

struction. It is not to be denied, meanwhile, that this individual character of the medicaments and of the diseases ought to be taken into consideration much more frequently than the symptoms gathered at all the different periods of the day. It has been our ignorance of these facts that rendered the certain cure of the various forms of toothaches as impossible to us as it is, at this very day, to Allopathy. Placing a just value on the necessity of possessing these items of knowledge, Homœopathy has set herself to the task of completing, more and more fully, that which remained incomplete, and of verifying, by means of facts, all the doubtful, uncertain or contradictory symptoms; she will never select the remedy at hap hazard; but will always depend upon the experiments which have demonstrated its value. Our *Materia Medica Pura* has, in this way, received a considerable augmentation and the instructed Homœopathician of the present day, is in a position to prescribe the efficacious remedy for a majority of cases of toothache.

The object which I have in view and the limits to which I am restricted, do not allow me to enter into all particulars and to make, of this little essay, a complete treatise. I will merely observe, that the larger part of the conditions and of the circumstances which provoke or which aggravate all kinds of pain in other organs, or in other parts of the body, find their application equally here also, and that some among them refer exclusively to pains in the teeth.

Among the latter may be enumerated especially those sensations which are provoked by taking warm or cold food or drinks; coffee, tea, wine; by eating fruit, bread, sugar, sweet, salt or sour food; by using tobacco; by biting, chewing, respiring; by opening, closing or moving the mouth; by rubbing, picking or sucking the teeth; by touching them with the tongue; by speaking, etc. All these circumstances have revealed an aggravating or an ameliorating influence, in a greater or less number of remedies. These points ought all to be consulted, until we shall have succeeded in uniting, as well as possible, all the symptoms that are present in one

single remedy, which will then be the remedy of which we are in search, unless indeed the point which we considered, under rubric 3, should absolutely oppose it.

b. As regards the ameliorations, according to time and circumstance, it suffices to mention that their examination serves solely to complete and to verify the preceding researches. Such investigations have the most intimate relations with those of which we have treated; and, moreover, it has been equally neglected by Allopathy, and is of the highest importance to the homœopathic doctrine.

c. The concomitant symptoms constitute a tolerably independent part of this second head, although already somewhat comprehended in the first.

Homœopathicians understand, by concomitant sufferings, those which, independently of the general character of the disease and of the patient, accompany the pains in the teeth, or alternate with them. These concomitant sufferings may, on the one hand, extend throughout the entire series of symptoms provoked by the medicine, from the moral symptoms even to the febrile; they serve, in like manner, as a complement of the common symptoms which were the subject of consideration under the first head. On the other hand, although they may be peculiar to many other remedies, they seem to show a very especial tendency to associate themselves with pains of the teeth; it might be said that they spring from the same origin. Such are those which are manifested in the proximity of the painful teeth; notably in the various parts of the head and of the face, in the jaw, in the malar bones, in the nose, in the eyes, in the ears, in the temples, in the cheeks, in the cavity of the mouth, and in the neck. Although many affections of this kind are observed in other diseases, there are certainly some which seem to accompany by preference the affections of the teeth, and these present consequently an almost special importance, although they do not of necessity absolutely exclude the others.

I will limit myself to these brief observations, in order to occupy myself with two cases which do not often present

themselves, but which yet may sometimes be met with. First, there are symptoms in our *Materia Medica pura* which do not offer a complete *simile* to the pains of the teeth, and do not contain a sufficient characteristic to correspond with the concomitant symptoms; then again there are others which present the desired conditions, but the remedies which seemed to correspond have been administered without any effect.

In the former case, the defects should rarely be attributed to the insufficiency of our experimentations. The difficulty springs, most frequently, from the empirical use, not only of allopathic remedies, and of secret nostrums recommended as infallible in popular books and in the journals, but even also of homœopathic remedies prescribed by *dilettanti*, whose impatience has driven them to experiment with several remedies successively, and at short intervals. There results from this procedure a sort of monstrous affection, compounded of the natural disease and of a medicinal disease; an abnormal totality, in the midst of which one can neither find a convenient starting point, nor form of it an intelligent image. Help is not then possible, except on condition of having recourse to the preliminary rational use of antidotes of short action, by means of which to reconduct the entire malady to its natural and primitive state. When this end has been attained, we may select and employ, with confidence and efficacy, the remedy which corresponds to the case.

Sometimes the failure of a well selected remedy is due to a chronic miasm, which pervades the whole organism. This is observed equally in other diseases. In such a case we shall never attain our object, at least with certainty, unless we first administer a suitable anti-miasmatic (*sit venia verbo*), and then afterwards give the remedy which may be homœopathically indicated. This will infallibly act, often indeed in a very few hours, if the dose is small and sufficiently dynamized. For the rest I propose to return, in discussing the fourth head, to this point, so often neglected and even disputed.

3. According to what we have stated, Homœopathy satisfies the first and third of the duties which Celsus imposes upon the good physician, when he says (III. 4): "*Asclepiades officium esse medici dicit, ut tuto, ut celeriter, ut jucunde curet;*" it cures with certainty, and avoids the opposite of *jucunde*, while Allopathy is guilty of this, every day, in her manual operations. The duty remains of curing quickly (*celeriter*), of putting to flight as quickly as possible the pains in the teeth, which are often violent in the extreme. But it would be to involve oneself in a vexatious contradiction with the duty of curing safely (*tuto*), if one should understand by a rapid cure the alleviation of the pains by the use of palliatives. Our adversaries understand it in that sense, when they use opium, chloroform, etc.; but this treatment has for its inevitable consequence the reproductions of the pains, the exacerbation of the evil, and, most frequently, affections still more serious. The signification of the saying of Celsus is simply that the existing malady ought to be completely cured in the shortest possible time; but, on condition that there result therefrom no immediate or future injury.

According to my own views there cannot here be any other question, except that respecting the size of the dose of that remedy which has been recognized as the only appropriate one. This dose ought to be sufficiently strong to cure the malady, and weak and innocuous enough to insure that the cure be not uselessly protracted, or that no damage is occasioned by the excess of the medicinal force.

The third head, which has this important fact for its object, cannot be discovered and confirmed except by experience, that is, by the results of very numerous experiments, comparative in their nature, and decisive as regards their effect. Deductions and presumptions, or suppositions, ought to be rigorously eliminated.

At the present day it can no longer be denied that the most skillful and experienced physicians of all countries, when they have made these comparative experiments uninterruptedly and with prudence, have pronounced almost unan-

imously for the high and the highest dynamizations in the smallest dose. And in this indeed they do but follow the example which the brave and learned founder of our school gave them in the last years of his long and noble career.

America pursues the path of progress, especially in the matter of questions of experience. In fact, she has outstripped in this regard the venerable Europe which continues to advance with tardy footsteps. Already in the month of November, 1856, Dr. B. Fincke, of Brooklyn, in the State of New York, a practitioner of honorable fame, communicated to me a series of thirty-eight magnificent cures, which he had achieved by means of the high and highest potencies prepared by himself. C. Hering, A. Lippe, Carroll Dunham and others, who justly rank among the illustrious of our school in America, have verified similar happy results, and have removed all doubts which might have been entertained of the superiority of the high potencies over the low. Dr. Fincke has gone still farther in the *AM. HOM. REV.*, Dec. 1860, *pp.* 561, *et seq.*, he has unfolded a new plan for preparing the high potencies, and he designates the product by the name of contact-potencies. He obtains them by succussing a quantity of dry globules, non-medicated, with a small number of dry medicated globules: the medicinal force of these latter is communicated permanently to the non-medicated globules. This method, as the author himself has taken care to observe, differs a little from that of Korsakoff (long ago forgotten). We read in the same work an account of nine excellent cures, obtained by means of these contact-potencies. The article ends with a series of twenty-two conclusions and observations, which are worthy of being received and discussed, and a short *resume* intended to give a clear view of the various advantages of the high and the highest potencies.

4. In the conclusion of the second head, I said a few words about the hurtful influence which a chronic miasm, penetrating and dominating the organism, may exercise upon the action of remedies, which are otherwise homœopathically indicated. This case presents itself most frequently when an

amelioration occurs which proves not to be permanent, and which, therefore, resembles the result of a palliative. We may, in such a case, be sure that we have to do with a chronic miasm, and which must be cured, if we desire to radically and permanently remove the actual malady.

In many cases of this kind, I may even say in the great majority, we may obtain a *radical* cure of the toothache, by giving the patient, immediately after the cessation of the pain, one or more doses of the antimiasmatic indicated. It is the same with many other diseases of which we cannot ignore the chronic, and, at the same time, miasmatic nature. Hahnemann employed this precautionary measure in the latest years of his life, whenever he had the least suspicion of the chronic nature of the malady, whether from a knowledge of an antecedent contagion, or from the fact that the sufferings and the morbid condition were extraordinarily protracted. This precaution almost always gave him the advantage of being able to add to the maxim of Celsus the idea of *permanence*. (*stabiliter perdiu*), which was always satisfactory to the patients.

In several other maladies, common enough, the remedies that are otherwise homœopathically indicated bring no amelioration, but leave the disease, as it were, untouched. This fact affords the most certain proof that the organization is dominated by a chronic miasm to such a degree that the latter successfully opposes every foreign individual action. We should here, without delay, make use of the various antimiasmatic remedies. I will allow myself to add some further observations on the signs of the one or the other miasm, observations which are, in great part, the fruit of my own experience.

It is not, indeed, possible to construct, with a few salient strokes, a satisfactory, characteristic picture of the "innumerable varieties of pains in the teeth, and of their various causes" (*Chronic Diseases*, I. 73), which have struck their roots in a *psoric* soil. This miasm, from its long existence in the most varied conditions, has acquired, much more than

all the other miasms, a true Protean nature; almost everywhere, and under every form, it has passed the limits of every state of normal health. It is necessary, then, independently of the anamnesis of the exanthemata, to classify under this head all those diseases of the teeth, with their concomitant symptoms, which, although they may be chronic, do not present the character of one of the two following miasms.

The syphilitic toothaches occur, no doubt, less frequently. Those which we encounter, far from being pure, are almost always complicated with the mercurial disease. They may be recognized by the fact that it is the roots of the teeth which are the first and principal seat of suffering; from the swelling and ulceration of the gums, from the enlargement of the tongue, from the salivation and from the offensive breath, and finally from the fact that these pains break out with greater violence at night.

Independently of the use of Mercury for purely syphilitic toothache, it will be proper, according to the existing symptoms, to administer the corresponding antidote, because the patients have, as a general rule, abused Mercury, and the malady is, often enough, complicated with psora and sycosis.

Toothaches of a sycotic nature are the most frequent. Since the discovery of the great resemblance, rather, indeed, the identity of sycosis and variola, we have been able to recognize the enormous diffusion of this miasm; for inoculation has spread it wherever this procedure has been practised. The characteristics of toothache of a sycotic nature, in so far as I have been able to determine them, comprehend the following signs: the teeth begin to become carious, and to decay on the middle, so that the consequent cavity starts, not from the crown but from the side, immediately above the gum. After that the destruction extends in the direction of the root, which decays and crumbles, and then reascends towards the crown, which breaks and falls into little pieces, while the surface of the tooth is entirely unaffected. The teeth become by degrees yellow and black, get loose in their

sockets, and are very sensitive when the patient bites, or when he masticates or drinks cold solids or liquids. These signs are often accompanied by ulcers of a whitish blue color, which are seen upon the gums, on the inside of the lips, and in the angles of the mouth, without, however, containing true pus. Up to the present time the first and chief remedy for pains and diseases of this character is *Thuja occidentalis*. There are various reasons for supposing that the mineral kingdom (perhaps also the animal kingdom) will one day furnish us a remedy still more energetic than those which we oppose to the two other miasms. The *Thuja alone* will be as insufficient against this miasm, as Sulphur or Mercury against those. Therefore, to obtain more complete and permanent success, it is necessary to resort, besides, to Apis mel. Calc. Caust. Lach. Lyc. Mezer. Nitr. ac. Rhus. Selen. Sep. Sil. or Staph.; all of them remedies which have sycotic symptoms, and among which we must choose, according to the similarity of the symptoms.

From the preceding observations it will appear that we are in a position to afford the rapid, safe, convenient and enduring aid which is justly to be looked for in every variety of pains and disease of the teeth, aid which it is entirely out of the power of Allopathy to afford. Wherefore we have the greater reason to keep in great honor the conquest that we have made, and to combine all our efforts to cultivate and complete this important branch of our beneficent science. Experience will be our guide; and the precious treasure that we have collected will afford us numerous opportunities to demonstrate the value of this especial advantage, and, at the same time, the excellence of our science of Homœopathy.

FIVE POINTS HOUSE OF INDUSTRY.

BY B. F. JOSLIN, M.D., NEW YORK.

THE cases of sickness alluded to in the following tabular statement, (from January 14, 1861, to March 1, 1865,) include not only the sickness occurring among the persons residing in the Five Points House of Industry, but a considerable number, in addition, brought from the miserable localities of the neighborhood, for the purpose of affording them the advantages of the better accommodation and care of *our Hospital*. In some instances cases of an extreme and necessarily fatal character were thus introduced, so adding to our average mortality: in a number of cases we have good reason to believe lives were saved by the change.

It is to be remarked, that of the 33 were sent from the House to Bellevue Hospital, many were *adult* inmates, for whose care in sickness we could not well provide. About the only *children* sent away were occasional cases of Varioloid; so many persons visiting the house, it was not considered advisable, for reputation's sake, to have such cases on hand. It is worthy of note, that only 15 cases of Varioloid have occurred in the period of four years, among a community more than ordinarily exposed to its contagious influence; but the full explanation is believed to be found in the degree to which vaccination has been practised, no less than 1,578 persons having been vaccinated within the four years alluded to.

It will be observed that 184 cases of typhus fever occurred, 13 of which were sent to Hospital, leaving 171 as the number treated in the House; of these two died, both adults—one, Mr. Harper, an assistant, and the other, Mr. Barlow, the superintendent, worn out with several years of most faithful, self-denying labor.

In the tabular statement we report 249 cases of Ophthalmia

2 sent to Hospital, leaving 247 as treated in the House. Besides these quite a number of mild cases were treated and not registered; but, of the whole number but a single eye has been lost: this patient subsequently died of marasmus.

Of Measles we have treated 43 cases, and of Scarlet Fever 6 cases, with one death from each. When the Scarlet Fever cases occurred we gave the children of the House each a daily dose of Belladonna as a prophylactic; the result was apparently satisfactory, as shown by the moderate number of cases.

Of Injuries we report 69 cases treated, comprising cases of fracture, bruises and cuts.

Of the Eruptions reported, a considerable number were cases of scabies.

23 cases of Croup are reported, 3 of which proved fatal.

Of the *fatal* cases not previously alluded to, four were from Marasmus, and 2 from Cholera Infantum, 1 from Acute Hydrocephalus, 1 from Convulsions, 1 from Pneumonia, 1 from Congestion of the Lungs, 1 from Phthisis, 1 from Tuberculosis, and 1 from Dropsy—in all 20 deaths.

The prescriptions amount to 6,008. I have made, in the four years and two months, 559 visits to the House. Within the latter two years of the above period I have been assisted by Dr. G. L. Freeman, who has resided in the House a considerable portion of that time.

TABULAR STATEMENT OF CASES.

	Number of Cases.	Sent to Hospital.	Treated at House.	Died.
Typhus Fever	184	13	171	2
Sore Throat	53	0	53	0
Diphtheria	10	0	10	0
Ophthalmia	249	2	247	0
Measles	43	0	43	1
Scarlet Fever	6	0	6	1
Varioloid	15	7	8	0
Erysipelas	6	1	5	0

	Number of Cases.	Sent to Hospital.	Treated at Home.	Died.
Roseola	3	0	3	0
Urticaria	2	0	2	0
Varicella	2	0	2	0
Tinea Capitis	21	0	21	0
Eruptions in general	69	0	69	0
Boil	4	0	4	0
Intertrigo	1	0	1	0
Abscesses	26	0	26	0
Malignant Pustule	2	0	2	0
Ulcer	13	0	13	0
Periostitis	1	0	1	0
Osseous Tumor	1	0	1	0
Tumor	1	0	1	0
Injuries	29	0	29	0
Burn	3	0	3	0
Inflammation of the Brain	1	0	1	0
Acute Hydrocephalus	1	0	1	1
Congestion of the Brain	1	0	1	0
Headache	62	0	62	0
Vertigo	3	0	3	0
Epilepsy	1	0	1	0
Convulsions	6	0	6	1
Insanity	1	0	1	0
Swelling of Cheek	1	0	1	0
Swelled Face	2	0	2	0
Cancerum Oris	2	0	2	0
Stomatitis	5	0	5	0
Spasmodic Affection of the Mouth	1	0	1	0
Toothache	11	0	11	0
Coryza	7	0	7	0
Ozena	3	0	3	0
Parotitis	6	0	6	0
Neuralgia	3	1	2	0
Sore Lips	1	0	1	0
Otorroea }	11	1	10	0
Otalgia }				

	Number of Cases.	Sent to Hospital.	Treated at Home.	Died.
Hordeolum	3	0	3	0
Cough	25	0	25	0
Acute Bronchitis	150	1	149	0
Hoarseness	13	0	13	0
Croup	23	0	23	3
Whooping Cough	3	0	3	0
Chronic Bronchitis	3	0	3	0
Pneumonia	9	0	9	1
Typhoid Pneumonia	1	0	1	0
Congestion of the Lungs	1	0	1	1
Pleurisy	1	0	1	0
Pleurodynia	2	0	2	0
Haemoptysis	4	1	3	0
Phthisis	4	1	3	1
Gastric Derangement	91	1	90	0
Gastralgia	1	0	1	0
Dyspepsia	26	0	26	0
Pyrosis	1	0	1	0
Colic	7	0	7	0
Diarrhoea	35	0	35	0
Dysentery	8	0	8	0
Cholera Morbus	1	0	1	0
Cholera Infantum	3	0	3	2
Constipation	5	0	5	0
Hepatitis	2	0	2	0
Jaundice	1	0	1	0
Hernia	1	0	1	0
Inflammation of the Bowels	1	0	1	0
Hæmorrhage from the bowels	1	0	1	0
Prolapsus Ani	2	0	2	0
Hæmorrhoids	2	0	2	0
Helminthiasis	5	0	5	0
Marasmus	4	0	4	4
Stricture of Urethra	1	0	1	0
Metritis	1	0	1	0
Amenorrhœa	4	0	4	0

	Number of Cases.	Sent to Hospital.	Treated at Home.	Died.
Menorrhagia	3	0	3	0
Lencorrhœa	3	0	3	0
Venereal	2	1	1	0
Dysuria	1	0	1	0
Nephralgia	2	0	2	0
Prostration	5	1	4	0
Enlarged Glands	20	0	20	0
Inflammation of Mammæ	2	1	1	0
Fever, Inflammatory	10	0	10	0
—— Intermittent	2	0	2	0
—— Bilious	3	0	3	0
—— Remittent	2	0	2	0
Rheumatism	24	0	24	0
Elephantiasis	1	0	1	0
Tuberculosis	1	0	1	1
Hip Disease	2	0	2	0
Ganglion	1	0	1	0
Paralysis	1	1	0	0
Wry Neck	1	0	1	0
Scorbutus	1	0	1	0
Dropsy	1	0	1	1
Whitlow	7	0	7	0
Phlegmasia Alba Dolens	1	0	1	0
Accouchment	2	0	2	0
Night Sweats	1	0	1	0
Œdema	1	0	1	0

RECAPITULATION—1861-'65.

Total number of Cases	1,418
Sent to the Hospital	33
Treated at the House	1,385
Died at the House	20
Prescriptions	6,008
Visits by Dr. Joslin	559
Vaccinated	1578

OBSERVATIONS ON BRYONIA.

BY CARROLL DUNHAM, M. D., NEW YORK.

(Continued from page 113.)

ZLATAROVICH calls especial attention to the tenderness of the abdominal walls generally; to the burning pains along the anterior connection of the diaphragm with the ribs; to the sensitiveness of the *hepatic region* to touch and on deep inspiration; also to the fact that Bryonia diminishes the intestinal excretions, weakens the peristaltic action of the bowels, and retards the stool. It produces diarrhœa, he thinks, only when taken in very large doses.

Urine.—The urine is high-colored, concentrated; passed frequently, sometimes with pain. Occasionally during exertion it is passed involuntarily.

Menstruation.—Bryonia uniformly hastens the coming on of the menses, and increases the flow.

Respiratory Organs.—Fluent coryza, beginning with violent and frequent sneezing, accompanied by stitching headache, when the prover stoops, and by hoarseness and an altered tone of voice.

Cough.—Generally dry; it seems to come from the region of the stomach, and is preceded by a crawling and tickling sensation in the epigastrium. This is the general characteristic; sometimes there is a crawling sensation in the throat also, inducing a cough, followed by mucous sputa.

Hacking cough, as if caused by something (mucus?) at a definite spot in the trachea; after coughing for some time this spot becomes very sensitive, and it is worse from talking and smoking.

Cough induced by coming from the open air into a warm room;* from a sensation as of a vapor in the trachea, which prevents the prover getting air enough.

* This statement was, by a slip of the pen, reversed in "Observations on Aconite."—REVIEW, page 31.

The cough is accompanied by stitching pains in the brain; by rawness in the larynx, by stitches in the intercostal spaces and in the sternum; by soreness in the epigastrium; by gagging, *without nausea*; by vomiting of food.

It is very characteristic of the Bryonia cough that, while coughing, the patient presses with his hand upon the sternum, as though he needed to support the chest during the violent exertion. Also, that the parts which are the seat of subjective pain become subsequently sensitive to external pressure; *e. g.*, the sternum. (So also the joints.)

The expectoration, which is infrequent and scanty, is tough and sometimes bloody.

Respiration is impeded, as though by a pressure on the epigastrium, and is accelerated, as though by a feeling of heat in the epigastrium and chest. The prover feels a desire to take a deep inspiration, but when he attempts to do so he experiences a pain which does not allow him to expand the chest. *Thoracic* respiration is often almost impossible, by reason of the stitching pains in the sides of the thorax.

Thorax.—Pressing pains, sometimes just above the epigastrium, sometimes over the whole chest, or on the sternum, impeding respiration. Stitching, lancinating pains are, however, more frequent. They occur on respiring, or on turning around in bed; they are situated sometimes in the sides of the thorax, and sometimes they extend through the thorax from the front to the scapulæ; generally the seat of the pain is sensitive to pressure and when the arms are moved.

Back.—Here we meet a new variety of symptoms. Sticking and jerking pains pressing between the scapulæ and extending thence through to the epigastrium, when sitting; pain in the lumbar and sacral region, as if beaten; stiffness, tearing and tenderness in the joints and muscles of the lumbar region, which prevents motion and stooping; it is felt most when standing or sitting, and not so much when lying.

Extremities.—In the extremities we have stitching pains in the region of the large joints, as in the shoulder, over the trochanter, and at the knee—all greatly aggravated by mo-

tion, touch, or any jar or shock. Drawing pain, as if luxated in the medium and smaller joints.

The limbs and the joints swell, become red, and are very sensitive to touch or motion. The pains are relieved by warmth.

Skin.—Various eruptions. Small red spots on various parts of the body; some with sensibility, and not disappearing on pressure; some *burning*, and disappearing on pressure.

Sleep.—Great sleepiness by day, with yawning, lassitude, stretching, etc. Yet, at night, the prover cannot sleep, because of the tumultuous course of the blood, anxiety and heat. A concourse of anxious thoughts keep the prover awake till three or four, A. M. Sleep full of dreams. Often a prattling and muttering delirium. Also, sleep-walking has been observed under the action of Bryonia, and cured by it.

Fever.—In the fever which Bryonia produces cold predominates. Coldness and shivering over the whole body. Heat often only internal, or on single parts of the body, and it is conjoined with great thirst. So indeed is the chill. Sweat on slight exertion, even when walking in the cool air. It is frequent at night, and is often *sour*.

Disposition.—Anxious, peevish and hasty.

GENERAL ANALYSIS.

1. On the *Vital Force*.—That Bryonia exerts, in some respects, a depressing action on the *Vital Force*, appears from its action on the sensorium, which is depressed and benumbed; there is a decided sensation of weakness and lassitude; the arms incline to sink by one's side; the limbs move but sluggishly. This sensation of lassitude is most marked early in the morning, as though the night's sleep had brought no refreshment. The least exertion seems to use up the forces of the body.

Nevertheless this prostration is not excessive, nor is it universal. For the disposition is not indifferent, as might have been expected; on the contrary, the prover is hasty and peevish. Again, the special senses are not materially affected; the sphincters are not relaxed, nor do any involuntary