, and with a view to the mental as well as bodily comfort of the patients. There are accommodations for eighty patients in the new hospital, which is about the same as in the Flower Hospital. There are now two hospitals under the control of the college—the Flower Hospital, erected by ex-Gov. Roswell P. Flower, which is devoted to surgical cases entirely, and the one just dedicated.

A. L. F.

New York, October 8, 1896.

SCISSORED WISDOM.

"It is strange how the perverseness of one individual may cause the discomfort, not to say confusion, of a large body of scientific workers."—*Buffalo Med. and Surg. Journal.*

"Legislation should be enacted to check such articles [on the evil effects of vaccination] in their incipiency, and the punishment of the offenders cannot be too severe."—*Medical Reporter.*

"The medical profession generally, together with their co-workers in scientific pursuits, should be cautioned against the prevalent loose use of the word hysteria."—*Phila. Polyclinic.*

"No medical law yet enacted has proved to be satisfactory."—*Southern Journal of Homœopathy.*

"In this country everybody is supposed to know not only his own, but everybody else's business—everybody but the college professor."—*Pharmaceutical Review.*

"There is getting to be a suspicion of any operator whose percentage of mortality is far below the general average."—*International Journal of Surgery.*

"It is quite probable that there is no such thing as a useless or functionless organ in the human or any other being."—*Southern California Practitioner.*

"No matter how huge a fraud a 'doctor' may be, some may always be found who will employ him. Fools are born every day and they never die."—*Minneapolis Homœopathic Magazine.*

"Physicians who have investigated the subject tell us that alcohol is most destructive to the human body."—*Medical Examiner.*

"During the month of August the press' dispatches showed a most alarming outlet of life caused by excessive heat."—*Medical Progress.*

"A marvelous paradox are existence and thought; we know more of force than of any other principles in nature, and yet, in reality, we know nothing of it."—*Hypnotic Magazine.*

"Although the original basis of what we now call love was undoubtedly physical attraction, provided by nature with special reference to the propagation of the race, in the process of evolution and in consequence of the absence of any pressing necessity to fill up unoccupied places, in a hurry, it has come to be so modified that in the greater number of instances it is founded upon real or fancied congeniality of taste, not necessarily high or exalted ideals."—*Hahnemannian Monthly.*

"At the end of its first century of existence it would seem as if the essential principles of Homœopathy should be thoroughly understood. These principles are neither many nor complex.

They are indeed quite the reverse, being few and simple. And yet, few and simple though they be, evidence is not wanting that they are not fully comprehended, even by some of those who professedly have faith in and practice according to those principles."—*New England Medical Gazette*.

"Soul, or spirit, or mind, is neither an unknowable essence nor a mystical monad-entity, but a definite condition of being which depends upon definite forms of organization, the characteristic future of which is representativeness."—*The Monist*.

"Picture in your mind, if you can, the blood-freezing terror of coming to life in your grave! * * * And this is happening all the time. Countless millions have undergone this dreadful experience."—*Medical Gleaner*.

"We should not only tell our patients what to expect, but when to expect it."—*Alkaloidal Clinic*.

Anent cheap doctors: "It is foolish of the public to shut their eyes to the fact that the quality of the work is most likely to deteriorate with the price."—*Pacific Medical Journal*

The students of bacteriology put us in mind of a group of juveniles at play. One sees something, or says he sees something. Immediately all the rest, unwilling to be behind him, cry out that they see it too.—*The Medical Brief*.

"The circulation liar is an important institution in the publishing world, and he often is able to get along without pay subscribers, but he has to hustle to keep from being caught."—*Atlanta Medical and Surgical Journal*.

CASES FROM PRACTICE.

By Dr. Martin Baltzer.

[Translated for THE HOMŒOPATHIC RECORDER from *Wilst du gesund Werden.*]

Miss B. is 17 years old; she came to me on the 2d of March, 1896. She has been hard of hearing in both ears for five weeks. She does not understand a word of an ordinary conversation, but only when she is screamed at. The mother complains that even her features have quite another expression. Her mouth is generally open. Five years ago both her tonsils were extirpated and her internal nasal cavity had been scraped. A specialist had a week before applied the nasal inhalator, and proposed an oper-

ation, "without which the young lady would become quite deaf." After the application of the nasal inhalator the hearing had improved a little. She is easily moved to weep and easily frightened. The osseous structure is normal. Nothing morbid to be perceived in the tympanum. She can hear the ticking of a watch with her left ear at a distance of two inches—with the right at a distance of four inches.

Pulsatilla 200, six powders. Her hearing was worse. Her menses had stopped. No appetite.

Pulsatilla 6 on the 25th of April. Hearing improved. She hears the ticking of a watch with the right ear at a distance of eight inches—with the left ear at two inches. *Pulsatilla* 30.

On the 30th of May her hearing had manifestly improved; she can hear a common conversation. *Pulsatilla* 30.

On the 19th of June her hearing was again normal.

Margaret B., aged 9 years, came to me on the 6th of August, 1895. She had pains in the left knee for six weeks. She cannot walk. Every movement causes the most violent pains. Nothing can be seen externally. *Silicea* 30, *Mercurius sol.* 30, seven powders of each.

On the third of September she had no more pains. She only limped a little in walking. The same medicines.

On the 30th of September all her ailment had vanished; she does not limp any more.

Miss F. came to me on the 12th of August, 1895. The skin was peeling off on both hands. On the dorsum of the left hand there were small vesicles of the size of lentils, discharging a watery ichor. The lips were swollen, prominent. *Sepia* 30, six powders.

On the 2d of October I heard that her hands had healed while taking the medicine.

Mrs. K. came to me on the 12th of August, 1895. She complained of pains in the right hip, extending down to the knee. Worse at night; for the last three nights she could not remain in bed, but had to walk about. She had continually to change the position of her leg. The pain had now lasted five weeks. *Rhus tox.* 30, six powders.

August 24. No more pains. Only weakness in the affected limb. *Rhus tox.* 1000, six powders.

October 21, 1895. H. D., aged 13 years, came to me. He has been suffering from diarrhoea for three years, 3 to 5 times by