

take, even during the period of greatest fever; it keeps up the strength of the patient, acts well upon the stomach, and is every way a blessed thing in this sickness.

Exanthemata.

Malignant Scarlatina. Child, æt. 6, violent vomiting; fever high; restlessness with somnolence; pulse 140; tongue dry; throat sore; tonsils swollen; breath fetid. *Bellad.*^{2m} solution, three days. *Amm. carb.*^{2c} solution, one day, without apparent effect. Fifth day the parotid and sub-maxillary glands much swollen, especially right; swallowing difficult and painful; could scarcely open mouth; respirations snoring or rattling whether asleep or awake, as in diphtheria; breath very offensive; deafness; dirty, putrid sanies from mouth and nose; pulse 150; rash fading; wild mania with terror, imagined he was to be killed, but struck friends who came to help him, desire to leave bed, imagined he was driving a horse, feigned he would take medicine, then suddenly seized goblet and poured it out, picked hands, fingers and bed. *Stramon.*^{2o} solution, two doses. Relief. (N. E. M. G., Jan., 1872, p. 1.)

Post-scarlatinal Albuminuria. Girl, æt. 9, scarlatina had been mild; became languid; vomiting yellow mucus; tongue coated white; not relieved by *Ant. crud.*^{2c}; attack of lancinating pain in head, would cry out suddenly; relieved by holding head firmly; face and abdomen swollen; feet not swollen; urine scanty, turbid, dark; albumen abundant. *Bryon.*^{2c} solution. No improvement after twelve hours. *Tereb.*^{2c} solution. Cured. Albumen diminished third day, disappeared sixth. (J. B. Bell, N. E. M. G., Jan., 1872, p. 4)

Convulsions in consequence of albuminuria in the fifth week of an attack of scarlet fever. *Moschus*¹ relieved in a short time, after *Bellad.*, *Hyosc.* and various derivantia had been of no avail. (Dittrich, H. Kl., 1873, p. 21; N. A. J. H., v. 11, p. 78.)

Convulsions after scarlet fever; great dilatation of the pupils; inability to sleep. *Ver. vir.* (W. M. Williamson, Proc. H. M. S., Penna., 1873.)

On Vaccination. At a meeting of homœopathic physicians, the following was the result of their deliberations: first, that vaccination from arm to arm, or with cow-pox virus, cannot be considered as a sure preventive against small-pox, as, according to

statistics, the majority of persons attacked were such as had been vaccinated. Second, that by vaccination scabies, tetter, scrofula and syphilis may be carried over to other organisms; that *Sulphur*, in a homœopathic dose, may lessen the bad effects of ordinary vaccination; that homœopathic vaccination, by means of potentized *Vaccin.* internally after *Sulphur*, is the best preventive against small-pox.

Further experiences have shown me that the *Var. hum.* is still better than the *Vaccin.* The proceeding of a homœopathic vaccination consists in the following: I administer for three days, night and morning, *Sulphur*^x, and give it time to unfold its action for from four to six weeks. If, during this time, no eruption or glandular swelling appear, I then give *Variol.*⁶, for three days, night and morning one dose. On the seventh or eighth day, usually some febrile symptoms appear, which are speedily subdued by a few doses of *Acon.* There appear now, or a few days later, red, itching spots under the epidermis, which grow paler on the following days, and on the eighteenth or twentieth day the epidermis peels off. It is well now to rub the entire surface with warm olive oil; a few days later the patient may receive a lukewarm bath of wheat bran, and the homœopathic vaccination is completed.

In cases of variola I first give *Apis*^x and *Merc. sol.*^x in water, alternately, a teaspoonful every two hours through the day. At night, only in case of great fever-heat, *Acon.*^x. This for three to five days. Then follows *Variol.*⁶, in torpid cases *Variol.*³. In a short time the pustules commence to dry, leaving no scars. (Von Kaczkowski, J. Pr., 1873, p. 37, etc.)

Testimony in Favor of Internal Vaccination by Vaccin. Of all the small-pox epidemics in a period of forty-three years, that which prevailed during 1872-3 was the most malignant. During this epidemic I have come to the following conclusions: first, there is no better preventive against this scourge known to me than internal vaccination. Second, I prefer it decidedly to any other kind of vaccination. Third, I consider it truly homœopathic; and, fourth, it is not only the best preventive, but also the best curative agent. The uncertainty of the usual way of vaccination is a matter of experience and facts. The statistical summaries on small-pox I have little faith in; they appear to me like incorrect calculations in which inadequate quantities have been added together to bring out a result favorable to vaccination. How can you arrive at a true result if you count the young, strong and healthy

man in military service in one class with the frail, poor and wretched infants of one year? This whole way of statistical reasoning is an entirely illogical procedure. (C. Müller, in Brück, J. Pr., 1873, p. 592.)

On Vaccination. According to my opinion vaccination must be placed among the greatest errors and illusions of medical science. The dogmatical reasons upon which these illusions still continue to enact a wide-spread influence are the following:

First. Vaccination causes a decrease of small-pox epidemics in regard to their number as well as their intensity and extensiveness, and mortality.

Second. Those vaccinated are not subject to true variola, but only to varioloid; the attack is much milder, and the mortality much less, than in cases of those who have not been vaccinated.

Third. Vaccination protects for life-time.

Fourth. Proof of all this is found in the statistics of all countries, and at all times.

To this the following remarks:

Ad. 1. One instance for many. In the year 1801, before any vaccination had been practiced, there died in Sweden among one million of inhabitants, 600 with small-pox; in the year 1802-3, when vaccination had begun, the number of death-rate amounted to 990; in 1804, to 450; in 1805, to 600; in 1806, notwithstanding the greater extension of vaccination, to 870; in 1807, to 780; and 1808, to 1,000. Later the number of deaths fell down to 350; but in the year 1786, when vaccination did not exist, the number of deaths had not amounted to any more.

Thus varies in all ages and countries the number of deaths from small-pox each year; at one time the epidemics are severer, at another time milder. But even taking for granted, that in general there were of late a decrease of the disease, would it be logical to attribute this to vaccination? Has the further advance in culture, in hygiene, in medical science nothing to do with it?

Ad. 2. Who ever has observed epidemics and sporadic cases will know that those who have been vaccinated, are not seldom attacked with the confluent form, while such as are not vaccinated escape frequently with a mild form. The mortality, if all circumstances are carefully weighed, shows no difference between vaccinated and not-vaccinated persons. And if in some epidemics among the not-vaccinated children, a greater number of deaths should statistically be proved, we may easily find the reason in

this, that only the stronger and healthier ones were deemed fit for vaccination; while the weaker and sicklier ones were left alone. Would it not be wrong to expect from this class of children a smaller contingent to the number of death-rate, than from the stronger and healthier class?

Ad. 3. This is an obvious illusion of the 1,337 cases of small-pox in Berlin, in 1870, 1064 had been vaccinated once, and 127 twice; only 237 had not been vaccinated. Of the 6,213 small-pox cases which were treated in the general hospital at Vienna, in the years 1836-56, there were 5,217 who had been vaccinated; among the 1,330 cases treated from August, 1858, till the close of 1864, there were only twenty who had not been vaccinated. In England the statistics show that within the years 1842-65, there died with small-pox 104,213 persons, of whom at least eighty-four per cent. had been vaccinated.

The faith in the protection of vaccination, for life has grown shaky even with its advocates; for re-vaccination is now everywhere recommended every ten, and even every six years. If this fading of faith should continue in an arithmetic progression, even the strongest faith would soon arrive at the point, null and void.

Fourth. Statistics are elastic, serviceable for any purpose. The diminution in the severity of small-pox epidemics has much more its cause in the rational dietetics than in vaccination and re-vaccination, otherwise those who caught the disease could not have belonged to the vaccinated portion of the community. (J. Hermann, Allg. Wien. Med. Ztg., 1871; J. Pr., 1873, p. 146.)

Observations on Vaccination, lues gonorrhoeica, sycosis. (C. Kunkel, J. Pr., 1873, p. 584.)

Atrophy of the Right Arm after Re-vaccination. Allopathic treatment failed; electricity had no influence. Heavy sleep; feels badly in the morning, can't scarcely get "agoing;" stool extremely hard; bleeding after stool; urine scanty. Especially prominent is the atrophy of the adduct. pollicis; flexion of thumb and forefinger impossible; the function of biceps wanting; extension tolerable normal; the lower arm always "icy cold." *Thuja*³⁰, one dose. In about a month stool normal. Three months later general health all right and flexion of thumb and forefinger possible again; the function of biceps had not returned a month later. (C. Kunkel, J. Pr., 1873, p. 166.)

Baptis. in Small-pox. During April, May, June and July of the year, nearly three hundred cases of variola came under my

care in a large institution in this city; the earlier cases were treated some with *Tart. em.*^{3x} and higher, others with *Vaccin.*, and some with *Thuya*; these earlier cases would bear a fair comparison with the usual average of recoveries; out of two hundred and ten cases nineteen died, or nine per cent. The remaining cases, about ninety in number, were treated with *Baptis.* only, 1st dec., one drop dose, every two to four, six or eight hours, according to the severity of the case. These cases were not selected, but comprised every case occurring in one department, irrespective of age or severity. Ages varied from three to eighteen years.

In the cases in which *Baptis.* was used, the result was even beyond my expectation. In several confluent cases, which threatened to prove speedily fatal, the effect of the remedy was very marked, inducing a speedy development of the eruption, with corresponding diminution of the constitutional disturbance. Nor was this all, the appetite improved, the patients were able to, and did take abundant nourishment, and continued to do this throughout the attack. In many of these the secondary fever was entirely absent; in other cases the disease appeared to be suddenly arrested, but in all the effect was very speedy in improving the general symptoms. In these that were thus cut short the vesicles seemed to dry up instead of becoming pustular, and there was an entire cessation of all symptoms of illness within a few days after taking the *Baptis.* Many of the patients recovered their usual spirits and tone, and the symptoms were so mild as not to prevent them moving about; one can only assume that the *Baptis.* must be credited with the great modification of the disease.

Of those patients who succumbed to the disease in the earlier part of the epidemic, the majority died on or about the sixth day of illness, and this was preceded by flattening of the vesicles and a very feeble circulation, but in those cases treated by *Baptis.* there was no evidence of the failure of vital power. I believe too that the decomposition of the skin and mucous membrane was much prevented by the use of this drug; at any rate the usual offensive effluvium was almost entirely absent.

In three cases hemorrhage took place, and bleeding at the nose, and in two the catamenia appeared out of due time and excessive in quantity; these recovered without an untoward symptom; in the earlier cases when this symptom showed itself, death followed. In some cases that I had under treatment in private

practice, the effect was equally encouraging. (E. Williams, B. J. H., 1873, p. 344.)

Skin.

Ephelides, when they are of a light yellow color, are easily removed by the external application of *Chlorine* in solution, with two parts of distilled water, night and morning, for eight to fourteen days. The brown ephelides required a solution of *chloride of lime*, in the proportion of 1: 10-15-20 of diluted water, applied with a camel-brush to the parts, or the *tincture of sulphur*. (Hirsch, H. Kl., 1873, p. 30; N. A. J. H., v. 22, p. 102.)

For the removal of *warts*, Dr. Hirsch recommends the local application of a saturated solution of *Kali caust.*, and where a whole crop appears in children, the frequent use of a concentrated solution of marine salt will remove them. (N. A. J. H., v. 22, p. 132.)

Warts. Very numerous on hands of a girl, æt. 12. *Thuya* topically applied. Cured. (J. C. Burnett, H. W., v. 8, p. 38.)

Erysipelas. Disease contracted by a physician while dissecting. Has been sick a week; face swollen, bluish-red, or leaden hue; tongue dry, glossy, tremulous; aggravation from weight of clothes, from noon until midnight. *Laches.*^{2o}, dry, every three hours. Relief. (J. Heber Smith, N. E. M. G., March, 1873, p. 116.)

Herpes and Graphit. By Dr. Goullon. Herpes may be divided into herpes gastricus, hystericus, plethoricus (from venous stasis), herpes cacoehymicus. To one and all of them *Graphit.* is more or less related. *Graphit.* in its relation to different constitutional anomalies, finds induration in chlorosis, scrofulosis, hydrops, arthritis and rheumatism. (N. A. J. H., v. 22, p. 201.)

Herpes Zoster. Two cases. *Rhus tox.*^{3o}. Cured. (J. C. Burnett, H. W., v. 8, p. 37.)

Herpes Circinnatus. P. J. D., æt. 7, patches on head, forehead, chin and neck. *Tellur.*^{6o}. Cured. (A. E. Hawkes, H. W., v. 8, p. 139.)

Urticaria. Mrs. B., æt. 62, great restlessness of the extremities; violent itching; sleeplessness; urine scanty, full of sediment, burning in urethra during its passage. *Copai.*^{6o} cured her in forty-eight hours.

Miss B., æt. 24, suffered four years ago from urticaria, was treated