

no other means could be found. Referring to the symptoms, Nos. 2, 5, 6, 7, 8, 9, 12 and 13, were entirely removed, and material relief was afforded to Nos. 1, 3 and 4. The menstrual function was restored to its normal condition.

Without doubt my want of more complete success in this case arose from neglect of Hahnemann's third precaution. Had I prescribed *Sach. lact.* on or before August 6th, I do think I should have had cause to complain of the report of September 17th.

MECHANICAL MEANS IN MISPLACEMENTS OF THE UTERUS.

BY MERCY B. JACKSON, M. D., BOSTON, MASS.

Homœopathy has limited the domain of surgery almost wholly to mechanical injuries and, in its onward progress, will still more confine it to those cases. It will be readily granted that mechanical means should not be used in the treatment of uterine diseases if medicine alone is sufficient for its speedy and permanent cure.

From our earliest knowledge of mechanical appliances in the cure of prolapsus and other misplacements of the uterus, we were shocked at the idea of introducing a foreign substance to be worn by those suffering from such diseases who are rendered extremely nervous and sensitive by the disease itself, and consequently less able to endure the added irritation of a foreign substance in parts so sensitive and so poorly defended by the delicate membrane that covers them, from the irritation necessarily produced by its presence.

While suffering from prolapsus some fifteen years ago, the distress being very severe, on account of having walked some distance after it occurred, I put five pellets *Sepia*³⁰ into half a tumblerful of soft water, and took one teaspoonful. Lying on the back, with knees elevated, and the soles of the feet resting on the bed, in less than ten minutes felt the uterus

returning to its place, precisely as if a hand had been placed under it and gradually raised it to its normal place, except that the hand was not felt.

So remarkable was the sensation, that I at once believed that mechanical means were unnecessary to restore the uterus to its place. The repetition of *Sepia* as above, every two hours, enabled me to rise the next day without pain, and, remaining most of the time in a sitting or recumbent posture during twenty-four hours, I was able to resume my usual avocations. Afterwards, when suffering from partial prolapsus, the administration of *Sepia* in the same way and potency, removed all suffering, and in a few months entirely restored my health which had suffered for nearly two years from this cause, and no return of the kind has since afflicted me.

Being satisfied from the sensations experienced, that the *modus operandi* of the *Sepia* was by causing contractions in the abdominal muscles and the ligaments that support the uterus, to bring not only the uterus but surrounding parts into their normal position and sustain them there, the effect must be more permanent than any mechanical support, and the probability much greater, of a permanent cure.

This result following in my own case, confirmed my faith in the power of *Sepia* to absolutely cure prolapsus, where the symptoms correspond to its pathogenesis.

In reflecting upon the wonderful effect of *Sepia* on this affection, I reasoned, that if *Sepia* could reduce prolapsus, it might also remove other misplacements, such as anteversion and even retroversion. I therefore resolved to try its effect in the first case that came under my care, and for the next ten years used it successfully in many cases of prolapsus and slight misplacements of the uterus, and do not remember to have failed in curing any case, although some other remedies were used in some of these cases.

In 1858, I was called to see an unmarried woman of thirty years, who had been ill for three years, and had never got much relief from any medical advice she had received. Found her general health much impaired, her nerves weak-

ened, with constant pain in the back and pelvic region, with extremely painful menstruation, her spirits depressed, and herself convinced that no one had understood her case, and fearing that there could be no cure for her. In my examination of the case, I learned from her, that three years previous, while assisting her father to lift some heavy article, she had felt something give way, and had become sick immediately, had kept her bed for some time after but got little help from any medicine, and had slowly recovered so as to partially resume her labors, but had never been well since, nor ceased to suffer in the back and lower part of the abdomen.

On making the necessary examination, found the uterus retroverted, the os uteri pressed high up against the os pubis, the fundus low down in the hollow of the sacrum. The slightest attempt to replace the organ, gave such severe pain as to make me desist immediately, and after two futile attempts, I decided to try Sepia³⁰, and see her again in a few days. Then found her feeling better, but she said that each repetition of the medicine gave pain from the inguinal region to the pubis, "a kind of drawing pain." I ordered a continuance of the Sepia, and saw her again about a week after my first examination. To my great joy, found the cervix uteri had descended an inch or more and the fundus correspondingly ascended. I can hardly express the delight felt at this discovery, believing from that moment that the idea so long cherished would be fully realized, and that my patient would be really cured, when the uterus had regained its normal position, and I did not doubt that the means, that had so well begun the work, would complete it.

I need only add that the first menstruation after the treatment commenced, was accomplished with comparatively little suffering, and that as the cure progressed, the suffering ceased. The cure went steadily on, and at the third examination, the position was normal, and although the patient was obliged to rise several times each night to wait on an aged grandmother, and did not relax from her usual duties about the house, she had no relapse. Some two years after, I rode

five miles to ascertain if she still remained well, and found that she had steadily gained in health and had no return of the disease.

It is proper to state that during the treatment of the case I gave three doses of Calc. carb.³⁰ about one week apart, but as I did not record the reasons for giving the Calc. carb. I have now forgotten them. What influence the Calc. carb. had in the cure of this case cannot now be known, but my own impression was, at the time, that it was quite secondary to Sepia. But whether the Calcarea or the Sepia cured it the argument is equally strong for the use of medicines alone in the treatment of misplacements of the uterus.

ALOES.

(Translated from *Hering's Amerikanische Arzneipruefungen.*

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

(Continued from page 227.)

Pelvic Region:

- . It furthers the circulation of blood towards the pelvic region, it excites the vessels of the rectum and sexual organs. *Richter.*
- 860. Many times a day, urgency as with diarrhoea, only hot flatus passes with great relief; but it soon returns, with a sensation as of a plug wedged in between the symphysis pubis and the os coccyæ; the second day. *Preu, c.*
- . Frequent urgency to stool, with a sensation of heaviness in the pelvis; the first day. *t, Henke, b.*
- . Determination of blood to the large intestines and uterus. *Arnemann.*
- . Affection of the lower end of the intestinal canal and of the pelvic organs; in very many cases, after its continued use for a longer or shorter time. *K.*
- . Drawing sticking, or tensive tearing from the anus into the loins and into the abdomen. *F. R. L.*

- . Pain in the loins involving the pelvis. 1133, 1136.
- 865. *Dragging down in the abdomen.* *Neidhard.*
- . *Dragging down in the lower part of the abdomen. *Williamson.*
- . Sensation of fullness in the pelvis, with the monthlies. 1064.

Rectum :

- . Heat, soreness, sense of heaviness in the rectum. *K.*
- . Rectal fistula and rectal stricture. *Greenhow.*
- 870. In most cases, troublesome heaviness in the lower part of the abdomen, and active irritation at the end of the intestine, sometimes copious evacuations of blood, as if there were really hæmorrhoids, when they had not previously existed. *Trousseau and Pidoux.*
- . *Sense of fullness of the hæmorrhoidal veins. *Williamson.*
- . Pains in the loins producing an annoying sensation in the rectum. 1136.
- . Dragging in the rectum near the anus. 779.
- . Dragging in the rectum during menstruation. 1064.
- 875. In the rectum, sensation as if loose. *C. Hg.*
- . Cutting pains in the rectum, with the passage of a solid stool, ten o'clock the evening of the twentieth day. *III.*
- . *Heat in the rectum and anus when the fœces pass. *Williamson.*
- . Severe burning in the rectum. *N. T.*
- . During slight distension of the abdomen and pleasant crawling of the bowels, three diarrhœic stools; the last with burning in the rectum, hæmorrhoidal pains, and much flatus; after seventeen hours. *Helbig c.*
- 880. * Burning in the rectum. *Williamson.*

Anus :

- . Crawling sensation in the anus, after seventeen hours; 879; again after twenty-six hours, at evening. *Helbig.*
- . Itching crawling in the anus, after a mucous passage. 944. *Helbig.*
- . Early in the morning, in the folds of the skin near the anus, a severe irresistible itching in little points. *C. Hg.*

- . Itching and burning in the anus, painful in the highest degree, prevents his sleeping for a long time. *Prev. b.*
- 885. *Burning in the anus;* a kind of sore feeling, with increased itching around the anus, and an increased evacuation the third day; in two brothers, from 50 to 60 years old, after repeated doses. *J. 200. C. Hg.*
- . Burning in the anus. *F. R. L.*
- . The evacuations which aloes produces are only of a bilious character; the diarrhœa which it causes, is (with the exception of the debility) similar to a bilious diarrhœa, combined with burning in the anus. *W.*
- . Burning pain in the anus after a hard evacuation. *St.*
- . Burning in the anus continuing a long time, after the passage of hot flatus, the first and third day. *t, Henke, b.*
- 890. Tenesmus and burning heat in the anus. *F. R. L.*
- . Fullness and pressing out in the anus. 3. *C. Hg.*
- . Strong pulsating in the anus, while sitting, after dinner. *Gosewisch.*
- . Stitches from the anus up into the loins. 864.
- . On walking, after the morning stool, many drawing stitches in the anus; more on the left side and forward to the region of the prostate gland and vesiculæ seminales; the eleventh day. *I.*
- 895. The not too hard fœces prick, quite severely, in the anus, as if it would tear it forwards. Afterward a continued pain in the *anus*, which compelled him to draw it together frequently, whereby it becomes tense and aches, the third day. *Helbig.*
- . The tenesmus is peculiar, an unpleasant sensation in the anus as if more stool would follow, which must be held back on account of the soreness, yet, on account of this pain, he does not dare to draw the anus together as usual. *II.*
- . Pain in the anus, relieved by beer. 553.
- . Ulcers on the edge of the anus. 1034.

(To be continued.)

MISCELLANEOUS.

ONONDAGA COUNTY HOMŒOPATHIC MEDICAL SOCIETY.—The semi-annual meeting of this society was held at Syracuse, Oct. 25th. The president, Dr. W. A. Hawley, presided. The following physicians were present. Drs. J. G. Bigelow, Chaffee, L. Clary, H. B. Fellows, W. H. Hoyt, H. C. Hubbard, T. S. Kinne, H. F. Miller, A. R. Morgan, G. B. Palmer, J. C. Raymond, R. D. Rhoades, J. W. Sheldon, T. D. Stowe, L. B. Wells.

Dr. W. Warren furnished an accidental proving of *Phytolacca decandra*.
Dr. J. C. Raymond reported a case of congestion of the brain with paralysis, resulting in death.

A communication was received from Dr. Caulkins giving his medical experience before adopting Homœopathy.

Dr. C. W. Boyce contributed an article on some of the uses of *Spigelia*, which called out remarks from several members, who related their clinical experience with that remedy.

Dr. T. D. Stowe gave the details of a case of chronic ophthalmia with severe neuralgic pain and partial opacity of the cornea, which after resisting for several weeks the treatment by the ordinary remedies, yielded promptly, in one or days, to *Spigelia*.

It having been stated that several of the Life Insurance Companies decline appointing, as medical examiners, physicians practising Homœopathy, a committee, Dr. W. A. Hawley, was appointed to ascertain the facts and report the same to the State Homœopathic Society.

A communication was received from Dr. Carroll Dunham announcing the forthcoming work on *Materia Medica*, and urging upon the members of this Society immediate co-operation, by sending their subscriptions to the author, Dr. Hering.

Resolutions were adopted commendatory of the work but doubting the expediency of publishing it in German and English in the same volume, thus adding to the cost, and unnecessarily increasing its bulk.

Resolutions were also adopted in favor of a re-organization of the American Institute of Homœopathy so as to make it a delegated body, representing State and County Societies.

Dr. E. D. Leonard was elected a member of the Society, and Drs. Wells, Raymond, Palmer, Chaffee, Stowe and Fellows, honorary members of the society.

Dr. Morgan made a general report on the Homœopathic Theory and Practice.
Dr. Schenck read a novel and interesting report describing, a case of "incongruous twinning," one child being born forty-five days after the other—both now living.

Dr. Sheldon also made a detailed report corroborating the above report of Dr. Schenck. The above anomalous case elicited some discussion and much speculation without satisfactory result.

Dr. Hubbard read a remarkable proving upon himself of electro-magnetism.

Dr. Hoyt read a report on the diseases of children, also report of a case of poisoning by "red vulcanite."

Dr. Stow gave an account of several important and interesting clinical cases from practice, which drew forth an animated discussion.

Dr. Wells, of Utica, read an able report on potencies which elicited remarks from several members, highly commendatory of the high attenuations.

Dr. Palmer presented an instructive paper describing a clinical case from his own practice.

Dr. Carroll Dunham forwarded a paper entitled "Pathognomonic Symptoms and Characteristic Symptoms," in which he maintained with his accustomed ability, the position that pathological distinctions were inferior to characteristic symptoms, as a guide in Therapeutics.

The President here read a well digested original essay, on the alternation of remedies—assuming that the question was not yet settled.

After appointing delegates to the different county homœopathic societies the thanks of the society were extended to those gentlemen from other localities, who had kindly favored us with their presence, and their valuable communications.

The Society then adjourned to meet at Syracuse on the first Tuesday in May, 1865, at 10 o'clock, A. M. A. R. MORGAN, Secretary

HOMŒOPATHIC MEDICAL SOCIETY OF KINGS COUNTY.—An adjourned meeting of the Society was held at Brooklyn on Tuesday evening Dec. 6th 1864, —Present, Drs. S. S. Guy, J. P. Duffin, E. T. Richardson, A. Wright, H. E. Morrill, F. Bond, J. Lester Keep, R. C. Moffat, Henry Minton, J. G. Rosman and B. Fincke, Dr. S. S. Guy, vice-president, in the chair.

Dr. Moffat moved that the communication relating to the State Society, be read. The recording secretary therefore read the communication of Dr. B. Fincke to the Homœopathic Society of Kings County, Nov. 18th 1864, containing a protest against the publishing committee of the New York State Society, for not printing an article on Homœopathic Tocology, read in the State Society meeting, at Brooklyn, Oct. 14th, 1863, and which was ordered by the Society to be printed in the transactions.

Dr. Moffat stated, while with other papers read before the State Society and referred to the publishing committee, it is optional with the publishing committee to print them, it was not so with this paper of Dr. Fincke on Tocology. The resolution of the State Society was distinctly that it should be printed.

Dr. Guy remarked that this is mentioned in the communication.

Dr. Moffat proposed that the County Society should sustain the action of its members.

Dr. Richardson asked whether we should not adopt this protest and send it to the State Society.

Dr. Moffat moved that the protest of Dr. Fincke be adopted by the Homœopathic Medical Society of Kings County.

Dr. A. Wright not being a member of the State Society, heard for the

first time how the transactions of the State Society were made. It seemed to him we go too fast in the matter. Dr. Fincke may have been injured, overlooked. If the Society should stand by all its members we would get all hands upon ourselves. He recommended that the County Society should not touch this matter, having no immediate concern. Our Society had not been injured. We have no power over this matter. Let Dr. Fincke himself bring it before the State Society.

Dr. Moffat withdrew his motion.

Dr. Richardson said the New York State Society consists of delegates from the County Societies. The publishing committee has transgressed its powers, giving the transactions a popular character, to the detriment of their scientific purpose, and setting aside an essay on which the State Society passed by vote, and resolved expressly, to publish in the transactions. It is not that Dr. Fincke has been injured, but it is the interest of the Society to see to it, that whatever the State Society and its publishing committee do, be right.

Dr. Rosman thought the injured individual should bring it up before the State Society.

Dr. Duffin said the delegates of the County Society should bring it before the State Society. The publishing committee has not acted properly. It should be brought up by the delegation.

Dr. Moffat moved to refer Dr. Fincke's protest to a committee, consisting of the Delegates of the Homœopathic Medical Society of the County of Kings to the Homœopathic Medical Society of the State of New York, for their action in the State Society. He asked Dr. Fincke whether he was satisfied with this action.

Dr. Fincke remarked that he had done his part by presenting the matter to the society, and that he would be perfectly satisfied with any action the society would please to adopt in the matter.

The motion of Dr. Moffat was carried.

Narrative of cases of Varioloid, Small-pox, Cancer.

Dr. Moffat related a case of a girl twelve years old: Fever, pain in the head and back, delirium, vomited twice. Rasping sound in the throat, cough, sore chest, eruption of varioloid; twenty pustules in one arm, with all the peculiarities, the buckshot feel, variolous odor. Gave Thuja occid. 200 *L*, about twelve granules in water, one teaspoonful once in one-and-a-half hours. Next morning her cough was gone. She had rested well in the night. The smaller pustules were flattened, the larger ones were more prominent and advanced. Thuja occid. 200, four days after. She continued to improve, pustules entirely flattened and gone. The largest ones were now horny prominences. The sixth or seventh day only the marks could be seen and she was well. Thought no scales came off.

Dr. Guy said that feeling somewhat interested in Dr. Wolf's discovery, he wanted to give it a fair trial. In case of varioloid with much inflammation at the time, the pustules with a pit, and of large number, he gave one single dose of Thuja occid. 200. The case was very clear, and admitted of no doubt as to the nature of the disease. The next day the inflammatory appearance had abated little. He gave nothing. Next day again

some improvement, and again he concluded to wait. In fact, the case went right along improving; the vesicles died away without administering any more medicine.

Another case early last fall in an individual forty years old. Small-pox had developed. The second or third day (though vaccinated when a child,) Thuja occid. 200, was given and repeated. It modified a little, but the disease went its regular course, the patient never being very sick with it.

To another patient, a gentleman, he gave Thuja four days ago. The eruption commenced after a day or two, characteristic of Varioloid, very distinct vesicles in face, pitting. Thuja occid. 200, in watery solution, one teaspoonful every four hours. Yesterday the eyes were nearly closed, face swollen. The eruption was extending. Gave nothing for three days, the inflammatory action then was gone. The eruption remains where it was yesterday, and stands still. He is better. Throat was dry, husky, sore.

Dr. Morrill. Capt.——was taken sick, and Dr. C——was called on Saturday, but did not come. By Sunday noon confluent small-pox had developed and Dr. Morrill was called. He commenced treatment with Thuja occid. 200, about fifteen pellets in water, one teaspoonful every three hours. Monday morning the patient had improved. The former Doctor being called again, Dr. Morrill withdrew. The man died five or six days afterwards, and a post-mortem examination was held by six doctors.

Dr. Morrill asked the gentlemen whether they would rely upon Thuja in the worst cases of confluent small-pox.

Dr. Richardson answered this question by another, whether he knew a better remedy to rely on than Thuja.

Dr. Duffin remarked, that with those new provings we should be cautious; only severe cases test their value.

Dr. Bond used Thuja 200, with good results.

Dr. Richardson related a case of small-pox in a young man 30 years old. He gave Thuja occid. 200, in water, every four hours. In forty-eight hours the eruption was flattened, the progress ceased. There was no suppuration.

Dr. Moffat, at the request of Dr. Minton, related a bad case of small-pox which began like typhoid fever, with bad tongue, delirium, fever, aching pains all over, vomiting till the third day, when the eruption appeared. The fever subsided. In two days more the eruptions spread all over. The second day, from the wrist down the hand, everything was densely covered, the pustules seemed countless. He succeeded, however, in counting one-hundred-and-fifty on the palm of the hand, and the patient counted two-hundred-and-sixty-three on the back of the hand, scattering, and they were spare. He put him on Thuja. Gave also Mercurius and Vaccinia. The fever went on, no swelling in the face. The odor was slight. The case went on evenly and steadily, and got well.

Dr. Guy inquired whether in going into the room of small-pox patients, they could taste something. He invariably tasted small-pox on his tongue, it is a coppery, styptic taste. He perceives this taste, even where he cannot smell the small-pox aroma.

Drs. Moffat, Richardson and Guy, were of the opinion that small-pox is cut short by Thuja.

Dr. Minton inquired if it was prevented also? It was supposed to be.

Dr. Guy related a case for the purpose of obtaining information.

A gentleman 50 years of age. Ulceration of the left side of the scrotum. It commenced four weeks ago. Forms now an elevated ulcer, with hard, horny edges. At first it was a mere abrasion with little watery discharge, but intense pain, extending up into the right hypochondrium, also to various other parts of the body, almost beyond endurance much of the time. He treated him merely with application of a little lint in order to avoid friction, latterly poultices of carrots and slippery elm were used. The ulcer looks like the brain of an animal, corrugated. Never had syphilis. The last few days a pustule at the back of the head appeared, and the week past, others over the body, as also a miliarious eruption upon the abdomen. The ulcer is advancing towards the penis and healing on the opposite side. About one inch in diameter. What is it?

Dr. Minton presupposed primary chancre.

Dr. Moffat suggested cancer.

Dr. Guy said the fact that the centre of the ulcer is elevated proves it to be no chancre.

Dr. Minton thought it might be indurated. He had seen such ulcers. What is the nature of the eruption on the abdomen?

Dr. Guy said it looked like measles and scarlet-fever a sort of miliaria. The horny hardness round the sore is of a pale color and extends half an inch, it feels leathery. Skin around not inflamed, centre flesh-colored, but not bright red. Appearance good. Patient is much frightened, imagines it is cancer.

Dr. Moffat inquired if Dr. Guy gave Kreosot? Dr. Guy did not.

Dr. Minton inquired if the glands were enlarged.

Dr. Guy. No. The testicle is a little swollen. There is no glandular swelling, anywhere. He had given Lachesis and Arsenic, the former lower. Given it in solution, one remedy at a time, three pellets for three or four days, then waited the result.

Dr. A. Wright recommended Kreosot but not as high.

Drs. Minton and Richardson moved that the Society adjourn to the second Tuesday in January next, when Dr. Fincke's paper on the Infiniteness of the Dose, is to be read. Carried. B. FINCKE, *Secretary pro tem.*

CORRESPONDENCE.

Hobart Town, Tasmania, July 22d, 1864.

To the Editors of the AMERICAN HOMŒOPATHIC REVIEW: Will you favor a friend of the practice by inserting this in your influential journal. Hobart Town, the Capital of Tasmania, is a city of some 25,000 inhabitants, and although the homœopathic system of medicine is in extensive domestic use it is without an educated practitioner. The want is severely felt and the pros-

pects so good that I trust the publication of this letter may be the means of turning the attention of one of the many able men in the States, who have adopted the new practice, to come amongst us. The dominant school of course now engrosses the practice, full employment being found for more than half a dozen. All the friends are ready and indeed anxious to assist in the establishment of a really competent physician who should be a married man, have a competent knowledge of surgery, midwifery and the collateral branches of the profession, be capable of lecturing, if need should arise and be able to cope single-handed with the opposition which the reigning class would certainly make. An energetic, able man could not fail to be well supported.

The adjoining colonies of Victoria and New South Wales have each three or more professors who are well established and earning large incomes.

Trusting you will find a place in your own, and if possible, other journals,
I remain, yours, H. K. R.

Letter from Dr. Raue.—To the Editors of the AMERICAN HOMŒOPATHIC REVIEW—*Gentlemen*: In publishing my lecture on the Diagnostic Indications of the Face, you have failed to state that I had given it for that purpose only, *on the special request of the class.*

This omission puts me altogether in a false light before the profession, and I hope you will have it remedied in your next number.

Yours very respectfully,
Philadelphia, December 12th, 1864. CHAS. G. RAUE, M. D.

Letter from Dr. Lippe.—To the Editors of the AMERICAN HOMŒOPATHIC REVIEW—*Gentlemen*: In Vol. V., No. 6, p. 279, you publish among your correspondence, a letter from Mr. Pope under the heading, "Drs. Lippe and Pope." Allow me to say, as regards the tone and style of Mr. Pope's letter, "*Chacun a son gout.*" The invitation to have the last word, is *all* I accept from Mr. Pope. I cannot find time to refute *all* of Mr. Pope's statements. The points are before the profession, and I abide by their decision. Whenever a discussion ceases to elicit the solution of a question at issue, as in this case, viz: "Who is a Homœopathician," it is not further necessary to continue that discussion. It may still be possible to persuade Mr. Pope that *his* logic leads him into *all* his erroneous conceptions of Homœopathy, and my invitation to follow out *his* logic, by showing him the way to do so, may probably either end the discussion or induce him to apologize. *His* logic is this: "Clinical records in England show that Arsenic was, at one time, the principal curative remedy in cholera, and therefore beyond all possible dispute, Arsenic has been, is, and will be, one of the principal remedies in that disease. Had Mr. Pope shown the similarity between the known provings of Arsenic and of cholera, or had he explicitly stated the symptoms or groups of symptoms corresponding between the provings and the (so-called) disease, the point he aimed at, would have been established. But on the other side, if it is proved, that there exists *no* correspondence between the ordinarily characteristic symptoms of cholera and those of the provings of

Arsenic, it is quite likely that the logical critic will doubt the reliability of the clinical reports, or the correctness of our *Materia Medica*, based on provings on the healthy, or the truth of the homœopathic law of cure.

Dr. Black's essay on Arsenic (in the first and only volume of the Hahnemann *Materia Medica*) is no guide for the study of that remedy and the essay cannot be considered an authority either on the ground of its title page or because it never has been reviewed adversely. I have preferred to study Arsenic from the fifth volume of Hahnemann's *Chronic Diseases*. In following the above logic, Mr. Pope may say, that, Dr. Hempel (his friend) having given testimony under oath in open court at Toronto, "Clinical observations establish a fact," and no one had the right to expose Dr. C. J. Hempel, and discredit the reliability of his evidence. If Mr. Pope really and honestly thinks so, and wishes to rescue his friend Hempel, he can zealously prove his sincerity of friendship, by taking what Dr. Hempel *pretends* to have cured the cholera, viz: one fifth of a grain of Arsenic, repeated fifteen times in forty-eight hours, equal, according to common computation to three grains of Arsenic in two days. Our discussion will then, assuredly be at an end.

Yours respectfully,

Philadelphia, December 17th, 1864.

AD. LIPPE.

THE HOMŒOPATHIC THEORY AND PRACTICE OF MEDICINE. By E. E. MARCY, M.D., and F. W. HUNT, M.D. 2 Vols, 8vo., pp. 944 and 952. New York, W. Radde. 1864.

The work laid before the public contains in two volumes, as the title page indicates, two parts. The first part treats on the theory and the second, on the practice of medicine.

In the first part the authors dwell on the history and the general principles of medical science, and in the second give an arrangement and classification of diseases and their homœopathic treatment.

In the short and modest preface the authors present the work to the profession with a hope that it may afford some aid to the medical man in the midst of his arduous and sometimes perplexing practical duties, as well as to the neophyte who has just entered the portals of the temple of medicine.

The first question arising is, can this work afford to the medical man and the neophyte the wished and hoped-for aid?

As to the first part it certainly can, *provided* the theory of Homœopathy is truly and correctly stated and explained.

For the second part, Homœopathy, by its very nature, cannot possibly arrange and classify diseases and add to the therapeutics accordingly, and that part of the work cannot aid the medical man in his practical duties. In Homœopathy exists, first, a theory, and secondly, practical rules stated and explained by its founder Hahnemann in his *Organon* and *Chronic Diseases*. The theory is open for discussion, but the practical rules are incontrovertible, and are fully accepted. Experiment has proved them to be correct and they are therefore beyond possible dispute, *provided* they are understood and followed out.

The first—theoretical—part of the work is very instructive and will be pleasing to a large number of physicians. As in most books of the kind, we find in the history of medicine repetitions of former misrepresentations, as, for instance, when speaking of Paracelsus. In order to arrive at a correct opinion of this wonderful man who lived three hundred years too early, and was so much ahead of his age, it is necessary to read the works written by him and his pupils; it would thereby be observed that he *introduced* the chemical remedies; that he had nothing to do with the Alchemists; that he did *not* adopt any wild theories, but that he was advocating and defending, three hundred years ago *our own* law of cure—that he wanted to individualize and that he opposed all attempts to generalize, and that on that account he burned a work resembling the clinical guides of our own days; he burned the work because it pretended to give recipes for forms of diseases; he considered such books infamous and gave it to the flames. He never professed to have discovered a universal remedy, on the contrary, he insisted upon it that every case of disease was a case *per se*, and must be treated as such. These and similar errors have been copied and repeated thoughtlessly again and again, and they have (like all uncontradicted statements) been received as truths. The portion of the work following the history of medicine and treating on the general principles of Medical Science, will also be profitably read. The authors not only give their own opinions on yet disputed points, but generously give also the opinions of others not in harmony with their own. While, for instance, they express on page 156 and 157 their erroneous ideas about alternations of remedies, we find on page 162 Croserio's description of Hahnemann's mode of administering remedies. It appears that the authors, in order to fortify their assumed position, contend that they express the opinion of a *large proportion* of homœopathic physicians both of Europe and America. If the authors draw the inference that because a *large proportion*, say even a large majority of homœopathic physicians are at present advocating "a frequent repetition of doses in acute diseases, and in many instances the alternation of remedies," the opinion of this *large proportion* must and shall be universally accepted as correct and as a conclusive decision, they are in error; they resort to the same erroneous and fallacious argument which is brought forward by the allopathic school, who contend to this day, that because a large majority of physicians do not acknowledge but oppose the homœopathic law of cure, that system is wrong and false in every particular to all intents and purposes.

Vol. I p. 156, we find the following sentence: "But since the laws of medicinal action have become better understood, there is no longer hesitation in alternating medicines whenever symptoms appear to require it." This phrase may deceive the neophyte if he does not inquire in what manner and by what means the laws of medicinal action have become better understood, and how this better understanding obviates the hesitation in alternating medicines. If, under the laws of medicinal action, is understood the manner through which and the laws by which medicines act, this knowledge *if obtained* can certainly not justify the alternation of medicines, except the learned authors have discovered the manner through which and the law by

which two medicines can act and develop their specific action (symptoms) on the healthy organism both at the same time, of which discovery we know nothing at present; but if the phrase means a better understanding of the action of medicines, which we actually have obtained by accumulated new provings of medicines (one at a time on one individual) and by the verification of old and the new provings through experiment, then this fact will assuredly lead us to the conclusion that we will be better enabled now than ever before to choose a single remedy which covers all the symptoms of the patient, and will obviate all possible excuses for alternating medicines.

Vol. I, p. 162, we find a quotation from Croserio on the practice of Hahnemann in his latter years which cannot be read too attentively, and we are told "that Hahnemann *never* prescribed two different remedies to be given alternately." It must seem marvelously strange "that *since then* the laws of medicinal action have become better understood, and that there is no longer hesitation in alternating medicines whenever symptoms require it," especially, if we are also told by Croserio, "that Hahnemann in *his* manner of administering medicines effected the most marvelous cures, even in cases in which the rest of us had been able to do nothing."

Vol. I p. 159, we find Griesselich's rules for alternation, "When two remedies are seen to be appropriate for different portions of the organism, then, one is given at one hour and the other at another." The inference from this rule is, that we select medicines which are appropriate for certain portions of the organism, and that therefore *the locality* is the only indication, no matter in what manner the portion of the body (organ) is affected. This fallacy has been rejected long ago, and is apparent when practically applied. Suppose we have vomiting and headache, then, according to Griesselich, we must give one hour, one medicine for the stomach, and the other hour, another medicine for the head; the absurdity is so great that no thinking physician can adopt it.

We are exceedingly glad to find Vol. I p. 167, under general diagnosis, the advice that "An attentive perusal of Hahnemann's advice (*Organon* §§ 206, 207, 209) * upon the subject (of examining the sick) will be of the utmost importance to the acquisition of a perfect portraiture of every complaint."

In the theoretical part of the work we had expected to find mentioned in one way or the other, Dr. von Grauvogel's works, who has of late so learnedly, logically and philosophically written on the fundamental laws of physiology, pathology and homœopathic therapeutics.

The second part, or what we might term the practical part, has been the result of great industry; the English homœopathic literature has been quoted diligently, and it contains many new observations. The attempt at a homœopathic work on practice, that is, an effort to point out the medicines indicated for the cure of certain forms of diseases, was first made in the published *Domestic Physicians*. These books were needed by persons who had no homœopathic physicians to call upon, and who, persuaded of the superiority of Ho-

* To which might have been added *Organon* §§ 84 to 104.

mœopathy over Allopathy, desired some advice that they might not fall victims to the prevailing practice, in which they could have no confidence.

Again, the cases reported cured in the homœopathic journals were published by Dr. Rueckert in his "Klinische Erfahrung;" later, Dr. Ehme continued this laborious work, and has published a volume of supplements. This is the only therapeutical work of our literature. Hartmann's Therapeutics do not contain as much instruction * but are better than later works of the same character.

If Homœopathy positively demands that each and every case of disease must be individualized and so treated, that we must find for each individual case its truly specific curative remedy, then a work on Therapeutics becomes an impossibility. The only Therapeutics found in Homœopathy are in the *Materia Medica*. Whilst the true Homœopathician individualizes, the works on Therapeutics attempt to generalize, and while frequently recurring groups of symptoms of diseases may be pointed out for this or that remedy, the practitioner meets with many cases that cannot be found in such a work, because of the great variability of symptoms of diseases. In a given case the varieties depend upon the individuality of the patient, and are as manifold as the individualities of men. So are the phenomena of disease; and if we desire to accomplish all the good that Homœopathy aims at, we must consult our *Materia Medica* in every case of disease.

The work before us has been composed with great diligence and, while by the nature of the subject it must necessarily be imperfect, and, from the multiplicity of facts before the authors, some omissions will unavoidably occur, the reader will find many useful practical observations; he will also find many omissions and when we point out a few of them, we only do so to show how difficult and hopeless a task it is to write a work on Homœopathic Therapeutics.

Vol. I, p. 237, under bleeding of the gums after extraction of teeth, we are surprised to find "common astringents, as sugar of lead," recommended. Phosphorus and Millefolium have been overlooked. On p. 238 we find, "for pain and swelling, following the extraction of teeth, give Arnica, or Aconite and Belladonna in alternation." Arnica no doubt will be useful if there is great soreness or swelling; but to alternate at once two such differing medicines as Aconite and Belladonna is contrary to the homœopathic principle. Hypericum has been omitted, which will often quickly remove the most violent pains from this so often unnecessary and detrimental operation—the extraction of teeth—and if we endeavor to find the true homœopathic medicine for toothache we shall be able to prevent this barbarity in most cases.

Vol. I. p. 256. The remedies having relation to excessive thirst are rather meager. Under desire for cold water, Aconite, Bryonia, Natrum muriaticum, Mercurius and Sulphur are forgotten, and under loss of thirst we do not find Helleborus, Nux moschata, Menyanthes and Sabadilla. All the remedies having thirst with aversion to drink have been omitted or overlooked.

Vol. I, p. 270. Under vomiting we do not find Lobelia or Veratrum alb. The reader will find in Vol. I, p. 299, a very good picture of Sanguinaria

* Kaka's, not yet finished, is still more explicit.