

old school, is pernicious in the extreme; destroying the tissues of the nose that they cannot be inflamed or diseased, is as sensible as amputation for rheumatism or circumcision for syphilis. I have no doubt it sometimes cures and generally suppresses catarrh. Only a few weeks ago a gentleman called for medicine for his wife. Knowing he had been under homœopathic treatment for a catarrh of long standing, I asked him how he got along. "Oh, finely, but your little doses wont do, they are too slow for my case; they are the thing for my wife, but they didn't do up my catarrh. I went to an allopathic doctor and have had two injections of Nitrate of silver, pretty severe, but my catarrh is most well." I congratulated him and thought that if that old catarrh was being so suddenly stopped, such speedy cures are impossible, he would have trouble. Not long after, he returned to the slow method; he had become frightened, for after three or four applications he began to grow deaf. There is not one here but has noted the production of tubercles in the lungs following the suppression of nasal or laryngeal catarrh, the treatment drives it down out of reach as well as the patient. Intelligent persons are learning that it is dangerous to suppress hæmorrhoids, scrofulous glandular swellings, etc., etc. They are finding out the same thing as regards catarrhs and, in fact, all local manifestations. We must keep in advance of our patients.

To finish this group we have those potent remedies, the Bichromate and Hydriodate of potash, especially the Kali bichromicum.

Aching pain at the root of the nose with an acrid discharge. pain across the bridge with stuffed nostrils; pain especially at the junction of the cartilage and bone; ulceration of the cartilage quite through, with great soreness; ulceration of the frontal sinuses with violent headache at the root of the nose and in the frontal prominences, if the discharge stops. On blowing the nose, sensation as if two bones rubbed together; sensation as if the nostrils were made of parchment; a spot in the right lachrymal bone is swollen and inflamed; internal ulceration with thin watery discharge, or collection of elastic

plugs, which cause great pain in removal and leave the nose very sore. Watery discharge with redness of the nose and putrid smell; nose often painful and dry or a watery discharge, excoriating the nose and upper lip with sore and swollen alæ; fetid smell and complete loss of smell, etc. It produces deep and extensive ulceration; the process carried on mostly in the cartilages, hardly producing caries of the bones. It is almost a specific for perforating ulcers of the septum and many cases of cures are on record. This deep ulcerative process seems to extend throughout the whole mucous tract. Similar to this is

*Kali hydrodicum.* Ulceration of internal nose, involving the frontal sinuses and autrum highmori; the nose is red and swollen with constant discharge of acrid watery colorless liquid, with violent lachrymation; anxious expression and restlessness; discharge of burning corroding matter from the nose; the inflammation extends into the eyes; there is much conjunctivities; painful hammering in the frontal region with compressed feeling of both sides of the brain. The action of the hydriodate is more intense, more superficial, not so deep as the bichromate; more applicable, I should judge, in the acute manifestations of scrofulous catarrhs or indeed any catarrh.

There are many other drugs that more or less affect the deeper tissues of the nose, especially the bones and very many that may be called for in practice from the relation of their symptoms to forms of this disease. It is impossible to draw a line, but following close unto this is a group which I will commence with.

*Sepia.* Pressive pains in the root of the nose; sore feeling in the nose on drawing the air through; nose swollen and inflamed; the nostrils angry and ulcerated; small ulcers in the nostrils; scurfy nostrils; a piece of yellowish green slime with bloody edges is blown out of the nose; discharge of yellow water from the nose, with cutting pains in the forehead; dryness in the nose and throat; dryness in the choanæ (though there is much mucus in the mouth) with involuntary

urging to swallow; a severe fluent coryza with severe pains in the occiput and painful drawings in the hips and thighs. It may be said in a general way that Sepia is often applicable for catarrhs arising from retrocession of an eruption. I note a few cases.

A severe catarrh came on after the disappearance of an eruption from the crown of the head, it lasted over a year. Phosphorus began the cure, but it required Sepia to complete it (what a pity more definite symptoms were not given). After washing the head in cold water (after having been heated), a throbbing pain in the forehead; then thin offensive discharge from the left nostril; scabs like small pox formed in the nostrils which were very offensive. Patient relieved by Belladonna but cured by Sepia. A case was reported with this which, though having no connection with Sepia, I will relate. Inflammation and suppuration of frontal sinuses and antrum highmori, with throbbing splitting pains in the nose and forehead; was not relieved by Iodide of potash nor Aurum, somewhat relieved or modified by Arsen., leaving a thick citron yellow discharge. Speedily cured by Lycopodium, which produced a red sandy deposit in the urine.

*Ammonium mur.* Ulcerative pain in the left nostril, with sensitiveness to external touch, frequently recurring; external swelling of the left side of the nose, with discharge of bloody crusts from the nose; persistent itching in the nose with irritation to snuffing, and feeling as if a raw large body stuck in the upper part of the nose; stoppage of the nose, with pain in the right nostril, at night and disappearing in the morning. Stoppage of only one nostril, from which much thick yellow matter comes, with tearing in the cheek bones and teeth of the left side; clear acrid matter runs from the nose; pains worse at night.

*Alumina.* Nostrils are sore and scurfy, with profuse discharge of much thick mucus; ulceration of the mucous membrane with pain in the alæ and frontal sinuses; nose is red, swollen and painful to the touch; the nose is stopped

at night, with dryness of the mouth; disposes to frequent coryzas, found very serviceable in scrofulous subjects. The pains are burning, stinging and biting, occurring mostly in the evening and on one side.

*Antimonium crud.* The nose is sore and painful, especially on drawing in the cold air, and on the right side dryness of the nose on going into the open air, so severe that he can scarce speak; must continually draw thick yellow mucus back into the throat and spit it out; the nostrils are angry, sore, puffy, crusty and painful.

*Borax ver.* Dry crusts continually form within the nose, a discharge of thick green mucus; ulceration of the left nostril, with soreness and swelling of the tip; epistaxis in the morning, and at night throbbing headache.

*Graphites*, a very valuable remedy. Nose feels sore on blowing; blowing bloody mucus out of the nose; catarrh, with obstruction of the nose; heat in the forehead and face; oppression of the chest; numbness of the head and heat in the nose, with loss of smell; severe stuffed catarrh, with much nausea and headache, without vomiting; must lie down; fluent coryza, with frequent catarrh and frequent sneezing, with oppressive pains in the submaxillary glands; the exposed parts are sensitive to the air as if he would easily take cold; severe fluent coryza, with catarrh; much oppression of the chest; dull and hot head.

*Magnesia mur.* Burning of both nostrils, as if sore; nose is sore internally and sore to the touch; scurf in both nostrils, which is very painful to touch, with loss of smell; an oppressive stuffed feeling of the nose; severe coryza, now stopped, now fluent, with confusion of the head and complete loss of smell and taste. Discharge of offensive purulent yellow matter; must sit up in bed a long time; evenings cannot lie down for want of air.

*Calcarea carb.* The fore-part of the nose is red, inflamed and swollen; the nose is dry, very offensive; the nostrils are scurfy and ulcerated; catarrh, with internal heat of the head and with headache and oppression of the chest. Allied to Graphites, also,

*Conium.* Boring in the nostrils; smell of animals in back part of the nose; heat of face; congestion to the head, with catarrhal sensation; severe catarrhal fever, with inflammation of throat and loss of appetite.

*Carbo veg.* In connection with the upper portion of the pharynx, its field of operation is similar to Nitric acid, though not so extensive in its organic changes.

*Stannum* has a catarrh, with a sweet taste to the discharge; its clinical record is quite large. I believe its pathogenesis not satisfactory in its local manifestations, though marked in general peculiarities.

*Lachesis*, *Bromium* and *Ammonium carb.* affect the nose in a way that reminds us of the nasal aspect of diphtheria. The nose is raw; bleeds easily; acrid bloody discharges on blowing the nose.

*Ammonium carb.* Discharges more in one nostril, mostly morning, watery, with sensitive swelling and burning pain of the upper lip, aggravated during menstruation.

*Bromium.* The nose feels as if all the hair had been pulled out; edges very sore.

*Lachesis.* With running from the nose and eyes; discharge of blood, with violent headache; dryness of nose and throat; secretion of mucus increased in the nose and fauces, but diminished in the larynx; complaints from retrocession of catarrhs; a fluent coryza relieves a headache of long standing, with lachrymation and stoppage of the ears, in many respects similar to Hydriodate of potash.

In giving you these analyses, I know I am giving but little of practical value. There are many drugs whose local manifestations are not essentially different. Taking these symptoms alone, one will be often puzzled to know where to refer any case of catarrh. For the choice of the drug we must, as I said before, look outside of the local trouble in the patient as well as in the drug; the concomitant symptoms, the conditions of appearance, aggravation and amelioration, in fact everything that is peculiar to our case in hand; and the peculiar drug must be found, it exists somewhere, it may be in

Japan, or in the Rocky Mountains, it is very likely in our pocket case.

I am aware that there are many remédies used by professing Homœopaths in an empirical manner, of which no proving on the healthy subject exist. Some are fashionable this year, some were last. Undoubtedly they have their sphere of action—therein are they valuable—now we wish to know how a physician can know when to use them; those who are in the habit of doing so must have some guide, something in the phase of the disease that leads them to prescribe this or that drug in place of any proven drugs. They have found, by experience, that this new drug will cure certain specific conditions. Now I would urge it as a duty upon every one who relates a case, or notices this or that drug, to tell what the indications are, why to give it in preference to other drugs. Of what avail is it to hear the relation of fifty catarrhs cured by fifty remedies, unless we shall know why they were cured. I must say that, as a young man searching after knowledge, I have found it very unsatisfactory to hear any one say that he has found this drug or that combination very serviceable in this or that disease. Is it to be supposed that if, the next day, I am called to prescribe for that disease I am going to give that remedy because he found it useful.

A certain drug has been known to cure catarrhs, let us, therefore, find out what kind of catarrhs it does cure and then we can use it. If we give it for a catarrh now to try it, make a note of the patient's state before giving it, and we may arrive at it perhaps, approximately, remembering that change in a disease is not always to be ascribed to the medicine—to reason from diseased conditions we need hundreds of cases—absolute knowledge of a drug from the healthy needs but comparatively few provers.

## TELLURIUM.

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

*(Continued from page 428.)*

*Coincidences of various provers* none of whom knew on the others the effects of the drug; in general not at all.

The sudden rising of blood to the head, 12. *O. T.*, and the sudden rush of blood toward a spot above the left eye. 13. *P.*

Vertigo worse on every motion, 5, *Grd.*, and (its opposite) rush of blood when sitting quiet. 12. *O. T.*

The slightest motion causes vertigo, 5, *Grd.*, makes the brain as if beaten, 3, 4, *N.*, *Gsw.*, Eustachian tube 50 and 89, *R*; 53 *Gsw.*

Sensation of weakness in the stomach. 108, *C.*, and 111, *N.*, *Gsw.*

As if round waves were beating against the pharynx. 116, *C. Hg.*; wave-like throbbing like balls of wind, on the right side below the ribs. 135. *Gsw.*

Itching in the anus. 158. *R.*, 159. *Gsw.*

Pain in the sacrum worse when stooping, along the sciatic nerve on the right thigh, allows scarcely any pressing at stool, 221. *K*; worse when coughing, laughing and pressing to stool. 219, 220. *R.*

When lying on the left side worse on the right, pain in the sacrum, 214. *R.*, headache. 37. *C. Hg.*

Under the ribs throbbing, 135. *Gsw.*; eruption ascending from below upwards. 311. 312. *O. T.* 316. *W.*

Eruption worse on the left side, 310. *O. T.*, 316 *W.*, and many others.

**DURATION OF ACTION.**—Drs. Kitchen, Gardner, Whitey, Gosewich and his provers observed only a few days; Raue, and Oscar Tietze three weeks. C. Hering and his female prover six weeks. Røeder, who took a grain and a half in the course of two days, still perceived the odor after eight days. Hansen, who took seven grains within seven days, perceived

the gastric symptoms for fourteen days, the odor for seven weeks. The strength of the dose has therefore only a subordinate influence, viz., only on the secretion. The coryza lasted twelve days with Raue, Cooms and Oscar Tietze. The rush of blood to the head, fourteen days with Oscar Tietze, likewise the itching on the head. The reddened left eye on the 16th day. *Raue.* Pain over the left eye the 16th and 17th days. *Cooms.* Pain in the region of the heart the 17th day. *Cooms.* Aching spot upon the forehead more than three weeks. *Oscar Tietze.* Fullness of the epigastrium and oppression from the clothing in the fourth week and later. *Cooms.* Ring-worms almost eight weeks. *Metcalf.* Eruption and pains in the back nearly two months. *Dunham.*

## REGISTER OF SYMPTOMS.

\* Denotes curative effects symptoms marked with cipher.

— Symptoms added after the register was made up and numbered.

*p.* Symptoms observed on patients or that had been previously observed by the prover on himself.

**Mind:**

1. Lost his liveliness for one day. *Dog. Gmelin.*

— Lost his liveliness immediately, seemed to be benumbed and lay down quietly. *Dog. Hansen.*

. Lost liveliness, soon recovered, remained lively until the second day at evening; the third day in the morning, dead. *Rabbit. Gmelin.*

— Stupor and vomiting. *Hansen.* Has a very quieting action upon his disposition, not so apt to fly into a passion. *Gsw.*

— Disposition particularly quiet, whereas, otherwise she is very easily moved, anxious and full of care. *Gsw.*

— Dreads having the part touched, or even approached, with but little sensitiveness in the region of the fifth dorsal vertebra. 206.

Forgets and neglects much; when he has anything in hand, he neglects for it everything else. *C. Hg.*

**Head:**

5. *p.* Very violent attacks of vertigo in the morning when dressing; on walking out it became so bad he could hardly stand; was obliged to lie down and to remain at home two days. Every time he sat up he became dizzy, even by every motion when lying and by simply turning the head. At the same time increased pulse; nausea, after rice he was obliged to vomit. Had previously somewhat similar attacks when Aconite gave relief, which it did not this time; also Glonoine which had caused a somewhat similar attack did not relieve, nor did Belladonna; returning after ten years, Opium relieved for a while; Glonoine<sup>300</sup> relieved permanently. *Gardner.*

. Vertigo, while going asleep; a drawing away in the direction of the legs, every night from the second to the ninth day. 289.

. Caused him no headache, which every other proving had done. *Gsw.*

. Dullness in both sides of the head, more towards behind. *C. Hg.*

— The head is heavy and full with sleepiness, the next morning. *F. Gsw.*

. Dull headache and dullness of the head, soon and gradually increasing. *O. T.*

10. Dull, unpleasant headache, especially above the eyes. *P.*

. Toward evening, dull headache over the whole head. *R.*

. Sudden rising up of the blood towards the head (compare 13) with perceptible reddening of the face, now early in the morning, now in the afternoon at various hours, but twice almost every day, when sitting quietly at work; for fourteen days. *O. T.*

. Ten, a. m., pain above the left eye, came suddenly, and went away just as suddenly, as if from a sudden rush of blood to this spot (compare 12). On going away, accompanied by a sensation difficult to describe along the left side of the nape, somewhat like a sudden stopping and backward

flowing in a large blood-vessel. A sensation of weakness in the stomach followed. *P.*

. Pain over the left eye, after lying down, the sixteenth day; the seventeenth day now and then repeated. *P.*

15. The pain above the eye lasted the longest. *S.*

. Pressure from within outwards in a line deep inwards, above both eyes, worse on the right. *C. Hg.*

Violent linear pain in a small spot above the left eye, behind the brow. *C. Hg.*

. The headache develops itself more and more and becomes an unpleasant pressure above the eyes, as after watching through several nights. *O. T.*

. Heaviness above the brows and sneezing. 62.

20. Above the brows dull pressure. 10.

. Above both eyes, pressure. 16. 18.

. Headache above the eyes, with chest pain. 187.

. Above the right eye, pain. 258. 259.

. Above the left eye, violent pain. 17. 250.

25. Sudden rush of blood to a spot above the left eye. 13.

. Single pressure, like stitches, anteriorly upon the forehead. *O. T.*

. Towards morning, on getting awake, internally, in the left sinciput, a pain in a spot as large as a hazelnut. *C. Hg.*

. Six, p. m., headache worse in the sinciput, goes away after supper. *R.*

. Stitch in both temples, after a walk. 261.

30. In both temples, pain. 268.

. The right temple pains. 259.

. Pressure on a small spot behind the vertex. *C. Hg.*

— Violent headache above in the occiput, it extends anteriorly as far as into the eyes, stitching from the temple towards the eye; Tellurium<sup>12</sup> in water evening and morning. *n. n. C. Hg.*

. Afternoon, headache, worse on the left. *R.*

. The brain feels as if beaten on the slightest movement.

*N. Gsw.*

35. The headache passes away after eating, together with the nausea. 117.

. The headache goes away and coryza sets in. 63.

**External head :**

External tensive headache over the entire left half of the head, while lying on the right side; passes away when lying on the left side. Several mornings. *C. Hg.*

. On the right side of the forehead a spot which is sore when pressed upon, as if he had received a blow thereon; lasted more than three weeks. *O. T.*

. Itching upon the head behind and above, after itching in the epigastrium, chest and axilla (312); lasted fourteen days. *O. T.*

40. Sensation of numbness in the occiput and nape. *N. Gsw.*

Occiput dull. 8.

Heat of the sinciput and face, afternoon. 67.

— In the seventh week after the passing away of the itching stinging in the skin, there began a constant itching upon the scalp, which compelled constant scratching; it came from an eruption of small, reddened spots with five very small vesicles, which after a few days dried up and desquamated mostly on the occiput, in the nape of the neck, at the border of the hair, behind the ears and on the posterior surface of the conchæ of the ear. At the end of a week it had almost disappeared. *Metcalf.*

**Eyes :**

— Vision becomes clearer, the eyes feel brighter. 12. *nm. C. Hg.*

— Cataracts upon both eyes, Tellurium odor from the fluids of the eye. *Dog. Hausen.*

(*To be continued.*)

**MISCELLANEOUS.**

HOMŒOPATHIC MEDICAL SOCIETY OF THE STATE OF NEW YORK.—The fourteenth annual meeting of this Society convened at Albany, Tuesday, February 14th, 1865. In the absence of the officers of the Society at the opening of the meeting, Dr. B. F. Coruell was called to the Chair.

The minutes of the last meeting were read.

The President appointed Drs. M. M. Gardner and W. S. Searle a Committee on Credentials, who reported the names of the following gentlemen:

Drs. H. D. Paine, W. H. Randal, Albany; C. H. Carpenter, Troy; J. C. Delavan, Albany; L. H. Pratt, Albany; B. F. Cornell, Moreau Station; W. S. Searle, Troy; E. D. Jones, Albany; J. Younglove, Troy; S. J. Pearsall, Saratoga Springs; J. Hornby, Poughkeepsie; F. Vanderburgh, J. F. Merritt, Staatsburgh; J. W. Cox, Albany; D. Springstead, Albany; M. M. Gardner, Holland Patent; H. Robinson, Jr., Auburn; H. M. Paine, Clinton; E. A. Munger, Waterville; L. B. Wells, Utica; O. D. Hamilton, York; I. J. Meachem, Nunda; T. D. Stow, Fulton; G. A. Billings, North White Creek; A. R. Morgan, Syracuse; H. Beakley, Peekskill; J. Beakley, New York; E. A. Potter, Oswego; L. Clary, Syracuse; S. S. Guy, Brooklyn; M. W. Campbell, Troy; A. P. Throop, Palmyra; A. P. Cook, Hudson, C. Lowrey, Whitehall; I. T. Talbot, Boston, Mass; H. B. Fellows, Sennett; H. K. Bennet, Hartford; J. F. Niver, Stillwater; J. F. Miller, Troy, and W. V. Kirk, of Albany.

The Corresponding Secretary offered a resolution, inviting the physicians present who were not members to participate in the deliberations of the Society.

The following gentlemen having been nominated at the last annual meeting were elected honorary members of the Society :

Drs. Wm. Tod Helmuth, St. Louis, Mo.; George D. Beebe, Chicago, Ill.; Edwin H. Hale, Chicago, Ill.; A. H. Okie, Providence, R. I.; John C. Sanders, Cleveland, Ohio; David Wilson, London, England.

The following gentlemen were duly elected permanent members of the Society :

Drs. Henry M. Smith, New York; Samuel S. Guy, Brooklyn; Ed. T. Richardson, Brooklyn; Wm. T. Searle, Troy; H. A. Houghton, Keeseville; G. H. Billings, White Creek; J. G. Bigelow, Syracuse; Wm. A. Hawley, Syracuse; Solomon C. Warren, Otego; P. W. Gray, Elmira; William Gulick, Weston; H. Barton Fellows, Sennett; A. H. Beers, Buffalo; R. R. Gregg, Buffalo.

The Chairman nominated the following gentlemen a committee to nominate officers, honorary and permanent members and medical committees;—Drs. E. D. Jones, Wm. S. Searle, and H. M. Paine.

Dr. E. R. Heath presented a report comprising a history and treatment of several epidemic diseases prevalent during the past season in the counties of Wayne, Monroe, Livingstone and Orleans.

Dr. Pratt presented a communication from Professor F. W. Hunt, on Cerebro

spinal Meningitis, and asking the members of the society to furnish him with an account of the history and treatment of cases of this disease that may come under their observation.

The Secretary presented the following communications by Dr. A. R. Morgan: Tabular statement of the Homœopathic Physicians residing in Onondaga county from the year 1842 to 1864; proving of *Apis mel.*, and the symptoms and treatment of an obstinate leprosy.

The Secretary presented a communication from Dr. E. T. Foote, of New Haven, Conn., comprising a history of the introduction and progress of Homœopathy in Chautauqua county from the year 1833 to 1864.

*Afternoon session.*—The President, Dr. E. A. Munger, in the Chair.

The President then delivered his address.

On motion, Drs. J. Beakley, L. Clary and B. F. Cornell were appointed a committee, to take such action as may seem desirable respecting the suggestions advanced in the President's inaugural address.

The Treasurer, Dr. L. B. Wells, presented his report, which was adopted, showing an indebtedness on the part of the Society of about five dollars.

Dr. Guy presented the following resolution, which was adopted:

*Resolved*, That one hour be devoted to the reading and discussion of papers on medical subjects, and the remainder of this session to the transaction of miscellaneous business.

Mr. Munger presented a history of a case of hydrocele; also, a case of scrofulous ophthalmia.

Dr. Meachem related the symptoms and treatment of a case of malignant scarlatina.

Dr. Morgan related the symptoms of a case of albuminuria.

A desultory discussion upon the influence of remedies upon various malignant diseases, was participated in by most of the members present.

Dr. Guy related the results of his experience respecting the use of high potencies in the treatment of acute membranous and spasmodic croup.

On motion of Dr. Morgan, it was

*Resolved*, That the several papers presented be referred to the Executive Committee, to be cursorily examined for the purpose of recommending those first which appear to afford a basis for discussion.

*Resolved*, That, unless otherwise directed by the Society, the papers be read in the order suggested by the Committee.

The hour having arrived for the transaction of miscellaneous business, Dr. A. R. Morgan presented a report by Dr. Wm. A. Hawley, respecting the appointment of homœopathic physicians as medical examiners by the several Life Insurance Companies doing business in this State.

On motion, it was laid upon the table until to-morrow forenoon.

*Evening session.*—At the appointed time to which the Society adjourned, the President in a few appropriate remarks introduced Dr. H. D. Paine of Albany, who delivered the annual address.

At the conclusion of the address, the thanks of the Society were extended to Dr. Paine for his able and interesting address, and a copy was requested for publication in the Transactions.

The Society adjourned to meet in the same place at nine o'clock Wednesday morning, after which the members and other gentlemen present with their ladies, proceeded to the house of Dr. J. W. Cox, where an hour was very pleasantly passed in a social reunion. The pleasure of this entertainment was increased by the presence of distinguished members of the profession from other States.

*SECOND DAY.*—The President, Dr. Munger, in the chair.

Dr. F. Vanderburgh read a paper entitled "The Problem of Life."

The reading of this paper was followed by an extended discussion, terminated by the following resolutions offered by Dr. Meachem:

*Resolved*, That the thanks of this Society be given to the venerable Dr. Vanderburgh for the paper just read, and that we regard it as a valuable contribution to the science of both vital and physical forces prevailing in the universe.

*Resolved*, That as disease consists essentially of a disturbance of these forces, an accurate knowledge of their mutual relations, and the laws which govern them, is highly important to the physician.

The Recording Secretary offered the following resolution:

*Resolved*, That inasmuch as the Homœopathic Medical Society of Connecticut is now in session at New Haven, a committee be appointed to secure, if practicable, an exchange of telegraphic congratulations.

Drs. J. Beakley, L. Clary and L. B. Wells were appointed.

Dr. I. T. Talbot, of Boston, an honorary member, and delegate from the Homœopathic Medical Society of Massachusetts, read a paper giving an historical sketch of the introduction and progress of Homœopathy in Massachusetts, and concluded by presenting the following congratulatory communication:

"The Massachusetts Homœopathic Medical Society sends its greetings to the New York State Homœopathic Medical Society, and will cordially unite with it in any undertaking for the advancement of the noble science of Homœopathy."

Dr. Guy offered a resolution expressing the thanks of the Society to Dr. Talbot for his interesting paper, and requesting a copy for publication in the Transactions.

Dr. John Hornby presented a communication, giving in detail cases of curvature of the spine, scrofulous ulcers, occlusion of the rectum, and others, successfully treated alone, by the internal administration of remedies.

A discussion followed, upon the comparative utility of high and low potencies, which occupied a considerable portion of the forenoon session.

The nominating Committee having reported, the Society proceeded to the election of officers. The balloting resulted in the election of the following gentlemen:

Abijah P. Cook, M. D., of Hudson, *President*; Benjamin F. Cornell, M. D., of Moreau Station, *First Vice-President*; Benjamin F. Bowers, M. D., of New York, *Second Vice-President*; Lorenzo M. Kenyon, M. D., of Buffalo, *Third Vice-President*; H. Barton Fellows, M. D., of Sennet, *Corresponding Secretary*; Horace M. Paine, M. D., of Clinton, *Recording Secretary*; Lucien B. Wells, M. D., of Utica, *Treasurer*.

*Censors—Northern District*—Drs. S. A. Cook, J. S. Delavan, E. D. Jones ;  
*Southern District*—Jacob Beakley, E. T. Richardson, Egbert Guernsey ;  
*Middle District*—J. C. Raymond, Lyman Clary, E. A. Potter ; *Western District*  
—A. H. Beers, G. W. Lewis, C. Ormes.

*Committee on publication*—Drs. H. M. Paine, H. D. Paine, E. D. Jones.

*Executive Committee*—Drs. H. M. Paine, J. W. Cox, L. M. Pratt.

*Nominated for Honorary Members*—Drs. Elial T. Foote, New Haven, Conn.; Charles D. Harris, Wisconsin; William E. Payne, Bath, Maine; Samuel Gregg, Boston; D. S. Smith, Chicago; — Sims, Philadelphia.

*Nominated for Permanent Membership*—Drs. B. Fincke, A. Wright, J. Searle, W. G. Wolcott, S. J. Pearsall, H. Robinson, Jr., L. M. Kenyon, G. A. Hall, E. A. Potter, A. R. Morgan, J. F. Gray, B. F. Bowers, I. J. Meachem, O. D. Hamilton, G. B. Palmer, T. D. Stow, Wm. H. Watson, M. M. Gardner, E. R. Heath, J. C. Raymond.

*Committee on Materia Medica*—Dr. S. B. Barlow, First District; H. Minton, Second District; S. Searle, Third District; G. H. Billings, Fourth District; W. A. Hawley, Fifth District; D. D. Loomis, Sixth District; E. R. Heath, Seventh District; A. C. Couch, Eighth District.

*Committee on Epidemics*—Drs. E. Guernsey, First District; S. S. Guy, Second District; H. D. Paine, Third District; S. J. Pearsall, Fourth District; A. R. Morgan, Fifth District; J. R. White, Sixth District; H. B. Fellows, Seventh District; L. M. Kenyon, Eighth District.

*Committee on Correspondence*—Drs. J. Beakley, First District; H. E. Morrill, Second District; E. Holley, Third District; C. Lowrey, Fourth District; T. D. Stow, Fifth District; S. C. Warren, Sixth District; E. W. Rogers, Seventh District; D. F. Bishop, Eighth District.

*Committees on Voluntary Communications*—Drs. R. C. Moffat, E. T. Richardson, W. Wright, S. B. Barlow, J. Beakley, H. M. Smith, C. Dunham, W. S. Searle, W. H. Watson, F. W. Hunt, W. A. Hawley, C. Ormes, B. F. Bowers, E. M. Kellogg, E. E. Marcy, D. D. Smith.

*Delegates to State Homœopathic Medical Societies*—Drs. H. B. Fellows, H. D. Paine, to the Homœopathic Medical Society of Massachusetts; S. S. Guy, E. A. Potter, H. Minton, do. New Jersey. H. Beakley, J. F. Merritt, R. C. Moffat, do. Pennsylvania; W. S. Searle, A. P. Cook, W. Wright, do. Connecticut; W. H. Watson, E. Guernsey, E. D. Jones, do. Rhode Island; A. R. Morgan, L. M. Pratt, L. Clary, do. Illinois; L. B. Wells, H. Robinson, G. Z. Noble, do. Ohio; M. W. Campbell, C. W. Boyce, E. R. Heath, do. New Hampshire; J. Beakley, D. F. Bishop, A. R. Wright, do. Western Institute.

*Delegates to the American Institute of Homœopathy*—Drs. L. B. Wells, S. J. Pearsall, O. D. Hamilton, H. B. Fellows, H. M. Smith, C. Dunham, A. R. Morgan, H. M. Paine, H. D. Paine, W. H. Watson.

*Afternoon session.*—The Recording Secretary offered the following resolution, which was adopted:

*Resolved*, That the order of business be changed so as to require the officers elected at one meeting to continue in office until the close of the meeting following their election.

A resolution was adopted so changing the by-laws as to make only non-residents of the State eligible for honorary membership.

Dr. W. S. Searle presented a report, on new Remedies, showing the utility of Gelsemium and Cimicifuga in cerebro-spinal meningitis.

*Evening session.*—Dr. A. R. Morgan offered the following resolution, which was adopted:

*Resolved*, That at each annual meeting of this Society, it be the duty of the delegates residing in the several districts to designate eligible candidates in their respective districts for nomination as permanent members.

Dr. H. D. Paine offered the following resolution, which was adopted:

*Resolved*, That the Committee on Publication be requested to include in the Transactions a suitable notice of the character and services of our late honored colleague, Dr. A. D. Wilson.

Dr. A. P. Cook offered the following resolution, which was adopted:

*Resolved*, That Dr. J. Beakley be requested to prepare a biographical notice of the late Dr. Ira R. Adams, and the late Dr. J. W. Smith, Jr., for publication in the Transactions.

Dr. H. M. Paine, from the committee appointed at the last meeting to prepare a tabular nosology, reported a form, and offered the following resolution:

*Resolved*, That the tabular nosology prepared by Drs. W. H. Watson and H. M. Paine be referred to the Committee on Publication, with instructions to secure the publication in blank form of a sufficient number for the use of the Society.

The Recording Secretary offered the following resolution, which was adopted:

*Resolved*, That the Committee appointed to consider and act upon the suggestions offered in the President's inaugural address, be requested to ascertain what legal enactments are required in order to secure an equitable proportion of the medical and surgical appointments in all our public charities and in the army and navy, with power to publish a suitable form for distribution as soon as may be practicable to the several County Medical Societies in the State.

On motion, Drs. E. Guernsey and H. M. Paine were added to the committee.

The report of Dr. Hawley respecting the appointment of Homœopathic Physicians as medical examiners by Life Insurance Companies, was considered, and the following resolution offered by Dr. Morgan adopted:

*Resolved*, That inasmuch as all but seven companies doing business in the State of New York have responded favorably to the interrogations of Dr. Hawley, and as there is still a doubt of the actual position of the delinquent companies, it is deemed advisable to pursue the investigation and report at the next annual meeting.

Drs. W. A. Hawley and A. R. Morgan, were appointed such Committee.

Dr. L. B. Wells offered resolutions of thanks to the officers.

*Resolved*, That the thanks of this Society be extended to Dr. and Mrs. Cox for the elegant and sumptuous entertainment provided for the members of the Society on Tuesday evening last.