

ment as taught by the master, he may correct the definition and we might continue the argument.

When Mr. Pope says in the next paragraph "I find no fault 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," I am inclined to think that Mr. P.'s imagination is too fickle. The case in question has been discussed in the reviews, both in England and the United States, and the evidence is so overwhelming against Mr. Pope and the men who think as he does, that as a last resort the truthfulness of the case is denied. There is scarcely a case on record on any of our medical journals that is so full of corroborating evidence as that of Mr. D. Wilson, and so full of *instruction*. The experiment convinced Dr. Bayes that he had assumed a wrong position and he acknowledged it. The experiment must decide.

Mr. Pope objects "to the arrogance and presumption which demands for those, *for those only*, who credit such extraordinary—I had almost written supernatural—assertion, the exclusive right to a title for which they can show no special or peculiar claim." Mr. Pope, who has proved himself a stranger to Homœopathy, its *Materia Medica*, its fundamental doctrines and the literature of the day, is certainly very polite in expecting the followers of Hahnemann who, he ought to remember, are on the defensive only, to retire leaving the field to himself and his friends. But what he still more objects 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

* "So much remains to be done in sifting the *Materia Medica*." By what persons and when has the *Materia Medica* been sifted already, and what remains to be sifted? We cannot strike out one solitary symptom. The question of sifting the *Materia Medica* has been fully discussed and Dr. Roth's propositions have been well sifted in the *Vierteljahrsschrift*—vide the *Chesmore*.

disease, with the whole superstructure of the science of therapeutics waiting its erection on the foundation laid by Hahnemann," or in fewer words he demands,

1. A correct translation (into the English language) of the *Materia Medica*,
2. The adoption and classification of well proved medicines in their relations to pathological forms of disease.

The first demand has been made, and the necessity for it has been proved by the very men whom he and his friends oppose and prosecute—his friends are more anxious to have a *Repertory* from the imperfect material before them.

The second demand is an absurdity. Even the progressive physiological school teaches the duty of the physician is to treat *the sick* and not to treat *diseases*. Homœopathy has enlightened these progressive opponents on that point, and positively teaches that we must select for each individual case the truly curative remedy according to *the law of cure*.

The English reading homœopathic practitioners should thankfully receive the reviews of the shamefully false and erroneous translations of our works, by men who are competent to make them. If Mr. Pope were a reading and enquiring disciple of Hahnemann, he would know that, for the last decennium, the short comings, the wilful perversions, errors, and omissions of Hempel as a translator have been published and proved. Does Mr. Pope know where to find in the British homœopathic literature the confessions that the old disciples of the master cured more diseases than the present homœopathic physicians, such as call themselves so, do.

That the present discussion has been productive of more evil to the progress of Homœopathy, as understood by Mr. Pope, is an unlooked for acknowledgment, but we are glad of it. The class of physicians who think, write and practise like Mr. Pope and are termed his friends, Hempel included, are well aware that the attacks made by them, in private, on the Hahnemannians remained deservedly and with propriety unnoticed by the true Homœopathians, who solely relied upon the results of their practice. Taking this silence as an

evidence of weakness, they resorted in their blind opposition even to the journals and text books (*vide* Hempel's *Materia Medica*). If argumentative answers were offered, they were treated as the great truths of the great master are treated by the Allopathists, with ridicule. *Vide* the London *Monthly Review*, Vol. 8, No. 5, p. 296.

The present discussion has been productive of the extension and proper comprehension of true Homœopathy. Should this discussion be carried on in the same spirit in which Drs. Dudgeon, Pope, Hempel and others have carried it on, their victory, if victory it be to be allowed to have the last word, must end in a through defeat. I did *not complain* that Hempel, while under solemn oath, testified that he gave one-fifth of a grain of Arsenic in cholera—but *I quoted his testimony* and repeat it as before: "In homœopathic treatment, I have given as much as one-fifth of a grain of *Arsenic* in the Asiatic cholera, *and* have repeated *that* dose from twelve to fifteen times in forty-eight hours. The patients have done well and recovered." The judge and the jury paid no attention to this testimony which was a contradiction to all scientific experiments, to all the accumulated testimony collected in medical jurisprudence, to all the works of Toxicology, but above all to the testimony deposited by Hahnemann in his *Chronic Diseases*, and particularly in his introduction to Arsenic.

I have attended cholera patients, never lost one. I have seen cases of poisoning by Arsenic, and have diligently studied its effects, but must lament the gross ignorance of Mr. Pope who, for a moment, can see a similarity in the symptoms characteristic respectively of cholera and Arsenic.

The Cholera patient is resigned and takes no interest in any thing.

The Arsenic patient is restless, tosses about, has fear of death.

The Cholera patient has much thirst, for large quantities of water.

The Arsenic patient drinks little and often.

The Cholera patient is averse to being covered.

The Arsenic patient is relieved by heat.

The Cholera patient has a clean cold tongue.

The Arsenic patient has a hot tongue, at first red on the edges and on the tip, later white all over and finally black.

The Cholera patient wishes to lie, can scarcely be persuaded to sit up and to take a deep inspiration, which relieves him.

The Arsenic patient does not lie quiet and taking a deep inspiration does not relieve him.

The Cholera patient vomits large quantities and has then rest for some time.

The Arsenic patient continues his fruitless efforts to vomit.

The Cholera patient has spasmodic pain in the abdomen.

The Arsenic patient has burning pain in the intestines and anus.

The Cholera patient has his abdomen relaxed, fallen in.

The Arsenic patient feels a continued tension in the abdomen.

The countenance is different, etc.

The symptoms of fatal Arsenic poisoning are of little, if any, therapeutic value, we meet them in the last stage of fatal disease, and Arsenic then never produces any effect.

My time is too valuable to enlarge further on the subject; if I have proved to Mr. Pope the necessity of reading first the standard works on Homœopathy, of learning and applying the practical rules of the master before he again asks the question "Who is a Homœopathician?" I shall consider myself well rewarded for having defended the cause of Homœopathy. I might almost hope that my efforts might be successful did I not find Mr. Pope, who writes for the party that has adopted the offensive, so utterly devoid of the knowledge of the history and literature of Homœopathy. And here while I take leave of Mr. Pope I must at once express my utter abhorrence of the manner in which he slanders our immortal master on the first page of his paper. For it is a slander to say that Hahnemann adopted the extremely infini-

tesimal doses partly in consideration of the dispensing monopoly of the German apothecaries. Hahnemann knew no fear, he threw down his glove before the mighty and influential opposition, he never yielded one iota to interest and prejudice, and the great and good master lived long enough to see his disciples promulgate his newly discovered art in all countries of the globe. Homœopathy, progressive, will finally overcome, and is now overcoming, all and every effort to destroy it by assimilating it with false and erroneous teachings of the opposition, by the allopathic school and the psuedo-Homœopaths.

COFFEA IN ODONTALGIA.

BY E. M. HALE, M. D., CHICAGO, ILL.

I have lately had occasion to verify a curious clinical fact in relation to Coffea, and deem it of sufficient importance to give it to the profession.

When I was a student of medicine in the office of Dr. Blair, of Ohio, a man came to consult him for a severe pain in a decayed tooth. He stated that he had ridden about twelve miles since the pain commenced, and the only relief he got was from holding cold water in the mouth. The instant the water became warm, the pain was renewed! He had carried a jug of water with him during his drive, replenishing it at farm houses along the route.

Dr. Blair prescribed a single dose of Coffea³ (centesimal dilution) a single drop. In twenty or thirty minutes the pain abated, and in less than an hour had ceased altogether, and the patient left the office blessing Homœopathy.

The incident left a lasting impression on my mind, and I treasured it up for future use. Six years afterwards I was called to see a lady suffering from prosopalgia, which extended to the molar teeth of the right side (it might have

originated in the teeth). She was very irritable, sensitive and moaning from the distressing pain. She held in her hand a bowl of crushed ice and was engaged in eating small pieces, stating that she felt relief from the pain only when the ice was in contact with the painful teeth.

I remembered the case above alluded to, and gave her a spoonful of a solution of a few pellets of Coffea³ in half a glass of ice water. In about half an hour the pain had nearly left her, and in an hour she fell asleep.

The second case which came under my treatment was that of a old lady in feeble health, whom I was treating for climacteric difficulties. She sent for me one evening, stating upon my arrival that she was suffering intensely from pains in the right molar (upper and under) teeth, the pain extending to the head and ears. She obtained momentary relief by holding in her mouth the coldest water she could procure. The pain had lasted all day. Here, I thought, was a good opportunity for testing the high potencies. I dissolved a few pellets of Coffea²⁰⁰ (Lehrmann's) in half a glass of water, and ordered a spoonful every half hour until the pain ceased. The next morning the patient stated to me that after the first dose the pain was slightly ameliorated; after the second, considerably relieved; and after the third, ceased altogether.

It will be admitted that the above are notable cases, in which the symptom "relieved by cold water" was the characteristic indication. But the strangest part of the matter is that this symptom is *not* found in any pathogenesis of Coffea. Even the symptom "pains relieved by cold applications" is not to be found. Coffea has proved curative in "*toothache with restlessness, anguish and whining mood especially at night and after a meal,*" and "*jerking in the teeth, also with tearing.*" Is it possible that Coffea cured the above cases by reason of other indications? Was the peculiar symptom alluded to of no importance?

TELLURIUM.

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

(Continued from page 130.)

Dr. Raue's Proving, continued.—February 4th. He wakened early with a pale red, dropsical, biting, itching, swelling in the left upper eyelid; rather towards the inner angle. This swelling secretes some fluid; after a few days a scab forms.

5th. A scratchy feeling in the throat, worse towards evening.

6th. Coryza with thick mucus; hoarseness, early in the morning, after rising. The eye is worse; the globe also is reddened; the chest is oppressed.

3. Oscar Tietze, son of the well known homœopathic physician, took the above described third trituration and reported as follows:

First day. Drawing and dull pressure at the right scapula; soon afterwards also upon the left. Dull headache and dullness of the head. A sensation between roughness and pressure in the region of the larynx, which generally provokes a cough, passes gradually into a pure tickling. Slight stitches in the chest, transient, more on the left side. The dullness of the head becomes more perceptible. Internal chilliness with single shudderings. Pressure at the tonsils. Drawing, cutting pain around and in the left nipple, extending towards the scapula. Single pressure like stitches anteriorly at the forehead. Stitching pains lasting from three to ten minutes above the fifth rib, on the left side. The headache becomes more and more pronounced and consists of that unpleasant pressure above the eyes which is commonly felt after having been awake for several nights. Unpleasant drawing in the right hand, later involving the whole forearm. Sometimes tearing pains towards the elbow and in the palm of the hand towards the thumb-joint. Sensation as if the skin of the hands, especially of the right hand, were con-

tracted, from the tips of the fingers downwards, so that it seems as if, on extending the fingers, one must stretch the skin forcibly. At the same time there was experienced in the ends of the fingers a kind of sensation as if dead.

Second day. The pains in the head have, for the most part, disappeared; but a coryza seems to set in. Afternoon, the coryza has set in—it is dry—after a few days it ran a natural course; it is only to be remarked that it appeared worse at irregular times.

After about five days, there appear on the left hand small red points, shining through the skin, which sometimes itch. The feet also itch, especially the left one, as though there were some heat-vesicles there. After the lapse of several days, there appeared, first on the calves and then extending up to the thighs, similar small red isolated points, which itch like those on the hand. The itching is especially in those spots where the skin perspires most. The abdomen seems not to be affected; but, after a few days, a number of similar pimples, itching like the others, appear in the epigastrium. On rubbing the parts that itch, these points become more visible. The itching is not unlike that caused by bed-bugs. From the epigastrium the eruption extends towards the left nipple; and lingers here as well as at the epigastrium longer than on the before mentioned localities; and it finally turns towards the left axilla. At the same time, also, it itches in various parts of the back. Meanwhile a spot is remarked on the right side of the forehead which is sore when pressed upon, as if a blow had once been received there, which he does not remember to have been the case, neither is there any red or blue spot to be seen. The itching now begins at the head, only at the posterior and superior parts, not towards the anterior part. When working quietly (sitting with the head bent forwards) without any provocation whatever, a sudden rush of blood towards the head, with perceptible reddening of the face, recovering irregularly, but almost daily twice, now in the morning, now in the afternoon. The itching at the head lasts about fourteen days and the rush of

blood to the head recur for about the same period. At the same time, a peculiar kind of vertigo sets in, every evening while getting asleep, about a half hour after going to bed—a sensation as if he were wafted and drawn forth very quickly in the direction of his legs.

He is always wakened by it. It never returned later in the night. On the contrary, one day when he had gone to bed earlier than usual, about half-past eight o'clock, the sensation appeared in like manner, about a half-hour after he had lain down and when he was first getting asleep. This vertigo kept coming for eight or nine days, was interrupted at one time by two days of quiet sleep, returned and then ceased altogether. During the whole time, a good appetite and a disposition to drink a glass of beer oftener than common which always tasted good. Both later ceased.

4. Through C. Hering. A well educated woman took Tellurium³, January 18th, at ten, p.m., on going to bed. After about one hour she felt a dull pain, deep internally in the whole length of the right thigh; later for a short time in the head, above and behind the left ear; then a pain in the pelvis at the left side, while the pain in the thigh continued. A sharp pain passed quickly over the toes of the right foot, then into the heel. She got asleep, lying on the left side, and awakened once in the night with a dull pain in the region of the heart, which passed away when she lay upon the back. No change of position had any influence upon the pain in the thigh.

19th. Very frequent urging to pass water, and a very unpleasant sensation if she can not yield to the urging. Sudden cold weather had formerly a similar effect upon her, but to a far less degree. She walked to-day eight or nine miles and felt the effects so sensibly that she stopped taking the Tellurium until the fatigue should have passed over.

20th. The menses appeared in the afternoon, one day too early. She felt the effects of her walk, more particularly in the shape of a sticking pain through both temples, a pain from hip to hip and in both acetabula, for a whole day. On

the left side, in the region of the uterus, across, in the groin and towards the hip violent stitches or cuttings.

21st. Frequent stitching pains from the middle of the pelvis across towards the left side, in attacks, during this day and a part of the next.

25th. She took again the third trituration in the evening. The first noticeable symptom was a pain in the back at the upper end of the sacrum which extended upwards.

26th. Took a dose again in the morning. Whenever she has no pain, there is yet a sensation of weakness in the back, the whole day long. Ten, p.m., another dose. After lying down a throbbing on the right side, superiorly in the pelvis.

27th. About ten, a.m., a pain above the left eye; it came suddenly and went as quickly; it seemed to have been caused by a sudden rush of blood thither. As it was passing off, the pain was accompanied by a sensation not easy to describe, along the left side of the neck, as if the blood there had suddenly been retained in one of the large veins, or had streamed backwards. Next followed a feeling in the stomach like weakness or faintness and a pain in the left chest.—Throughout the whole day, constant pain in the chest, anteriorly in the middle, sometimes extending backwards between the shoulders and a dull unpleasant feeling in the head especially above the eyes. The weakness and the pain in the back continued.

28th. The pains change their locality more frequently this morning than yesterday; mostly on the left side of the chest, only now and then in the right chest and over the right eye; once or twice in the right shin. An hour and a half after dinner, heat of the face; the sinciput is hot; the gums bleed so that the mouth is full of blood.

She had already had these symptoms previously before the proving, but not lately and not in such strength. She had been reading the evening before until a late hour, which she was not in the habit of doing. The pains in the back and in the chest are quite unusual. They were so continuous and so violent that the prover was compelled by reason of them to remain at home in the afternoon.

29th, nine, a.m. Pain above the right eye after going out; the pain goes toward the temple; then in the flanks below the ribs, then in the right side of the pelvis, the right shin, then over the left eye, left ear, then into the right eye; at the same time she is chilly.

30th. Return of most of the earlier symptoms but with less severity. The parts which had been attacked with pains now pain as if beaten or sore.

31st. Some heaviness above the brows. Ten, a.m., an attack of sneezing lasting several minutes. Had this frequently after rush of blood to the head.

February 3d. Some pain above the left eye after lying down.

4th. Constant pain in the region of the heart. Now and then pain over the left eye. She ceased to record the symptoms, but was never free from them for two days in succession.

The next menstrual period came three days too early; the first day the usual quantity, later less than usual.

Latest, the pain over the eye and in the heart ceased, if, indeed, they do not again return. From the 21st to the 25th February no pain in the heart. This pain appears to be in the apex of the heart. She had something similar five or six years ago, but was then much more seriously affected. Some symptoms may have been produced by her occupation as public teacher, others may depend upon her age, forty years. She has a long walk to her school and labors there six hours a day. In the forenoon, in school, she had always a fullness and oppression in the epigastrium and was obliged to open and loosen her clothes. Ate much less, was obliged to lie down after eating, which however gave no relief; the oppression became indeed rather worse. The left thigh upon which she lay became numb and her feet cold. At last she took *Nux vomica*, lay down again and then slept better.

The symptoms, especially the attacks which compelled her to lie down, were more violent the first Tuesday after taking the medicine, came again the two following Tuesdays, but

with less violence. The fourth Tuesday she was quite free, but they came again on Thursday and somewhat changed.

She reports on the 2d March that, several days previously, she had put on a somewhat tight petticoat, this was very uncomfortable and caused a return of the pain in the left groin which she had had several weeks before.

She should have mentioned that the disposition to become easily faint in the region of the stomach had often recurred. During the latter part of the proving, whilst having the pains in the heart, she had a great disposition to bend over forwards even so as to lie upon the face without being able to go to sleep in this position or without experiencing any relief from it.

5. Dr. Kitchen, of Philadelphia, took the third trituration. Pain in the left flank within the crest of the ilium. Pain in the sacrum, worse on stooping or when rising from a sitting or a recumbent position. The pain passes down in the right thigh in the direction of the sciatic nerve. It is, therefore, almost impossible for him to press when at stool.

Restlessness, fullness in the region of the upper part of the abdomen and of the liver. The pain in the sacrum and in the sacral ligaments was sometimes, when moving, like a stab with a knife. He had erections all night long, a thing which had never before happened to him.

6. Dr. Gardner, sen., took the third trituration, evening and morning. He dreamed at night of smoking cigars, a thing he never does. In the forenoon, when sitting, a burning in the right of the hepatic region and, later, a heavy painful pressure. The next morning, while dressing, a very violent attack of vertigo, which became much worse after walking out; he could hardly stand, was compelled to lie down and to remain at home several days. The vertigo caused nausea; after eating rice he was obliged to vomit. At every motion while he was lying down, even when he turned his head, still more on sitting up, the vertigo returned. At the same time, the pulse was more frequent. He had previously had similar attacks, also one severe after *Glonoine*. On other occasions

Aconite had always helped him. This time it did not. Nor did Glonoine, nor Belladonna. It gradually passed away after three or four days.

7. Dr. Whitey took the second trituration, several grains, night and morning. In the fauces above the larynx, an itching and a kind of burning, as if he had scalded himself with a hot drink, lasting several days. After two or three days an eruption makes its appearance, such as he had never had. Small red pimples, very bright red and very sharply defined with minute vesicles upon them, first on the lower extremities, then also upon the upper, most on the left side; they began first on the outside of the calves, and then on the inside of the forearms, above the wrist, and spread from that point, caused very severe itching day and night, but worst at night after going to bed.

8. Dr. Gosewisch took the twelfth May 27th, 1851, at four, p.m. After supper very full in the abdomen, but not bloated. When lying on the left side, a throbbing sensation on the right side under the ribs, somewhat towards the epigastrium, as from wind balls, undulatory. In the morning, it is as if, when lying on the right side, wind had accumulated in the corresponding spot on the left side. Flatus does not pass off so freely in the morning as is customary and the hitherto rather diarrhœic stool intermits. Latterly the flatus became stinking. When lying on the left ear, a kind of sharp pressing pain from the neck into the left ear. After a few days, an eruption; small red papules, which itch very much, on the abdomen, on the inside of the thighs and on the perineum. The itching is worse in cold weather.—Almost every remedy that he had ever before proved, gave him headache; this, however, did not. During and after the proving, his disposition much more quiet; for generally he is much disposed to fly into a passion.

Through Dr. Gosewisch, in June, 1851, took at five, p.m., a drop of the sixth potency of the latter preparation from the precipitate as before described. Slight dull toothache on the left side in teeth that had been filled with lead. Sensa-

tion of numbness in the abdominal walls, as if it were in the flesh, began below the umbilicus on each side of the same and extended around and upwards to the ribs, while he lay on the sofa after supper. Slight feeling of suffocation in the upper part of the throat. Palpitation of the heart and general throbbing through the whole body, with fullness of the pulse; after it had lasted an hour, copious sweat for an hour and a half. A metallic, earthy taste in the mouth. Feels empty and weak in the stomach, yet without appetite. Dull pain in the middle of the back between the shoulders. Sensation of numbness in the occiput and nape. Heartburn, a sensation of warmth, as after spirituous drinks, in the epigastrium and on both sides of the same. General sensation of warmth in the abdomen, as if after spirituous drinks. Expectorates white mucus, which is easily discharged. For a few minutes, itching at the anus. The next morning, the customary stool was lacking. Urine transparent, dark, easily evacuated, without pain. The sleepy, heavy condition, in which he was for several days before he began the proving, has vanished; instead thereof, a feeling of restlessness on going to bed. Some pain in the middle of the sternum. Some dull pain low down above the pubic region and anteriorly on both sides of the abdomen. Pain in the clavicle. After supper, he took a walk; on returning to the house, his knees, hips, elbows, and shoulder-joints were as if sprained and beaten. On every moment the brain felt as if bruised. Eructations, tasting of the food. Some pressure in the left chest above the first rib. In the morning, after deep sleep, with bad dreams, he felt heavy and dull. Skin hot and dry, sensation as if over-strained, as if bruised, as if he had taken cold after severe exertion. At the close of urinating, burning in the orifice of the urethra. The mouth feels pure and moist; he has again the natural taste.

10. Through Dr. Gosewisch, F., an educated woman, took the sixth, in drop doses and made the following report:

Lassitude and weakness, then pains in the elbows, ankles and various parts, sharp and quick. Singular contracting sen-

sation in the epigastrium as if the parts were folded together. When this sensation passed away, there remained a pain and soreness in the left side. Her disposition is particularly quiet being otherwise very lively, anxious and full of care. After she has, for some time, remarked nothing further, a pain and sensation of soreness began in the regions of the kidneys. This extended downwards and over towards the abdomen with a pressing down as if by a weight, which increased during the whole night. Nightmare during the night. In the morning, the kidney pains were still worse, especially the sensation of soreness. She was also attacked in the right side of the abdomen, but, worst of all, low in the back, which continued several days, with gnawing, *rubbing* pains in the abdomen. The next day the head was heavy, full and sleepy. Constipation with much wind. Blind hæmorrhoids. Pimples in the face.

(To be continued.)

ALOES.

(Translated from *Hering's Amerikanische Arzneipruefungen.*

BY T. F. ALLEN, M. D., NEW YORK.

(Continued from page, 133.)

Intestinal Evacuation, continued:

660. Only effective as a purgative, if the bile is excreted in the right way, etc. If there is no bile, it irritates the intestines little or not at all. *W.*
- Patients in whom it did not operate were jaundiced, in whom the secretion and excretion of bile had nearly entirely ceased. *W.*
 - The more a person is inclined to copious secretion of bile, the more Aloes affects the evacuations. *W.*
 - The purgative action shows itself the stronger in patients in whom the liver is more active in secreting bile, or the more irritable it is. *W.*
 - It must increase the secretion of bile, in order to be able to purge. Why? Because bile is nature's purgative. But the purgative power of bile is increased by Aloes. *W.* believes this, forsooth, because the stool and flatus smell so characteristically of Aloes. But this position finds no support in bilious diarrhoea, which Aloes does not produce, so long as it purges away no bile. *W.*

665. If it were then found out, as the old *W. Wedel* extolled it, that it is a cholagogue, to me belongs the (very agreeable) discovery that it must act as a cholagogue, in order to purge. *W.*
- Four drachms, with some alcohol, mixed with an ounce of water, injected into the vein of a horse, showed no action other than the evacuation of a great quantity of urine. The fæces were coated with a pellicle of altered intestinal mucus. This was examined after the death of the animal, which took place three days after the injection and showed no trace of bile in its composition. *Memord. Vet. Pharm., p. 26.*
 - The evacuations are not watery, and seem to come alone from the large intestines. *W.*
 - The evacuation is feculant, bilious, and has a very peculiar characteristic odor. *W.*
 - Not seldom, after previous prickling in the intestines, one or even more easy, copious stools follow, for the most part accompanied by flatus, and consisting of soft, yellowish brown fæces, with a very strong and characteristic odor; after eight to ten hours from one to three grains. The action is not increased by eight to ten grains. *Giacomini.*
670. Feculant, yellowish, not watery, not copious, peculiarly offensive-smelling evacuations. *N. T.*
- *Bilious stool, which is not watery and has a completely characteristic odor. R.*
 - * Lack of that color of the stool which it received from the bile. *W.*
 - * The excrement was gray or white, now and then transiently more or less yellow, greenish or brown, in which case also the usually-odorless flatus had a feculant smell. *W.*

Soft Pappy Evacuations:

- Inclinations to soft stool. *N. a.*
675. After three hours a second soft stool; after eight hours a third. One half a grain taken in the forenoon. *I. C. Hg.*
- Two pappy passages; the second and third days. *t, Henke, a.*
 - The stool after twelve hours was thin and pappy, repeated in three hours, the first day; three pappy stools the third day. *t, Henke, b.*
 - Stool at an unusual time, ten hours later, and pappy, the first day. *Henke, c.*
 - Stool twice, entirely unusual, more pappy, the second day. *Henke, c.*
680. Urgency to stool at nine o'clock in the morning, after half an hour a small thin stool, then griping in the bowels for a few hours as after taking cold, and subsequent