

do not deny that prolonged trituration may, in some drugs, develop power to affect the human organism; but no evidence that I have ever seen proves that it does so in all, neither can we show to what extent it does so in any. Dr. Lippe adduces nothing to prove that the dynamization theory is an indispensable part of Homœopathy—he merely says that it is so; and this has been already done *ad nauseam*. That such a theory is not indispensable has on the other hand been shown often enough by perfect cures having resulted from the use of crude crugs in small doses, prescribed on the homœopathic principle.

“It has been proved many a time and oft, that a low dilution or the pure substance has succeeded in curing where a higher dilution has failed.” In commenting on this passage from my paper, Dr. Lippe asks for the minute record of a case illustrating the truth of what I state. I confess that I can see no advantage that would be derived from such a detail. If my word that I have seen such cases, that medical friends of mine have seen such cases, is not sufficient evidence on which to ground this assertion the report of a case by me would be equally valueless.*

Dr. Lippe asks what I understand by a cure; the *Imperial Lexicon* “interprets a cure”—“a restoration to health from disease, and to soundness from a wound.” I think that definition as good as any that could be given.

Dr. L. tells us that an Allopathist cures an accelerated pulse dependant on organic disease of the heart by *Digitalis*. I never heard of an Allopath pretending “to cure anything” of the kind. Relief for a time from organic disease of the heart, some may endeavor to secure from the antipathic action of *Digitalis*. But none but a quack or an ignoramus would ever presume to describe such an achievement, if effected, as a cure.

Not having seen the experiments of Dr. Eidherr, I am unable to express any opinion regarding them.

* See Dr. Diller on “Diphtheria.”—*Western Homœopathic Observer*, March, 1864.

Dr. Lippe now writes as follows: “That crude drugs and low potencies cure, and cure according to the homœopathic law of cure no one ever denied, and if this had not been the fact we would not have had Homœopathy.” This is what I have, in the paper to which Dr. Lippe takes so much exception, endeavored to enforce: and, as a natural consequence, that the man who so practices is a Homœopathician. “Oh! but,” says Dr. Lippe, “high potencies cure where the low do not.” Perhaps they do; but the cases illustrating this assertion are marvelously few; and were they legion, would not affect the argument one iota. Since the man who uses the crude drug according to the homœopathic law, is every whit as much a Homœopathician as he who prescribes the higher potencies according to the homœopathic law.

Dr. Lippe then remarks “that in every instance in which a lower potency has ever relieved, not cured, a case to which a higher potency of the same remedy had been given without success this relief has proved to be only the palliative effect, not the curative action of the remedy.” This is simply a roundabout way of saying that where relief only has been given by a medicine, that medicine has only palliated the patients sufferings. This I apprehend applies equally to high and low dilutions where a cure is not effected, but some ease to the patient, some mitigation of pain, etc., only secured by the drug used.

What I understand by Homœopathy I have stated, as clearly as I can, in the third paragraph on the eighth page of the January number of the *English Review*. I cannot do so more explicitly and therefore must ask Dr. Lippe to read this paragraph again. Having read the sentence referred to, I would like Dr. Lippe to tell me whether I, holding the therapeutic views therein expressed, am a Homœopathician or not; and if I am not so, what am I? I care not one jot what I am called so long as I cure my patients, or how I cure them so long as I do so in the quickest, safest and pleasantest manner known to me.

I find no fault with Dr. Lippe for his faith in potentiza-

tion; for supposing that a case of intermittent fever of some standing is curable in three or four days with as many globules of the 2000th dilution of Belladonna; or with Mr. Wilson for imagining that *Lycopodium*²⁰⁰ cured a case of pneumonia all but moribund before that marvellous agent was, through the medium of *aqua pura*, introduced into the patient's organism.

What I do object to is the arrogance, the presumption which demands for those, for those only, who credit such extraordinary—I had almost written supernatural—assertions, the exclusive right to a title for which they can show no special or peculiar claim. What I still more object to is, that with so much remaining to be done in sifting the *Materia Medica*, with the urgent call for accurate translations of original provings, with the need so frequently expressed for an examination of the relations borne by well proved medicines to clearly defined forms of disease, with the whole superstructure of the science of therapeutics waiting its erection on the foundation laid by Hahnemann and his early disciples, that while all these works are unaccomplished, men, who, we would trust, are competent to assist in carrying them out, should expend their time and strength in dilating on the supposed extraordinary merits of 2000th and 10000th dilutions; and still further exhaust their energies in unmeasured abuse of all who will not accept their *post hoc* for *propter hoc*.

With the Wilson-Hempel dispute I have nothing to do. Doubtless in a work of such magnitude as the *Symptomen Codex* there are errors; but in spite of them, I feel that I am, and I think all English-reading homœopathic practitioners ought to be, extremely grateful to Dr. Hempel for his untiring industry in placing before us in an English dress the records of the actions of many valuable drugs. If Mr. Wilson and those who have joined him in raising this hue and cry about Hempel's imperfections had only done one-fiftieth part of the work that he has accomplished, Homœopathy would be much better understood, much more widely and success-

fully practised than it is. These gentlemen are critics and nothing more. They find fault with the work of others and do none themselves. But it is "never too late to mend," and if Mr. Wilson really believes that Hempel's errors are as general and as serious as he has represented them to be, let him put his shoulder to the wheel and give us "a revised edition" of the *Symptomen Codex* "corrected from original sources;" such a work, well done, will earn Mr. Wilson the cordial thanks of all English Homœopathicians; and further a great good will have grown out of a discussion, which hitherto has been productive of more evil to the progress of Homœopathy than any other that has ever taken place.

With one more reference to Dr. Lippe's article I will bring this paper to a conclusion.

Dr. L. complains that Dr. Hempel, when in a witness box, swore to having given one-fifth of a grain of Arsenic in cholera; that the patients did well; and that in prescribing, his habit was to endeavor "to stop short of symptoms of poisoning." Of course all this is to Dr. L. very objectionable; Dr. H. is objectionable; the fifth of a grain of anything, as a dose of medicine, is objectionable; but to state that any case of disease was ever cured by such a dose is in the highest degree objectionable; it is utterly subversive of all Dr. Lippe's ideas on the subject of Homœopathy.

The most singular passage in this attack upon Hempel is that which declares that the symptoms characteristic of Arsenic, and those which are so of Asiatic cholera, are so very different, that "but in very few and very exceptional cases Arsenic may become the curative remedy in the above-named disease." I would here ask Dr. Lippe whether he has ever seen a case of arsenical poisoning, whether he has ever stood by the bedside of a cholera patient? Or has he ever studied the published details of an instance of either? That he can have done so, and have failed to recognize the similarity of the two conditions seems almost impossible.

Dr. Rutherford Russell, an authority on the subject of Asiatic cholera, by virtue of his extensive clinical observations,

his pains-taking investigations into the nature and treatment of the disease, writes thus: "Arsenic is the remedy in which we have far the most faith after the period for the administration of Camphor has passed away." *Epidemic Cholera*, p. 213. London, Headland, 1849.

The dose employed by Dr. Hempel was unquestionably larger than is ordinarily necessary, and possibly a less quantity would have been equally successful in his cases; but the fact remains the same, that what was given was successful—no small merit in any medicine in such a disease as Asiatic cholera.

By the phrase "we endeavor to stop short of symptoms of poisoning," I apprehend Dr. Hempel to mean that while he prescribes sufficient medicine to compass his object—the cure of disease—he does so without risking the chance of an aggravation from giving an excessive dose—a contingency always to be kept in view in prescribing a homœopathically selected remedy. The phrase is certainly a bad one, but clear enough in its meaning, to all who understand Homœopathy, and are free from any desire to misrepresent its author.

I trust I have now been sufficiently explicit to enable Dr. Lippe to understand what I mean by a "Homœopathician."

CASE OF PHTHISIS PULMONALIS.*

BY W. A. HAWLEY, M. D., SYRACUSE, N. Y.

I suppose every man, who has undertaken to practise the art of healing, feels at times a want of satisfaction in the use of remedies, and a sense of uncertainty as to the curative action of drugs, such as to lead him sometimes, perhaps often, into a condition of skepticism in regard to medicine which makes

* Read before the Homœopathic Medical Society of Oneida County, N. Y., June 21, 1864.

his daily labor a weariness to the flesh. Sometimes, however, he is permitted to witness such brilliant and indubitable effects that he gets courage and strength on which he labors for many a common day. And not only does he find encouragement from such cases in his own experience, but it is an aid to his hope and a stimulus to his industry to get authentic reports of such cases in the experience of others. It is this consideration which leads me to give you to-day a report of such a case from the records of my own practice.

On May 5th, 1861, I was called to see E. S., a little girl of some nine or ten summers. An examination resulted in the following notes:

Great irritation, with excessive paleness and dinginess of the skin; dry hacking cough; dullness on percussion, quite marked over upper part of right lung, complete over the base and slight over upper lobe of left lung. Bronchial respiration in upper part of both lungs, very marked in the right, with perfect silence at the base. Respiration hurried and performed entirely by the chest muscles; hectic chill every day followed by considerable fever; most profuse sweat on sleeping, day or night; listlessness with no disposition to play like other children; tongue clean and pale; appetite variable; desire for acids; bowels regular; urine scanty and high colored with whitish mucous sediment on standing; pulse 124 and very small; nails hooked; the fingers looking as if terminating in balls, *very marked*. A symptom, by the way, which is always regarded as certainly diagnostic of confirmed phthisis, and which I never before saw cured.

After a considerable study of the case I prescribed Ars.⁶ and Phos.⁶ in alternation once in two or three hours. The next day, the sixth, continued the same. Visiting her again on the seventh and finding no improvement, I gave her Sulph.³⁰ once in six hours for two days, followed, on the ninth, by China⁶ once in two hours for two more days, when the Sulph.³⁰ was resumed and continued till the fourteenth, when, still getting no positive mitigation of the symptoms and feeling that the indications were, if possible, to control

the excessive prostration and sweating, I went back to Ars.⁶ once in two hours. This was continued, with a relief from the chills and perhaps a little mitigation of sweating, up to the twentieth, still there was no such improvement as to give me any encouragement and with a feeling that the case was almost, if not utterly, hopeless, I carefully restudied it and concluded to give her a single dose of Sulphur¹⁰⁰, followed by Sac. lact. once in two hours and await the result. In a very few days I had the satisfaction of seeing a most marked improvement. The sweats ceased, the lungs began to be cleared out, and all the symptoms were so much improved that on the twenty-eighth she walked to my office, a distance of at least half a mile, and back. Continued the Sac. lact. till June 1st when, the improvement seeming to have ceased, she got another dose of Sulph.¹⁰⁰ with Sac. lact. till the sixth when, complaining of some return of the chills, she had a single dose of Ars.²⁰⁰, which was repeated on the eleventh and was the last medicine she had. About July 1st she was discharged cured. Her cough gone, her respiration perfect, flesh restored, fingers tapered off nicely, nails straightened, and she is playful as other children of her age. I have frequently seen her since, and to-day she is as healthy looking as any child you may meet.

This case seems to me beautifully to illustrate the wisdom of allowing remedies to exhaust their action before repetition in such chronic cases, as well as to demonstrate the efficacy of high attenuations, even when the lower have failed. It is to such cases as this that one can always look back in hours of despondency and doubt, and find encouragement for renewed application and labor. If it shall give like encouragement to any others, the object of this writing will have been fully accomplished.

DISEASES OF CHILDREN.*

BY C. E. SWIFT, M. D., AUBURN, N. Y.

In reporting on diseases of children I present a few cases that I have treated, and which I deem of sufficient interest to present to the society.

Diphtheria which has caused so much anxiety and careful watchfulness among both parents and physicians, and which has proved so fatal in some parts of our State should be noticed. I need not take up time with a history or description of this disease, for we all understand what the disease is; although I fear that we do not all know how to cure it in all its forms. My object, at this time, is to make a statement of a few cases which have come under my care, and in which I have found the action of the medicine so prompt in each case, that I feel it a duty I owe to the profession to report them to this society. I would first call your attention to the successful treatment of diphtheria with Muriatic acid.

I was called, on Wednesday, September 16th, 1863, to see a child aged eight years, who was taken the day before with diphtheria. The symptoms were as follows; pulse accelerated; slight fever; both tonsils and uvula red, congested and swollen with patches of false membrane on both tonsils, of a cheese-like appearance; general prostration; tongue coated yellowish white; no appetite; slight thirst. I gave Belladonna² and Mercurius protiod.², in alternation every two hours. Next day (17th), no change, treatment continued.

18th. Patient seemed somewhat better.

19th. Found the child worse and the disease tending toward the putrid type. Trembling of the hands; nose bleed, blood dark and putrid; great prostration; restless, with slight delirium; very little rash and the peculiar putrid smell which always attends this disease in its worst form. I prescribed Muriatic acid, in solution, five drops to a quarter of a tumbler of water, a teaspoonful every hour.

* A report read before Cayuga County Medical Society, N. Y., June 23d, 1864.

20th. Patient improved, treatment continued, dose every two hours.

21st. Still improving, medicine continued.

22d. Improving finely, dose every three hours and I gave no other medicine but the acid, until the patient was dismissed. I never saw a more marked and prompt action of a remedy in this disease than was obtained from Muriatic acid in this case, and I have no doubt that it saved the life of the child.

February 1st, 1864, I was sent for to visit two patients in the same family, the father aged 45 years and the son 12 years of age. About a week previous a little daughter had been taken with diphtheria, was treated by an allopathic physician and had died that morning. She was then lying in the house. The father and son had been sick some two or three days. The father I found in the following condition:

Slight fever; pulse slow and weak; little thirst; tongue coated, thick yellowish white; uvula and tonsils swollen, red and covered with a thick whitish false membrane; putrid smelling breath, with sordes on the teeth; a complete sore or scabby condition of the lips, enclosing the mouth; more or less rash on the body and limbs; nose bleed every few hours; blood dark and fetid. I gave Muriatic acid¹, in solution, a dose every hour. Next day (April 2d), symptoms about the same, continued same treatment.

April 3d. Decided improvement, medicine continued, a dose every three hours.

4th. Doing well, same treatment.

5th. Improving fast; a dose every few hours, medicine the same.

6th. Patient convalescent and discharged next day cured.

The boy's symptoms were as follows; considerable fever; red and swelled uvula and tonsils, with slight membranous deposit; pulse weak and rather quick; bloated face; pain in the lower limbs; feet swelled and painful; no rash. Prescribed Belladonna² and Mercurius protiod.², in alternation, every two hours.

April 2d. Less pain in the limbs and feet, but restless;

throat somewhat better; less redness; some appearance of rash. Gave Mercurius protiod. and Rhus tox., in alternation, every two hours.

3d. Found the patient as follows: breath putrid; nose bleed; blood dark and fetid; dark crust upon the lips, and a light scarlet rash upon the whole person; great prostration and slight thirst. I prescribed Muriatic acid¹, in solution, a dose every hour.

4th. Patient much better, treatment continued.

5th. Boy doing well, medicine the same, dose every three hours.

6th. About well, same treatment, discharged on the seventh cured.

I have no doubt from the success that I have had with Muriatic acid in diphtheria, that it is one of the best remedies we have in the treatment of this disease, when its tendency is to run into the putrid form, and I feel safe in recommending it to the members of this society who have not already tried it.

Congestion of the Brain.—In the summer of 1860 I was called to see a child, aged about fifteen months, which had been treated by two allopathic physicians for acute inflammation of the brain. The child had been under their care for some ten days and they had given it up to die, and told the parents there was no help for it. I found the child lying upon its back, boring with the head into the pillow; the pupils dilated and insensible to the sight; head hot; much thirst; clawing of the head with the right hand and knitting of the brows, had laid in this condition for several days. I prescribed for the child with great reluctance, and told the parents that I did not think I could save it but would try. Gave Belladonna³⁰ and Helleborus³⁰, in alternation, every three hours. Next day no change, continued same treatment, in forty-eight hours found a slight improvement; the third day, decided change for the better, child could see and all its symptoms better. Continued the Bell. and Hell., at lengthened intervals, until the child was dismissed cured.

Hydrothorax.—Three years ago I was sent for to visit a boy, about 12 years of age, and found him with the following symptoms: he was troubled with a dry cough; the lips bluish and bloated; could not lie down; difficulty of breathing, with effusion of water in the chest. I gave Arsenic, Helleborus and Digitalis without any marked effect. Then I prescribed Apis mel.², in two drop doses, every two hours. In twenty-four hours some little improvement, in forty-eight decidedly better. Same medicine continued, and a dose every four hours, and in the course of two weeks I dismissed the patient cured.

Post Scarlatina Dropsy.—About the 10th of March, 1864, I treated a child, aged three years, for scarlet fever, and dismissed it the latter part of March. On the first of April was called again to see the same child, and found him with anasarca. I learned upon enquiry that, during the afternoon before, the child had been suffered to lie upon the floor with the door and window open, and, draft of air blowing upon him, he had taken cold. His condition was as follows: pulse quick and feeble; urine scanty; inability to lie down; dyspnoea; abdomen distended; great prostration and general dropsy. Gave Ars. alb. and Helleborus, for twenty-four hours, without relief. Then prescribed Apis mel.², in solution, every hour. Patient relieved after the second dose, which improvement continued under the use of Apis mel., at lengthened periods, until the child was cured.

CLINICAL REMARKS ON CANCER.

The following discussion, at the Meeting of the Vienna Society of Homœopathic Physicians, February 24th, 1864, is of such practical interest that we give it a prominent place.

“Dr. Wurmb narrated the course of a case of mammary cancer in a lady at the climacteric period. He was called

about six years ago to this lady who, though appearing to be otherwise in good health, was suffering from a cancerous degeneration of the glands of the left breast and axilla.—The whole left upper extremity was very much swollen and œdematous and painful; the patient was obliged to lie upon a sofa, almost unable to move. At the same time, the lady was visited by a professor, who gave an unfavorable prognosis, and said the patient had not long to live. During these six years Wurmb gave her hardly anything but Ars.²⁰ During the whole period she preserved her appearance of general health; the mammary gland sloughed away gradually and in its place an entirely healthy skin has now formed.

“Dr. Watzke narrated likewise a case of mammary cancer which he had had opportunity to observe and in part to treat. The patient was a lady, 40 years of age, who suffered from a nodulated degeneration of the mammary gland, that had been diagnosticated as cancer. She had severe pains in it and had been allopathically treated for three months, without any effect whatever. He and another colleague then undertook the treatment, and at the end of two years the entire gland had disappeared and its place was occupied by a skin, which to all appearance was entirely normal.—This lady was generally looked upon as cured, and she herself believed in her complete recovery. In two years, however, this newly formed skin broke out without any special cause and a carcinomatous ulcer formed, which, after a long time, cicatrized, broke out again and finally healed. Dr. Pandolfi, who was at that time in Vienna, believed he could completely cure her, in which however he did not succeed.

“After repeated cicatrizations and breakings out again, she finally died in the twelfth year of her disease. He desired, by the history of this case, to establish, that one should never, in a case of this disease, rejoice too soon and that the patient should never be regarded as radically cured, even when the morbid product has been removed, and a healthy skin had been developed in its stead.

“Dr. Tedesco has at present under treatment, a lady, who

six years ago received a blow upon the breast, always afterwards felt pains in it, subsequently observed a nodule in it, but from prudish considerations abstained from mentioning the fact to any person, until the tumor had attained a considerable size. A Professor diagnosticated the nodule to be a cancerous degeneration and wished to remove it by a surgical operation, to which, however, the patient did not consent. For three months no external change was perceptible, only the pains became less severe. Gradually atrophy of the mamma set in, but, at the same time, the patient began visibly to collapse and at the present time there is frequent vomiting.

“Dr. Watzke has now under treatment a lady with a mammary cancer. Under Conium the gland is constantly disappearing and the pains also have become less.

“Dr. Wurmb, hereupon, was led, by analogy, to speak of tuberculosis. We often see it appear, then come to a standstill; an aggravation occurs, which is followed by a temporary amelioration, until finally the patient becomes a victim. Even if we cannot cure it, we are often able by means of our remedies to arrest its rapid progress.

“Dr. Watzke is of the same opinion. At the least, he believes, that our remedies are much more beneficial to the patient than Opium which is so commonly given in such cases.

“Dr. Tedesco observed that the Allopaths now frequently give—both externally and internally—Silicea for cancerous ulcers. Whereupon Dr. Wurmb replied that Prof. Schub, when writing his book on ‘Pseudo-plasmen,’ explicitly confessed therein that his attention had been called to this remedy by a homœopathic cure with Silicea, of which he had himself been a joint observer.”

* * * * *

At the meeting of March 15th, 1864, “Dr. Wurmb added to the narrative of a case of mammary cancer related by him at the preceding meeting, the fact that the spot on the mamma has completely cicatrized, and that the axillary glands were likewise beginning to fall away.

“He believed he might the more confidently rely upon the sloughing away of these glands, from the fact that this had already happened to the much larger mammary gland. The patient still takes Arsenicum internally; externally, to remove the offensive odor, charcoal powder is sprinkled upon the ulcer.”

He then related the following case: “A man, 76 years old, got a small ulcer on the little toe of the left foot, to which he paid no attention, but continued to walk about. All at once he got a phlebitis which extended over the whole foot, and a swelling of the inguinal glands with strong fever and delirium. On the outside of the foot an ulcer gradually formed, which extended over the whole dorsum of the foot. Fever, delirium, phlebitis and the swelling of the inguinal glands have, up to the present, disappeared and the ulcer above-mentioned has diminished in size, one-third. At first, Dr. Wurmb gave Belladonna and subsequently Arsenicum. He regards the cure of this case, as the more of a success, inasmuch as such cases, in a patient so advanced in years, are generally fatal.”

D.

TELLURIUM.

BY C. HERING, M. D., PHILADELPHIA.

(Continued from page 80.)

1. C. H.—g took, October 26th, 1850, 7 45 p. m., an indefinitely large dose, as a preliminary experiment. After the trituration, the part which adhered to the mortar and pestle was washed off with some alcohol, and the blackish gray fluid mixed with some water, and then swallowed. Immediately a pressure upon a small place behind the vertex; soon violent pressing pain through the metacarpal bone of the right fourth finger, beginning scarcely a minute later and increasing; a confusion in the head behind at both sides and worse towards the backpart. Disagreeable sensation in

the stomach; something comes up as far as the pharynx, as though a wet eructation were about to occur, but nothing comes up; finally a difficult retching, then an accumulation of water in the mouth. After half an hour accumulation of water in the mouth, retching, then yawning; 8h. 3m., at the outside of the right knee) interiorly, a burning aching; 8h. 5m., a peculiar pain in the head, above the eyes, deep interiorly in a long line, like pressure from within outwards, worse on the right side; 8h. 15m., inclination to stool without straining and urging.

8.20. Pain in the right metatarsal bone, as if the bone were pressed. Headache continues.

8.30. Dullness in the head; headache has ceased; feels his fauces and pharynx; has at times a strange sensation, as if round waves pushed against the pharynx below. Feels strange and singular in his whole body, but cannot describe the sensation.

8.44. Violent linear pain in a small spot above the left eye, behind the brow; early in the evening sleepy; went to sleep while sitting. Then, at a late hour, ate soup with appetite, but had no desire to smoke. Went to bed early. Coitus normal. Afterwards headache. Toward morning, when waked up, the same headache internally in the left sinciput, in a small spot; it presses there like a hazel nut, continuing slightly through the morning.

Oct. 27. The second day, once again the same pain in the right metatarsus very distinctly. This morning, and several subsequent mornings, an external tensive headache over the whole left half of the head when lying on the right side, passing away when lying on the left side. Had, for weeks every morning, a stool, sometimes soft, sometimes harder, often with some blood. Since taking the Tellurium, also, every day a second stool like the first; so every following day for one week; later again, as had been the case some time before, every morning thin stool.

The same day, October 27th, very peculiarly stinking flatus, like a compound of hydrogen, such as he never smelled

before. After one week the same once again, not occasioned by the mode of living.

The fifth and sixth days, at the anterior margin of the left axillary cavity, a sensation as if it were thicker, as if there were a round tumor internally, and painful on pressure and by motion; it went away without becoming a boil.

He forgets and neglects much; also the writing down and even the observing of the symptoms; it is all too much trouble to him. When thinking of the one, or of any business, he forgets everything else, and on account of this, he neglects much that is necessary. A cough, which often came on by day or night in slight attacks, with a wheezing in the larynx without becoming loose, especially after smoking, drinking and much walking, or after going upstairs, came on again, and always toward morning, and with much violence; after a few days it became loose, and then ceased. After taking cold it came again, and then ceased permanently, so that even taking fresh colds did not bring it on again.

For one week a much more excited and powerful sexual instinct, but after that time this appeared to be entirely extinct; without any want of capability thereto, he renounces its indulgence for weeks without missing it. For six weeks continued sweat of the feet, especially anteriorly at the toes, somewhat ill-smelling. During the first week, and now and then during the following, a peculiar twitching and distortion of the left facial muscles, often when speaking; the left angle of the mouth is drawn to the left, and upwards.

The "first right, then left" was exhibited in several pains, which, however, were so fugitive and indistinct, for example, in the right side and shoulder, that he recorded nothing of them.

2. Dr. Charles G. Raue took, on the 18th of January, 1851, at 10.30, p. m., a few grains of the same original trituration, third centesimal. A little rough, scratchy sensation in the throat, not passing off by swallowing; sensation of coolness in the mouth and pharynx, as after having peppermint lozenges in the mouth, very distinct on drawing in the air.