

## PERSONAL.

Dr. C. Eurich has removed from 209 E. 87th street to 1263 Washington ave., New York city.

Dr. J. C. Duncan has removed from La Moille to De Kalb, Ill.

The University of Pennsylvania could not make rabbits voluntarily take alcoholic drinks. Why not try it on men?

"Antivac" is a late term for one who flouts Jenner's discovery.

Five and six year-old's among homœopathic books are masquerading as "Just Issued."

The mortality of the plague in China was 80 per cent.

Several people were sent to a hospital in New York, the other day, the result of a "bargain-counter" rush.

Says Montaigne: "They who fight custom with grammar are fools," much to the comfort of most of us who disturb the bones of Lindley Murray.

When doctor told young mother that baby must have one cow's milk every day, she said she did not see how baby could hold it all.

They say that it is not so much boiling down as roasting that some papers need.

When a man has learnt to look to the quality of the goods and not to promised chromo or "premium" offered, he begins to be a wise buyer.

The father always wants it to be a boy, yet the boy as he grows prefers a girl.

Dr. Sarah T. Rogers Eavenson has removed from 1711 Race street to 1943 Vine street, Philadelphia.

The "Greater Flower Hospital" precedes the "Greater New York." The splendid new addition was opened on October 6, under auspices of New York's leading citizens.

Our "regular" friends are gradually coming round to rational Homœopathy; they have discovered "a remedy for stage-fright" and a medicinal treatment for "irritable temper."

Dr. Roland du Jardin has removed to 127 East 76th street, near Lexington avenue, New York.

The drummers who contribute to the *Medical Century* do not improve its tone, which is a pity, for otherwise the *Century* is not half-bad.

Another "new cure" for tuberculosis has been tried in Europe, and as the patients are not all dead yet, why, "sufficient time has not elapsed to," etc., etc.

Quarantine has been totally abolished in Great Britain.

Dr. Chislet objects to the "wholesale manufacture of cheap doctors."

Specific gravity has been defined as an Englishman trying to see the point of an American joke.

When it comes to the "test at the bedside" old Homœopathy distances all other therapeutics.

It looks as if Europe would soon have to carve its Turkey.

"It is a long lane that has no turning," to be sure, but a long lane is rather a good thing for the property owner.

In books only can you learn the wisdom or folly of the past. Get thee a library.

A doctor without reliable medicines is like a trolley car without a brake.

## THE HOMŒOPATHIC RECORDER.

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### LILIUM TIGRINUM IN UTERINE FIBROIDS.

C. Sigmund Raue, M. D.

The pathological changes induced in the uterus and its adnexa, and often in the surrounding structures, by the presence of a fibro-myoma, vary greatly in character and degree. Sub-mucous myomas are usually characterized by profuse and troublesome bleeding, and as v. Campe has shown, the pathological changes in the endometrium in these cases are identical with those noted in fungoid endometritis (Schroeder). The hæmorrhage, however, is not always proportionate to the extent of the involvement of the uterus by the fibroid.

In the interstitial and sub-peritoneal variety, hæmorrhage is less characteristic, and it may be entirely absent, but there is usually more pain and distress than in the sub-mucous variety (unless the latter induce expulsive pains), especially *ovarian pains*, probably from pressure or peritonitis. In some cases of interstitial fibroids this pain may be purely neuralgic, and I have found it quite a common accompaniment of these tumors. Pressure symptoms are often severe; also those of peritoneal origin.

Labor-like pains are quite common, especially in the sub-mucous variety when nature makes an attempt to expel the new growth, but they are usually present in all varieties, particularly during menstruation. These pains are easily explained, springing, as they do, from increased uterine contractions and the menstrual congestion. The reflex symptoms are numerous and varying, and must not be ignored, for they are of great importance to the prescriber.

It is evident that the course of treatment to be adopted must vary with each case, and that it also varies much from the likes

and inclinations of the gynæcologist into whose hands the case may fall, is likewise a fact. However, those fond of operating well know that too often operative interference would be hazardous, and then it is a fortunate thing if we are homœopaths and can fall back on that grand stand-by in such times as these—the homœopathic materia medica.

*Lilium tigrinum* proves itself a most valuable remedy against the symptoms induced by uterine fibroids, and, indeed, it seems to have a specific action on these growths. The indications for *Lilium tigrinum* are well given by Minton in his "Uterine Therapeutics," but he says nothing regarding its use in fibroids. Neither Wood nor Southwick mention it under this heading in their respective works on gynæcology. Undoubtedly *Belladonna* is often given in these cases when *Lilium* is indicated, and then naturally fails or simply modifies the symptoms. I believe that here its action is more superficial, that is, more neurotic than *Lilium tigrinum*, as can be seen by a comparison of these drugs. The indications for *Belladonna* given by Wood ("Text-Book of Gynæcology"), namely, "Much bearing down in pelvis; menorrhagia of bright-red blood, or thick, decomposed dark-red blood; genital organs sensitive," etc., are quite characteristic of *Lilium*, and are hardly sufficient data for a careful prescription. *Belladonna* also has the vesical tenesmus of *Lilium* and pressure in the sexual organs, but these symptoms are purely nervous, due to spasmodic action of the sphincter vesicæ and bearing-down pains (uterine contractions), while in *Lilium* there is actual pressure of an enlarged uterus (engorgement; sub-involution; fibroid;) on the bladder, and a sense of weight, due both to increased weight of that organ plus irregular uterine contractions. This pressure also affects the rectum with almost constant desire to go to stool and bearing-down pains while at stool.

Then we have the ovarian pains (the provings point mainly to the left ovary) and the reflex infra-mammary pain.

These symptoms, together with the mental peculiarities of the drug are, so to speak, the characteristics, and clearly indicate the genius of this remedy.

The action of *Lilium tigrinum* in the following case seems similar to what one would expect from the crude use of *Ergot*, but with undoubtedly more prompt and lasting relief.

Georgie T—, aet. 27, colored, married four years, no children. Menses regular, profuse, lasting eight days. Weight

and bearing down in hypogastrium, and pain in left ovary; frequent desire to urinate with much straining; profuse yellowish leucorrhœa; very nervous at times, etc. On examination a symmetrical fibroid (apparently interstitial) about the size of a child's head and immovable, was found. *Lil. tigr. 2x* every three hours was prescribed.

Five days later: Was much worse when first taking the medicine; bearing down pains with bloody discharge from vagina during the first few days, but feels somewhat "lighter" now. *Lil. tigr. 3x*, every 3 hours.

One week after last prescription: Similar aggravation when first taking the medicine; backache, fever and sweat during the night; fear of dying. *Lil. tigr. 30*.

Ten days after last prescription: Marked relief of all symptoms; no aggravation since taking the last medicine.

In a similar case of fibroid with intense pains of a neuralgic type in the right ovarian region, becoming especially severe towards night, *Lilium tigrinum 3x*, gave immediate relief after *Belladonna 30* had failed. The accompanying symptoms: Recurrence of the menses every two weeks with pain and great loss of blood, resulting in marked prostration and cardiac weakness; inability to attend to her household duties and hysterical manifestations, have not recurred in the last three months. Here was a case in which nothing more radical than double oöphorectomy with its uncertain results could have been attempted without great risk, in the line of surgical interference.

When we consider the nutritive disturbances which are capable of taking place normally in uterine fibroids, terminating either in softening viz: œdema, (cystic degeneration), myxomatous degeneration and fatty degeneration, or in induration or calcification, we do not hesitate to prescribe for these tumors drugs that are known to have a positive and specific influence over nutrition and absorption, and even though we may not be able to entirely remove the growth, we can at least so modify the conditions as to leave the out-patients tolerably comfortable and in fairly good health and tide them over the climacteric, which is most certainly next best to a cure.

Philadelphia, Pa.

#### DYNAMIZATION.

J. Sutcliffe Hurndall, M. R. C. V. S.

The very interesting article under the above heading which ap

pears in the August issue of THE HOMŒOPATHIC RECORDER from the pen of Dr. Hering, calls for more than passing comment; personally, I deem it as not merely "an interesting study," but as the one important subject affecting the well being of Homœopathy of the present day. Why is it that so many practitioners who rely upon the law of similars in the treatment of their patients fail to realize the sanguine hopes of success, which according to the experience of a certain number of their confreres, they are warranted in anticipating; and again, why does so large a number of the homœopathic faculty, and that in the present day in increasing numbers, resort to the scalpel in various surgical operations to obtain results, which if they only had the knowledge and the faith, might be realized far more safely, pleasantly and effectually by means of therapeutic measures which lie to their hand awaiting adoption? My reply to these two questions is, that a very large majority of the profession are not true followers of the Master, Hahnemann; they have never grasped the true meaning of the word "*dynamization*," if one may judge by their actions; and further, because the principle laid down by Hahnemann so far as regards this form of preparing drugs does not commend itself to their minds, it would appear that this class of practitioners has not ventured to test it clinically under fair conditions, lest what seemed impossible might after all turn out to be truth, and lest what could not philosophically be reasoned out and accounted for should prove to be the one thing needed; rather than accept and adopt that which so far is scientifically inexplicable, suffering patients must pass through the gall of bitterness which naturally attends painful surgical operations, that under the most favorable conditions provide but poor compensation for the suffering inflicted; or the patient must wearily languish on until a happy release is afforded by death.

But says one, we do avail of such therapeutic measures as Homœopathy teaches, though we regret with pain to record that we do not find that therapeutics can displace surgery! Perhaps not always; I am not so slavishly wedded to therapeutics as to affirm that under given conditions, surgery is not sometimes the right course to rely upon in the interests of the patient; but what I do affirm is, that it is of very much more rare occurrence than most practitioners seem to think, judging them by their public actions: Take carcinomatous tumours of the breast; in-

ternal carcinoma; fibroid tumors of the uterus, and mesentery; ovarian tumors and such like.

Again, there are cases in daily practice not calling for surgical interference, such as tuberculous patients, the treatment of which even many homœopathic physicians seem unable to grapple with or even afford temporary relief to, yet they have Hahnemann's teaching and the materia medica to fall back upon. It may be asked what has all this to do with "Dynamization?" I reply, much, very much! What is the reason practitioners have failed in the treatment, therapeutically, of such cases as I have referred to; simply because though they may have selected the true remedy for particular patients in strict and correct accord with Hahnemann's law of similars, the desired end—a cure—has not been attained because the remedy had not been dynamized and consequently passed out of the system without producing any benignant effect; it may be no effect at all, or it may have been that the agent instead of acting curatively, exaggerated the symptoms and rendered the case worse than before. I fancy I hear one saying, "Yes, I have had cases wherein evidently I had selected the right medicine, but given it in too low an attenuation, for aggravation was succeeded by a satisfactory cure!" I fully admit such a possibility, for I have had many such cases in my practice among the lower animals before I appreciated the value of "dynamization;" but it invariably occurs in cases of acute disease; never in the more troublesome and trying cases that assume from the outset a chronic character or may be, are of long standing.

Dr. Hering has drawn a most important distinction between the "dilution" of drugs and their "dynamization;" and this I believe to be a crucial difference; upon it hangs far more than appears at first sight; I do not admit, as Dr. Hering seems to infer, that the mystery which hangs over the theory of dynamization robs Hahnemann's law of similars of the title of an "*exact science*." I claim that it is a law of nature and must hence be an exact science; its origin from a Divine Creator ensures that, whether men understand it or no; but "*dynamization*" of drugs is merely an application in part in the proper realization of this particular *exact science*.

In my practice as a veterinary surgeon, I have made it my pleasure, as well as my duty, to test the value of highly dynamized drugs upon the various orders of my patients, equine

bovine, canine, feline, etc., etc.; and I thought I might usefully acquaint American homœopathic physicians with some of the results; more especially as I heard one of America's most eminent ophthalmic surgeons give expression to opinions at the recent International Homœopathic Congress, held a short time back in London, that fairly took my breath away, and I much regretted at the time that circumstances prevented my rising to attempt to rebut some of the statements offered to the meeting by this gentleman; evidently he believes little in the value of "dynamization;" at the same time I was glad to hear several of our London physicians dissent strongly from the opinions laid before the meeting by this gentleman, who supported their statements by instances of success in the treatment of identical cases realized by the use of dynamized remedies.

I cannot presume upon occupying sufficient space in your journal to enable me to recount details of cases, and must therefore content myself with describing as shortly as possible the conclusions arrived at as the result of my varied experience; in the first place let me say that I do not pretend to be able to furnish any line of philosophical reasoning to account for the theory, nor how it works; I cannot furnish any "*acknowledged proof*;" that there is some "*wonderful development*" effected in drugs and remedial agents by means of a more or less high state of dynamization I am perfectly satisfied as the result of practical experience; but I am just as little able to account for it as I am to prove why the law of similars exist; although I can readily understand that many scientific men in the medical faculty would be better satisfied if they could assign a palpable reason why remedial agents are more efficacious in a dynamized condition in curing disease than they are in their crude state and that they would also like to know in what way the process secures "this efficiency," I have come to the conclusion that a great difficulty will be experienced in clearing up these points, and that if the profession waits until it is clear thereupon, much time and many valuable lives will be sacrificed; for myself I am content to know that highly dynamized remedial agents have in the past effected cures where crude and lowly attenuated drugs failed, and I am prepared to trust them in the future under certain conditions hereafter referred to.

So far as I have gone up to the present, I find that drugs belonging to the vegetable world which are prepared as tinctures,

when properly selected for diseases according to the law of similars, will act favorably in very acute cases of disease, either in the crude form or in dilution; for instance, a horse has been worked hard, on a very hot day, and comes into the stable exhibiting all the symptoms of very acute fever, with a temperature as high as 107° F.; in such a case *Aconite* in mother tincture may safely be administered with every probability of a satisfactory outcome; and the same applies in a case of megrims with regard to *Belladonna*; in cases of disease of less acute character than these, however, far better results would be obtained with these same drugs properly attenuated to the third or sixth decimal; at the same time I am quite ready to acknowledge that I have obtained very satisfactory results from these *vegetable* substances when administered in dilution, a fact which suggests that in some cases at least dynamization is not absolutely essential.

But when we come to deal with mineral agents; the metals; inert substances like *Silicea*, charcoal, *Calcareo*, *Sulphur*, and the like; substances such as *Chloride of Sodium*, which in its crude condition is used as a condiment at our daily meals; and the various viruses physiological, as serpent poison, and pathological, as the virus of tuberculosis, glanders and rabies, and the animal substances, it is entirely a different matter, and so far as one can judge from experience the higher these agents are dynamized the more active seems to be their power to influence and cure old-standing chronic cases that would yield to no other treatment. I have stated that the higher these agents are dynamized the more active they seem to be, but this remark requires qualifying by the statement that I have never used a potency of any remedial agent higher than the 200th C., while in many instances I have not gone higher than the 30th C.; as already indicated in my previous remarks, I am of opinion that some agents require more thorough and complete dynamization than do others in order that they may be rendered capable of exercising a curative action; and what to many may appear still more strange, it would seem to be indicated by experience, that the more long-standing and chronic a case of disease may be the higher the selected remedy should be dynamized and *the less frequently the dose should be administered*; these are facts, however, which are in full accord with Hahnemann's experience, practice and teaching; and I may also remind American practitioners that the same

may be said of their late lamented fellow citizen, Dr. Carroll Dunham, than whom I have never come across anyone's writings which so thoroughly commended themselves to my common sense and which appeal so deeply to my conscientious convictions; he was evidently a man who believed in his heart of hearts every word he wrote and every principle that he advocated; moreover, the language he adopted to expound his faith was most eloquent and impressive; to those who have not yet consulted his works I commend them, with the full assurance that they will be found worthy the most careful and intelligent study.

In my experience among the lower animals, to say nothing of the many observations I have made in the treatment of the human subject by practitioners who have the moral courage to follow their Master, Hahnemann, and rely upon highly dynamized substances, I have arrived at the conclusion that the order in which such substances should be arranged, so far as their curative activity may be effected by dynamization, is as follows: Commencing with those that appear to require the least dynamization and rising progressively to those that are most valuable in highly dynamized attenuations or potencies. I name vegetable tinctures, I; metals and their compounds, II; minerals and their acids, III; physiological viruses, IV; animal substances, V; pathological viruses, VI; condiments, VII; at the same time it must be borne in mind that these conclusions are based upon the further experience that *acute* forms of disease in the primary stages respond to undynamized agents; while the more oft-recurring *chronic* forms of disease require dynamized substances in progressively higher attenuations or potencies, as the case is, of long or longer standing.

I do not assume that by this contribution I have done anything towards clearing up a vexed and complicated question, but I do hope that the conclusions that I have arrived at may, perchance, tend in a small degree to assist someone else of a more philosophical turn of mind to see his way to reason out the advantages of dynamization in a manner not only clear and precise, but forceful and convincing to the medical sceptics of the present day.

*Sussex Villas, Kensington, London, September, 1896.*

## ERYTHROXYLON COCA AND ASTHMA.

R. K. Ghosh.

A young man aged about 38, of a robust constitution, residing near Calcutta, consulted me in July, 1884, and complained of suffering from severe fits of asthma. On examination I found it to be a case of spasmodic asthma. The fits came on *periodically*, becoming especially severe towards *new moon* and *full moon*. He had contracted the disease about ten years before, when engaged as a weighing sarkar in a jutegodown. Before consulting me he had taken allopathic medicines and cod liver oil for four years, *Ayurvedic* medicines for two years, and homœopathic medicines for more than two years. In the prescriptions that he had followed of homœopathic medicines, I found such drugs as *Aconite rad.*, *Arsenic*, *Bryonia*, *Ipecacuanha*, *Lachesis*, *Lobelia inflata*, *Phosphorus*, *Sambucus*, *Spongia*, *Sulphur*, *Antimonium tart.*, *Silphium lac.*, *Kali carb.*, and *Nux vom.* Hence, as will be seen, he had tried nearly all the good medicines of our homœopathic materia medica for asthma. For some time before consulting me, he had taken no medicines, as he had lost all faith in them.

A friend of his, also suffering from asthma of a severe type, had been much benefitted by my treatment. He it was who now brought to me the patient under notice. I confess I have never cured *radically*, any case of asthma. Thinking that the present patient had already taken nearly all the indicated medicines of the homœopathic and the allopathic pharmacopœias, without benefit, I was unwilling to take up his case, so I asked him to consult other physicians. He would not do so, because, he said, he had already tried several without profit. After some thought, but without much hope of success, I prescribed *Blatta Orientalis* on the strength of a suggestion from a highly esteemed friend of mine, who had tried it in many cases of asthma, with success. It was taken by my present patient for a week, three doses daily, without any change whatever. It was tried for another week, still without relief to the patient. On the contrary the fits of suffocation began to be more prolonged. Then I tried *Coca*, in  $\frac{1}{4}$  drop doses of the mother tincture, a dose every three hours. An hour after the first dose, the patient felt sensible relief; two hours after the second dose, he seemed to have no trouble left; so that he fell asleep and woke up, quite refreshed after six hours' sound sleep. After

two hours more he began to be drowsy again. I took the drowsiness to be an effect of the *Coca* medication, and so it proved to be.

He remained well for a week; after which he got another attack of the fits—a milder attack than previous ones. I prescribed *Coca*  $\theta$  again, in  $\frac{1}{4}$  drop-doses, three doses daily. After the second dose the fits ceased, and the patient fell asleep and slept for more than eight hours. After this the patient had no more fits for six months; after which time he came to me again with fits of asthma. A week before coming, he entered the service of a merchant as a weigher in a surki mill (a mill in which bricks are powdered). Two days after engagement at the mill, he had begun to have asthmatic fits. He attributed the recurrence of the fits to the introduction of brick-dust into his chest when supervising the weighing of the surki. I again prescribed *Coca*  $\theta$ , in  $\frac{1}{4}$  drop-doses, only three doses daily. As before, three doses of the medicine were sufficient to remove the fits. Down to August, 1888, when I left Calcutta for a change, he had no recurrence of the fits. When he saw me next, he said he had no fits; only occasionally he felt some tightness about the chest. This tightness did not, however, last for more than half an hour at a time. When we met years after he was quite well, he said, as to asthma, but had the tightness about chest still. When I had seen him in 1892, he was a lean and thin man. When I saw him in September, 1894, he was a stout man.

Seeing the very good results obtained from *Coca* in this case, I tried it hereafter in  $\frac{1}{4}$  drop doses of the mother tincture in no less than twenty cases of spasmodic asthma, and I am glad to say with great success. In bronchitic asthma, I tried it on about thirty cases, but not with so much success as in the spasmodic variety. In ten instances of bronchitic asthma the patients were much relieved, but in the remaining twenty cases *Coca* seemed to make no impression. Judging from my experience of cases, I conclude it is a very good palliative in spasmodic asthma. I believe that asthma is not radically curable. Here our object of treatment can only be palliation. And for palliation I would with some confidence recommend *Coca* in the spasmodic variety.

As to dosage: I have tried the mother tincture only, as the cases that come under my treatment, were cases of intense suffering with threatened suffocation. When the attacks are milder,

I would recommend dilutions, commencing with the sixth decimal and ending with the first decimal giving each potency a fair trial.

*Nabábpur, Dacca, East Bengal, India, March 12, 1896.*

#### TRANSACTIONS OF THE TWELFTH SESSION OF SOUTHERN HOMŒOPATHIC MEDICAL ASSOCIATION.

The thanks of the RECORDER are due to Dr. Charles R. Mayer, of New Orleans, for a copy of this interesting volume. The following points are culled from its pages:—

##### Welcome.

The Southerners were welcomed to St. Louis, where the meeting was held, by Dr. L. C. McElwee; welcomed to “the greatest and largest city in the world,” a city that “is bounded on the north by the great lakes and the rainbow of their spray, on the west by the setting sun, the silver question and 16 to 1, on the east by Major McKinley, Tom Reed and the land-slide, and on the south by Dixie and the Alabama Coon.”

Oh Chicago!

##### President's Address.

The President, Dr. W. C. Richardson, said in his address: “Homœopathy is a science that has always been, and always will be, in the vanguard of progress. Our successful efforts in the direction of a well-defined knowledge of the chemical, physiological, toxicological and therapeutic action of drugs is a monument that must endure for all time. In the line of this, our special work, numerous individual authors, teachers, clubs and societies are continually extending towards perfection all that is possibly attainable from drug potencies. Our *materia medica* is justly our pride as well as most distinctive attainment.”

##### A Southern College.

Some of our readers no doubt will be surprised at what Dr. J. S. Coon said of the *Southwestern Homœopathic Medical College* at Louisville: “With reference to our college at Louisville, we began our first year with seventeen students, and they took the lectures, not even intending to graduate, and last year we had twenty-five students, ten of which completed the course, and this year we have about forty; so that you will see our growth has been rapid.”