Ellingwood's Therapeutist

Finley Ellingwood MD
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OUR MOTTO
To Learn the Truth. To Prove the Truth.
To Apply the Truth. To Spread the Truth.

OUR CREED
The truth from all, for all, and to all, without regard to the creed of the individual.

OUR FAITH
That all disease will ultimately be subdued, in whole or in part, by remedial measures;
That failure to cure disease is due to our lack of knowledge;
That Therapeutic nihilism is the deadly foe to Therapeutic progress;
That the study of the clinical action of the single drug is the true method of drug study;
That each drug acts directly and invariably upon one or more exact conditions of disease, and must be so studied and known;
That, with such knowledge perfected, we can immediately and successfully prescribe for conditions of disease, with which we have not previously met.

Entered at the Chicago Postoffice as Second Class Mail Matter.
A STATEMENT OF FACTS ABOUT MEATOX
GRANULATED DRY BEEF

Meatox is a concentrated nitrogenous food made of pure lean beef. It is absolutely free from preservatives, and it keeps indefinitely even in unsealed containers.

Meatox is different from the so-called Meat Juices or Meat Extracts in that it contains all the nutritive elements of beef,—namely, assimilable proteids, which are the nutrients, whereas the Meat Extracts merely represent the stimulant parts of beef.

Whereas, good lean beef contains from 16 to 20 per cent. of proteids, and Meatox on the other hand contains from 73 to 75 per cent. of proteids, one pound of Meatox contains the nutritive substances (proteids) of from 4 to 5 pounds of lean, boneless beef, or about 10 pounds of ordinary butcher’s meat with the bones and fat. The presence of this high percentage of proteid matter commends the use of Meatox as a dietary necessity to the discriminating physician.

PREPARED ONLY BY
CHARLES MARCHAND
Chemist and graduate of the “Ecole Centrale des Arts et Manufactures de Paris” (France)
NEW YORK CITY

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DEPENDABLE DOSAGE

Doctor, which would you prefer were you in the place of your patient—a big, bitter, nasty, nauseating dose of an uncertain galenical preparation or a mathematically exact dose in the shape of elegant soluble granules or tablets which please the eye and do not offend the smell or taste, and which may be depended upon to do the same thing upon every occasion with certainty of result?

The Alkaloidal Granule, uniform, active and potent, contains a mathematically correct and therapeutically exact quantity of the pure active principle or principles of the drug it represents, each carrying the minimum effective dose. It is always ready; it may be given alone, in multiple dosage, or in combination with synergistics; it is swallowed easily by the most fastidious invalid or the very young child and produces results in less time than any other known form of medicine; it may readily be dissolved if desired. Enough of Abbott’s Alkaloidal Granules can be carried in the pocket to enable the doctor to use at once any remedy necessary in all emergency practice.

Any possible combination can be dispensed at once (in solution if wished) without delay, without the possibility of mistake, overdose or uncertainty of effect.

One hour’s study of our special works on this subject will give any physician a good working knowledge of any active principle—it’s uses, dosage (the only real basis for dosage being effect), therapeutic indications, recognition of full or remedial action, and beginning of toxic effects; and the doctor’s own knowledge (his own good sense) does all the rest. He doesn’t have to unlearn anything, he simply engraves his new knowledge on the old, leaves the crooked pathways of uncertainty or nihilism and goes straight ahead.

If you prescribe and want the best, use the active principles, specify ABBOTT’S, and see that you get them. If you dispense you can dispense nothing better, and nothing is too good for the doctor. Well grounded in the principles of therapeutic truth, with a case of tiny active-principle granules or tablets in his pocket, the physician is ready to meet, with the power to control it, any emergency that may arise.

Our goods are right, right from start to finish, and we stand behind them-guarantee them in every particular—and always are ready with “money back if not satisfied”.

Our line is obtainable from jobbers in drugs, on prescription at first-class pharmacies, or direct from our laboratories or branches. SPECIFY WHAT YOU WANT AND GET IT! Pocket Case and Samples Free.

If you are unacquainted with our line REPRESENTATIVE SAMPLES will be sent free on request. Add 10 cents for postage and we will include Free a neat, leather 6-vial pocket case filled with representative granules. Aconitine, Calomel, Digitalin, Glonoin, Hyoscyamine and Strychnine. Therapeutic price-list and Alkaloidal Digest, a 300-page book of condensed essential facts will be included. Write today, say what you want and mention this Journal.

THE ABBOTT ALKALOIDAL CO.
New York    CHICAGO
London, Eng.    Oakland
              Seattle

CORRESPOND WITH OUR ADVERTISERS, AND MENTION THIS JOURNAL.
The physician, who, with the courage of his convictions, does the very best he knows to relieve the sick and suffering, regardless of the dictum of any body, sect, ism or pathy; who searches and researches, and gathers here a little and there a little from all sources, whether it be from allopathy, homeopathy, eclecticism, osteopathy or any other pathy or ism under the sun (for there is good in all) and knows what he knows and knows that he knows it "beyond all peradventure" as Prof. John M. Scudder used to tell us, will call no man master, and by such, is this, our great system of scientific and rational medicine raised and perpetuated. All honor to the man who is searching for truth, for it is the truth that makes us free. I have written in the December THERAPEUTIST on some of these remedies and may necessarily have to repeat in this something I have previously written, but repetition of a good thing will do us no harm.

Iron has been studied therapeutically for many years, and there are about as many different ideas advanced as the number of years it has been studied. However, we think within the last ten years there has been as much investigation as there was during all the previous years. From literature on the subject, and from instructions (?) from drug-house agents, we would almost conclude that all one would need in the practice of medicine, so far as medicine is concerned, is to have a good supply of so-and-so's iron compound.

Iron is an oxygen carrier, the best we have, and when properly administered carries oxygen to every tissue reached by the blood stream, and promptly relieves irritation and increases strength. I am now writing especially of ferrum phosphoricum, as I regard it as the best preparation of iron. It should
be prescribed in all cases needing iron alone, but if you desire to prescribe an acid with it perhaps the chlorid, or Howe’s acid solution may be used, but this is seldom the case compared with the times that iron alone is indicated.

Oxygen is of the greatest aid when battling for life, and more especially is this manifest in diseases of the respiratory apparatus. I do not have much faith in the inhalation of oxygen from the oxygen gas bag, and I very much prefer the ferrum phos. It assists breathing, strengthens the heart and prevents heart failure, and tones up all the blood vessels. If there is sufficient oxygen in the blood we will have very little if any fever, as it is the want of it that causes fever. Hence, ferrum phos. is indicated in all fevers and inflammations, and more especially in acute inflammations, and is one of the safest and best sedatives we have and I prescribe it more than all others. True it will not relieve all fevers neither will any other sedative or combination of sedatives. This drug is indicated in all fevers or inflammations regardless of the coating of the tongue, but as a matter of course there are exceptions to this as with all other drugs. If the fever is caused by an overloaded stomach or engorged bowels the only sensible thing to do is to “clear the ship fore and aft” and the fever is gone. In all hyperemic conditions characterized by heat, pain, redness and swelling, rapid pulse and increased circulation this drug is indicated. This is equally effective in the adult as in the child and in about the same dose, for it is the minute dose we want in any case.

Hemorrhage is usually caused by a weakened, broken down condition of the muscular fibers of the blood vessels, and especially is ferrum phos. indicated in this condition, and it matters little where this hemorrhage is located it will in most cases be relieved by this remedy. I will not take time and space to specify names of diseases for its use, as the careful physician knows that names have little to do with treatment. Suffice it to say that where we have any fever or inflammation this drug is indicated internally and many cases locally. I have treated many cases of erysipelas with this drug alone internally, keeping the parts covered with a cloth wet with a solution of the drug. This is a companion remedy with many other remedies and when this remedy has its most positive indications, often there are also other remedies indicated. I use this in fresh wounds and abrasions of the skin and use it as we do other dusting powders and with excellent results. The wounds are kept clean and heal rapidly.

**KALI MURIATICUM**

Chloride of potassium is a companion remedy with ferrum phos. and in most cases should be prescribed early in all inflammations to prevent plastic exudation. This drug should not be confounded with chlorate of potassium for they are very different in therapeutic effect as well as in composition.
This drug acts with fibrin and prevents the formation of plastic exudates and subsequent organization of the tissues.

There is no drug in our materia medica, that we are acquainted with, that will do as much to prevent this condition as kali muriate.

Chlorid of potassium is indicated where there is white or gray coating on the tongue and mucous membranes of the mouth and throat; a thick white slime or phlegm from any of the mucous membranes; where the skin is scaly, mucous membranes pale, the epithelium easily gives way and there are vesicles, ulcers and erosions to contend with. In these conditions kali muriate is a superior remedy. This drug is our very best remedy to prevent the plastic exudates in pneumonia and all other acute inflammations of the respiratory tract, for these exudates are almost certain to be more or less a concomitant, if not prevented.

I would not attempt to treat a case of pneumonia, diphtheria, croup or in fact any other inflammation whether idiopathic or traumatic in any part of the body without this remedy from first to last as the main remedy. In hepatitis, cellulitis and in cases of that fashionable disease appendicitis or any other it is this drug which if administered early will avert suppuration. I have treated many cases of pneumonia, both in children and in adults, with this drug and ferrum phos., no other drugs being used, from beginning to end, and can say the same in many cases of diphtheria. There is no, trouble to get children to take this medicine, and besides it is very effective. I have used no other remedy for croup for years except these two drugs, and in this disease I usually put a teaspoonful of each of the 3x trituration into a glass half full of water, and administer a teaspoonful every ten minutes until relieved and then every hour till well. It acts promptly and effectually

I have used kali muriate in edema of the cellular tissues and have reduced the swelling in many cases where other well known remedies for this condition had failed. In one very severe case of edema accompanied with heart disease, where usually apocynum is prescribed and was prescribed and did no good so far as we could determine, I prescribed kali muriate and the edema was all gone in a few days. The indications are just as clear for the administration of this drug as for any other specific medicine we possess, and can be relied upon with as much certainty. I have prescribed this remedy ranging from the crude drug in solution, to the same amount of the third decimal trituration and can say that I am as well pleased with the trituration as with the crude drug, and am surprised often to see what small amount of the drug will accomplish the work. By all means do not neglect this remedy to prevent plastic exudates, for it only needs a fair trial to convince the observer that it will do all that has been claimed for it.

Think of it in boils, carbuncles,
pimples, smallpox, eczema, erysipelas and many other local manifestations and administer it with ferrum phos.

Dose, from ten grains to a drachm in four ounces of water, teaspoonful every two hours, or give it in powder or tablet form from one to three grains at a dose.

KALI PHOSPHORICUM

What shall I say of this most wonderful remedy? Grauvogle, says: “Kali phos. is a constituent of all animal fluids and tissues, notably of the brain, nerves, muscles and blood cells. All tissue forming substances retain it with the greatest obstinancy, all nutritious fluids contain it, hence we may conclude that it is indispensable to formation of tissue. All the nerves retain their vitality for a long while, and very completely in a solution of kali phosphate. By the diminution of the excretion of kali phos. in the urine, conditions are produced within the organism which may present many sided resistance to the typhus-de composing element, as well as to the extension of the typhus process.”

Dr. Carey says: “The gray matter of the brain is controlled entirely by the inorganic cell salt, potassium phosphate. When nervous symptoms arise, due to the fact that the nerve-fluid has been exhausted from any cause, kali phos. is the only true remedy. To my mind this remedy is the most wonderful curative agent ever discovered by man. Let the over worked business man take it and go home good tempered. Let the weary wife, nerves unstrung from attending to sick children or entertaining company, take it and note how quickly the equilibrium will be restored and calm and reason assert her throne.”

I can endorse what has been quoted above from many cases treated with this remedy.

Among the direct indications may be mentioned brain-fag from over work; depressed spirits; irritability, nervousness, hysteria; looking on the dark side of life, easy to shed tears and moody forebodings; (some of these symptoms resemble pulsatilla symptoms); insanity; paralysis in any part of the body—the chief remedy; tongue coated brown, dry, with offensive breath; wasting diseases when putrid conditions prevail. This drug covers the whole field of neurasthenia, but there may be other drugs indicated at the same time.

With kali phos. in connection with magnesia phos. I have certainly worked wonders in cases of paralysis, and have accomplished more for my patients who have been so unfortunate as to suffer from this malady, than with all other drugs I have ever used.

Pardon me if I cite a case or two.

G. H.—A young man who had been in Cook County Hospital for six months and who had been under the care of a reputable physician all this time for
paralysis. The patient was finally pronounced incurable and about to be sent to Dunning, as an incurable, when a lady friend of the patient prevailed on the authorities to allow her to have him sent to Yorkville, Illinois, where I was at that time residing. About a week after he arrived in the village, a neighbor to the family where he was staying called at my office and told me of the case and urged me to go and visit the young man and do for him what I could, and if I would donate my services he would pay for all medicines used, stating that the patient had no means and was an orphan. I consented to go. On arriving I was confronted with one of the most pitiable conditions it had been my lot to see. The patient, poor in flesh, was absolutely helpless so far as doing anything for himself was concerned. His arms and legs were useless to him and seemed to be in the way. His hands and wrists were out of shape as were his legs and feet. He could neither feed nor dress himself. Could move neither hand nor foot and was as helpless as a baby. He could sit propped up but could not in any manner help himself. He could talk some and eat some when soft foods were put into his mouth. It was certainly an unpromising outlook, and I sincerely wished I had not promised to see him. I felt that he was beyond human aid and told him that it was exceedingly doubtful as that I or any one else could help him, but if he would consent to a long period of treatment I would make an effort to help him some, and to this he readily consented; the case of a drowning man catching at a straw.

I prescribed for him kali phos. 3x, five grains every four hours, and magnesia phos. 3X, five grains every four hours, alternating with the kali phos. The medicines were faithfully administered to him from very early in the morning till very late at night. In about a month he could hold knife and fork or spoon and feed himself, or hold a cup, with the handle, to drink from. In two months he could walk behind a chair, pushing it before him, and could dress himself, buttoning his clothes and tying his shoes. Awkwardly, of course, he did it. In ten weeks he was walking wherever he chose—slowly and deliberately—and at the end of three months from the first dose of medicine he went to work and could carry a ten quart pail of water in each hand. While his hands and feet were not yet in perfect shape they did not bother him very much and he could use a pen or pencil to write with. At that time I left the town and I have never seen him since, but I heard, more than a year afterwards, that he was still working and feeling fine. There was no other drug used from first to last of my treatment. I asked him if he knew what he had been taking at the hospital, and he stated that what was written on the piece of paper and left on the stand at the side of his bed, from first to last was "strych. phos." and did not know what that was but supposed it was some kind of sulphur. I combined the magnesia phos. with the kali phos. in this case because I noticed at times some slight twitchings of the muscles.
of the face although they were not severe.

Every case of paralysis I have had to treat since that time I have treated with these two drugs with universal success. I have seldom used any other remedy. Not that they will cure all cases of paralysis, for no drug or combination of drugs will cure every case of any disease. But certainly these two drugs will do more than any drug or combination of drugs that I have ever used in this condition. I have treated many cases with universal success. Do not be too impatient as it takes time in all of these cases.

Some cases of paralysis are caused by impingement of some nerve or nerves and must be mechanically relieved. But, I am speaking of medicinal cases. There are many cases of neurasthenia that no medicines will remove. No one would expect to relieve neurasthenia caused by an adherent foreskin or hood of the clitoris, contracted sphincters or lacerated cervix, or any other like condition with medicine, but after mechanically righting these conditions, I always follow up with kali phos.

I always think of kali phos. in all fevers where we have bad odor from the breath and from the discharges which are usually caused by phosphoretted hydrogen set free from nerve fluids. Kali phos. will in most cases correct this condition in a short time. I do not treat typhoid fever without administering this drug from first to last. It moistens the tongue, quiets delirium, strengthens the heart and acts for the general well being of the patient.

This drug is one of my standbys in diabetes mellitus, where the patient is sleepless, nervous and voraciously hungry. I will have cases of this disease to report later.

The dose of this drug is from one to five grains of the 3x trituration in solution, powder or tablet every two to four hours.

CACTUS GRANDIFLORUS
FINLEY ELLINGWOOD, M. D., CHICAGO

This remedy has been brought conspicuously before the profession at large during the past few months, by statements made in the Journal of the American Medical Association by the Council of Pharmacy and Chemistry concerning the concentration known as cactin.

These gentlemen, who stand high in the regular profession, but who have had no clinical experience whatever, with the use of cactus, have conveyed the idea that this valuable remedy occupies an inferior place in therapeutics. By so doing, they have done the profession and the people themselves an incalculable amount of harm.

Probably twenty thousand physicians have been using this remedy for many years, with results that are impossible
with any other single heart remedy, or I believe I am safe in saying, any combination of heart remedies; but these have not belonged to the faculty of the regular school and have been ostracized through the prejudices of that school, and their observations have not been given the credit they deserve.

On the other hand, persons whose names are conspicuous in the profession, have ventured statements on this remedy when they too have had no practical experience with it, and these statements are quoted as authoritative. This is certainly unjust and misleading.

The plant is known under the various names of night blooming cereus, large flowering cactus, vanilla or sweet smelling cactus. The flower is from eight to ten inches in diameter, opens after sundown and fades the next morning after sunrise.

During its existence, there is hardly any flower of greater beauty or one that makes a more attractive display. The calix is dark brown on its exterior, inside it is of a splendid yellow color, and when open appears like the rays of a star.

The cactus is mucilaginous and yields a sticky juice when pounded in a mortar. The stems form a viscid pulp. It yields its medicinal properties to alcohol alone. The dose of the fluid extract is from one to twenty minims. A tincture, of a light green color, is prepared also.

Of this, from five to thirty minims is the dose.

Because Lloyd Bros. have made a specialty of the fluid medicine from cactus, we have learned to use this preparation — Specific Cactus — in preference to any other, as it is invariable in its action and positively reliable. Those who have used the concentration which is called cactin, claim to have obtained results uniform with those obtained from the fluid preparation. Those who have used cactus in the fluid form are confident of the superior activity of the remedy in any form.

In the use of this remedy, if good results are obtained, a good preparation must be used. It is difficult to get the true species of cactus and others have been substituted for it. Often a tincture recommended as of cactus grandiflorus has been prepared from some of the inferior or inert cacti.

The dose of specific cactus varies from a half minim to two or three minims. However, no toxic effects have been reported, and there are observers who claim to have obtained results from doses of from five to thirty minims of cactus, which have not been obtained from a smaller dosage.

A foreign writer has made some observations in aortic lesions with faulty compensation. He prescribed this remedy in much larger doses than are usually given. Onehalf dram, three
times a day, demonstrated to him a recession of the cardiac dilatation.

The conspicuous symptoms were dyspnea, arhythmia and ascites. In my own experience, I have obtained desirable results always from a maximum dose of from two to three minims.

While we claim that there is but little, if any, toxic effect from the remedy, if this agent is prescribed when there is violent action of the heart, from a temporary increase of the nerve force, inducing irritation or palpitation, these symptoms may be increased by the use of this remedy. It must be prescribed in accordance with its indications and with some care as to the proper dosage.

In its physiological action, this agent stimulates the vasomotor system, the ganglia of the sympathetic, and directly influences the nutrition of the heart muscle. It increases the musculomotor energy, elevates arterial tension, increases the height and force of the pulse wave. This is accompanied by increased heart action through stimulation of the spinal motor centers, the activity and general tone of which is permanently improved.

It has a direct influence upon the central nervous system, regulating the action of the sympathetics, whatever the perversion. Acting directly upon the cardiac plexus, it regulates the functional activity of the heart. It is the heart tonic, par excellence, as it produces stimulation and actually increases nerve tone through improved nutrition of the nervous system and of the muscular structure of the heart.

It produces no irritation of the heart muscle as strophanthus does, nor, in proper doses, does it produce gastric irritation or a cumulative influence as digitalis does. It increases the contractile power and energy of the heart muscle through the cardiac ganglia and accelerator nerves.

It directly, and with much positiveness, improves the nutrition of the heart, strengthening the muscular power and improving the condition of the valves. On very many occasions I have been able to watch the progressive disappearance of valvular murmurs, from the action of this remedy.

Specific Symptomatology—Scudder gave as the directest indication for cactus, pain in the heart of a restrictive character, as if the patient were bound with an inflexible bandage. Feebleness is the first, strong, suggestive point; impaired action with insufficient force; irregular or intermittent pulse with feebleness and violent action from functional disorder.

These symptoms are accompanied with dyspnea, weight, oppression in the chest, a sensation of restriction around the chest, or perhaps around the heart, with anxiety and apprehension of danger or death, nervous disorders with heart complications, hysterical phenomena, an over-strained or over-
worked heart and tobacco heart.

It is promptly and directly serviceable in the treatment of the feeble heart of the aged. With these, it temporarily restores tone, promotes normal functional activity, does away with the symptoms of oppression, and increases the general nerve tone and materially promotes the action of the remedies which are prescribed conjointly with it as a nerve tonic.

It is useful in functional irregularities from any cause. Unlike digitalis, it reduces gastric irritation and relieves heart symptoms dependent upon this as a cause, or upon faults of digestion.

In its general influence, for breadth of action, for specific directness, for reliability, smoothness and general trustworthiness of action, this agent takes precedence over other heart remedies. Given during the progress of protracted fevers which show a tendency to induce heart feebleness, with, perhaps, ultimate failure this agent certainly exercises a splendid, sedative influence. I made this observation twenty-five years ago, and during the years that have passed, I have noted a number of writers who have made the same claims.

Rubini, of Naples, claims that it is almost the counterpart of aconite, differing from that remedy in that it increases the strength and tone of the nervous system, instead of inducing the paralyzing influence of the latter remedy. Whenever there is a rapid and feeble pulse, a fluttering pulse, regular or irregular, which points to a weak and exhausted nervous system, it makes no difference what has induced that condition, this remedy should be given in frequent small doses of, perhaps, one minim.

Under these circumstances, where there is a high temperature, the influence of the remedy in reducing the temperature is unquestionably apparent. None of our older writers attribute active, stimulating properties to this remedy. My observation is that it enforces the action of the heart at once, in a manner highly sufficient and satisfactory, and yet unlike that influence induced by strychnin or digitalis.

It brings about a condition in which the actual strength of the heart is apparent in the pulse wave and in the pulse beat. There is no doubt but that it is a most dependable remedy when shock, anesthesia or asphyxia from any cause, has induced sudden heart failure.

In organic heart disease, where there is threatened failure of compensation with valvular lesions, where the heart is irregular and intermittent in its action, and where regurgitation murmurs are distinct, this remedy will accomplish a great deal of good. It gives the patient a sensation of improved health and strength, and removes the unpleasant heart symptoms.

It may be given -in nerve exhaustion and in simple forms of paralysis. Also
where, from nervousness, there is a headache on the top of the head or in the occipital region. It is of value in endocarditis and pericarditis, especially where from deficient oxygenation, the respiration is labored and the face has a purplish hue.

I have urged its use in heart weakness following the use of tobacco and cigarettes, especially in those cases where the symptoms have developed rather suddenly in young men; also where heart feebleness resulted from over-muscular action or from masturbation.

Dr. Lydia Ross, of Massachusetts, urges this remedy in certain forms of oppressive headache occurring upon the top of the head, not uncommon at the menopause, resulting also from uterine malposition and congestion. It is especially valuable in the hot flashes which are so disagreeable during the climateric. Small doses are advisable at that time and their influence is often a surprise in controlling this otherwise intractable condition.

Helleborus niger is an excellent remedy for this condition and they may sometimes be given in conjunction or alternation. The melancholia, nervousness, irritability of temper, hypersensitiveness, neuralgia, vague fears and fancies present during the menopause, are all influenced favorably by cactus. Its direct influence in strengthening the nervous system and in toning the heart and circulatory organs, underlie its influence upon these conditions.

Other conditions common to women, relieved by this remedy, are cerebral congestion with weight and pain in the occiput or in the vertex, numbness of the limbs, cough at the supra sternal notch, pain behind the sternum, fear of death, general plethora and congestion, irregularity of the menses consisting of a flow too early, too dark and thick, too abundant—a flow which ceases upon lying down, with an inability to lie upon the left side, demand its use.

Dr. Lyman Watkins confirms most of the statements made by Dr. Lydia Ross on its action in hysterical conditions, and as a remedy to relieve the functional disturbances which the heart exhibits from menstrual disorders. He believes it to be a most valuable remedy in the rapid and feeble heart-beat of anemia and chlorosis, greatly facilitating the influence of other indicated remedies.

I have for five years been observing the action of this remedy in the treatment of subnormal temperature. In every case that I have used it I have obtained some results, in some cases very excellent results. It may be given in doses of two minims every two or three hours if there is no excess of heart action, and it will not only improve the action of the heart, but it will improve the functional operations of the nervous system, the stomach and the intestinal tract.
SOME INTERESTING CLINICS
F. A. PINELES-MONTAGU, M. D.,
DRURY, NEW ZEALAND

PANCREATITIS:—In October, 1900, a
gentleman, W. N—, aet. 52, called on
me for treatment. He stated that for
the past three years he had been in bad
health, had spent much money, and
had taken gallons of physic, having had
a great many doctors. One treated him
for dropsy, another for gout, another
for rheumatism, and another for heart
disease, each one finding a different
disease. I found the temperature and
pulse normal; heart fair, but weak;
lungs normal. Slight swelling and great
pain on pressure in the region of the
pancreas, intensified by coughing. He
stated that there was a feeling of
nausea after food. The bowels
constipated, tongue clean, skin
jaundiced, general anemia, emaciation
and debility, and both legs slightly
swollen from knee to ankle. There was
great despondency.

I prescribed:
Caffeine citratis drs. 2
Tinct. ferri chlorid dr. 1
Tinct. nux vomica dr. 1
Aq. q. s ozs. 4

Sig: One dram four times each day.

He came to me the following week and
stated that he felt better, but that the
medicine caused constipation. The
swelling in the legs had disappeared.
His skin was of a more natural color;
depression gone; appetite and sleep
good; no pain or swelling in pancreatic
region. He also stated that the day after
taking the medicine he passed a large
clot of coagulated blood about the size
of his fist, and after passing it, he felt
greatly relieved. I saw him every week
for two months and kept him on the
same mixture. He gradually recovered
his usual health and put on flesh and at
the end of the two months I discharged
him as cured. The same week that he
came down for the last time he stated
that he had walked 25 miles, which he
had not been able to do for some
years.

For the constipation I prescribed: Pil.
veg. cathartic (U. S. P.), one pill pro re
nata.

LEUCOCYTHEMIA:—On one Sunday
evening in Aug., 1901, I was hurriedly
called out to attend Mrs. B— act. 40.
Her husband stated that for the past
few days his wife had an attack of
indigestion. Could not keep anything
on the stomach and sometimes
vomited blood. She felt very weak and
exhausted and was daily becoming
paler in the face, and yet she was
getting stouter at a certain part, but he
did not think that she was pregnant as
her youngest child was aet. 19. I found
my patient in bed and vomiting. I
immediately administered tr. nux vom.
5 drops, water 4 drams, which
immediately checked it. On
examination, I found temperature 100,
pulse 99, small and weak, first sound
of heart weak, palpitation. The liver
was greatly enlarged, the spleen was
also slightly enlarged. There was
excessive perspiration. The urine had a
strongly acid reaction and of high specific gravity, uric acid in excess. There was amenorrhea, slight diarrhea, thirst, asthenopia and nervousness. I prescribed

- Tinct. nux vom drs. 2
- F. e. pulsatilla dr. 1
- F. e. cactus grand. aa dr. 1
- Aqua q. s ozs. 4

Sig: One dram every four hours.

I attended her for ten days and the mixture had good effect from the first. My patient so far improved under my treatment that she was able to leave her bed and take short walks especially to the railway station, where one day she left by train and at the same time left her doctor in the lurch, for I have never seen her since or my fee either. Such is life. This is one of our incurable diseases and lasts from six months to seven years. It is a very rare disease, except perhaps in malarial districts. In this disease, death may take place gradually from asthenia and exhaustion and frequently is preceded by delirium, stupor and coma, or by syncope; or more speedily as the result of hemorrhage, diarrhea or complications. The most frequent fatal form is epistaxis. Internal hemorrhage may also cause death, especially cerebral. The most important complications are: Pleural or pericardial effusions, pneumonia or bronchitis, and venous thrombosis, which in the male may take place in the penis and cause persistent erections.

**ECHINACEA:**—On July 16th, 1901, about 9:30 P. m. I was called out to see a Mrs. M—, aet. 30, married. Her little boy stated that his mother had run a sharp fish bone into her hand, and her arm was very much swollen, and she was in great pain. When I arrived I found the lady in great agony. She stated that she had accidentally run a fish bone into her hand just below the fleshy part of thumb, but had taken it out and washed the part, thinking that it would be all right. This was at dinner-time, noon. I found the hand and arm, to the shoulder, greatly swollen, almost purple; there was also a large tumor under the armpit. I wrapped the whole in cotton wool and saturated it with echinacea 1 part, aq. 4 parts, and covered it with oiled silk, and told her to keep the part wet. I also gave her echinacea 10 drops, water 1 dram, every 20 minutes until the pain was relieved. After the first dose, she experienced a tingling and pricking sensation all over her arm. After the second, a warm sensation with the pain slightly lessened, and after the third dose the pain had almost disappeared.

I called the next day and I found that she had slept fairly well. The pain had not returned, the swelling in hand and arm and tumor had also disappeared, there was a slight swelling at the base of the thumb which also disappeared in a day or two. Being a delicate woman her nerves were unstrung, so I gave her
Sp. cactus dr. 1
Sp. nux vom drops 10
Aq. q. s. Ozs. 4

Sig: One dram every three hours.

I saw her a week or two afterwards and she declared she was in perfect health. I heard that she had previously called in another physician who had advised operation, but she declined, and as a last resource sent for me. I always like to keep a supply of echinacea by me, as I have found that is it a splendid drug and does its work every time, both locally and internally.

SYPHILIS IN INFANCY.—This disease in infants is usually due to heredity, an instance in short of the children suffering for the sins of the parent. Occasionally, the disease is inoculated by sucking the mammae of a diseased woman, or by vaccination from a diseased child. A child born of syphilitic parents, and in whom the disease therefore exists congenitally, shows symptoms of coryza, snuffles, especially when asleep; has various forms of skin eruptions, especially around the mouth. It may be born well nourished and healthy, but gradually begins to show the above symptoms. The voice becomes hoarse, suffers with nasal catarrh, with herpes on the lips caused by the catarrhal mucus, the skin of the lips becomes fissured, the streaks radiating from the corners of the mouth. The gluteal regions become the seat of eruption. The child suffers with asthenopia and conjunctivitis or blepharitis; there is gradual emaciation and atrophy. The skin peels off and becomes thickened on the palms of the hands and soles of the feet. The child has a pale and pasty complexiion, is peevish and cries if moved. Pyrexia occurs occasionally, also profuse nocturnal perspiration. The urine is thick and deposits phosphates on standing. As a rule the child is constipated and digestion is impaired. As the child grows older the wrists, ankles and other joints become deformed; it is knockkneed or bow-legged. The chest assumes the so-called pigeon-breast. The nose becomes misshapen. The cranial bones do not close for some time; this disease is very often associated with hydrocephalus. The abdomen is usually distended with flatulence. Diarrhea and bronchitis are common, also pneumonia. The teeth become irregular. These deformities are seen when the child has reached adult life, if it is not carried off before that period. If the mother is unhealthy the child should either be suckled by a healthy wet nurse or hand-fed and should be given small quantities of farinaceous foods, but I should advise that plenty of milk mixed with a small amount of liq. calcis should also be given with the food. When the child is about eight months old, it may have small quantities of beef tea, mutton and chicken broths in addition to the first diet. The gluteal and axillary regions should be rubbed once a day with unguent hydrastis (fl. ext. hydrast, dr. 1, adeps lana hydros. oz. 1. Mix) and the entire body should be rubbed once a day, preferably after a warm
bath with ol. morrhuæ. The bowels should be opened with pulv. rhei comp. or if it has diarrhea, with pulv. gray comp., bismuth subnit. and salol combined. The following mixture should also be given at the same time for a lengthened period:

Potass. iodidi gr. 10  
Syr, ferri iodidi drs. 4  
Aqua q. s ozs. 4

Sig: One dram three times each day up to 2 years old and two drams over that age.

If the child is still weak and emaciated after it is two years of age give this emulsion; especially if it is subject to phthisis, bronchitis or any weakness of the chest.

Ol. morrhuæ ozs. 3  
Liq. potassae drs. 2  
Liq. ammon fort drops 8  
Ol. cassia drops 4  
Syr. simplex oz. 1

Sig: One dram three times each day.

Other symptoms must be treated as they arise.

**Brief Contributed Articles**

**ERYSIPelas MIGRANs**

E. A. DAVIDSON, M. D., CHICAGO, ILLINOIS

Having read a good deal of late about erysipelas, in the different medical journals, and noticing with considerable interest the successes and failures of my confreres, I thought I would contribute a report of a case of erysipelas migrans that I lately have had.

I was called to see a young man, thirtyfour years of age, tailor by trade, whose face and neck were badly inflamed and swollen, showing a typical erysipelatous condition, which had spread around his neck and shoulders.

He had tried two doctors before he called me in. His pulse was 140 and his temperature 105.5ºF. It was certainly a bad case—the worst I have ever seen of this disease. I gave him the following prescription:

Specific aconite minims 6  
Specific belladonna minims 6  
Specific echinacea drams 6  
Cascara evacuant drams 1½  
Elixir simplex q. s. ounces 4

Mix. Sig: Teaspoonful every two hours.

On the face I applied a wet dressing of a saturated solution of boracic acid. I soon got his systemic symptoms under control, but the erysipelas kept
spreading. I applied various solutions, among others, a strong solution of permanganate of potash, also the tincture of chlorid of iron, but nothing seemed to do any good.

The face got better, but the erysipelas spread down to the nipple in front and to the angle of the scapula on the back. At last I mixed equal parts of the tincture of chlorid of iron and the tincture of iodin, and painted this with a camel's hair brush. This worked well and I soon got the disease under control.

At first I painted it on just about one-eighth or one-fourth of an inch beyond the margin of the inflammation, but this was not enough and radiation extended from the margin at various points. Then I painted it on a full inch beyond the margin. This stopped the spreading effectually.

A peculiar feature of this case was, that while the disease kept spreading, the earlier inflammation healed up and the skin peeled off, leaving a healthy surface underneath. At one time during the progress of the disease, the glands in the axillae and those of the neck began to swell. The addition of phytolacca to the treatment corrected that complication.

On the third day the pulse was 100 and the temperature was down to 102.5ºF. From that time on the temperature gradually decreased until the ninth day of my treatment, when it became normal, and the day afterward it was subnormal—was down to 97º.

On the twelfth day I discharged him cured, and both the patient and myself were well satisfied with the outcome.

SODIUM HYPOSULPHITE AS A PROPHYLACTIC IN SMALLPOX
C. B. DEAN, M. D., WAKENDA, MISSOURI

I have depended on sodium hyposulphite to ward off smallpox among those who had been vaccinated successfully, and unvaccinated as well, and it has never failed to prevent the eruption in any case, where administered within three days after the exposure to contagion. My attention was called to its use by an old prospector in the mountains.

One morning early, he called at my office with the question, doctor, can you tell what is the matter with my face?

His face was well covered with the characteristic variola eruption. I answered accordingly and advised that he go to his shack and arrange for proper care while the case lasted. He replied that all he wanted was to know whether or not he had smallpox, and if such were the case he could handle it easily, and all he wanted was a pound of sodium hyposulphite. He went to the drug store and procured the medicine, went to his room, made a solution of about 60 grains and drank it. This he repeated often enough to keep his bowels moving freely as long as there was any fever.
He also prepared a saturated solution of the hyposulphite and used it as a wash for his face, using it as hot as he could stand it every two or three hours, at first. After two or three applications, the eruption began to show signs of subsiding on all parts to which the wash had been applied. There was no formation of pus in any portion of the eruption treated locally; where not treated locally the pustules ran their regular course, filled and desquamated in due time. On the parts treated locally, the eruption turned bluish and never filled; there was only a slight scaling off of epidermis.

This set me to thinking, with the result that I determined to give sodium hyposulphite a thorough test at the first opportunity. The opportunity came three years later.

A visitor came to the residence of one of my patrons, stayed over night, woke up with high fever and muscles aching severely, thought he had lagrippe and sent for quinine and whisky; this he took freely all day; result no better; next morning he was still suffering and found his face covered with pimples, as he expressed it. I was called at this stage, diagnosed smallpox, put him on the hyposulphite, but could not get him to take it freely, or submit to the hot bath after the first; there was very little pus in the facial eruption but a good crop on other portions of his body. He made a rapid and good recovery. Now comes the important point—so far this has been written for the purpose of explanation.

The family consisted of four persons, the man and his wife, who had both been vaccinated, a sixteen-year-old boy, and a girl of fourteen, neither having been vaccinated.

I at once put all four on twenty grain doses of sodium hyposulphite, and kept them repeating the dose three times daily. At end of ten days the man and woman had the characteristic fever with the aching limbs and head. This lasted forty-eight hours, then subsided slowly without any eruption. The woman had fever, headache, sore muscles and aching limbs four days, when the symptoms passed away without any eruption.

The boy and the girl both failed to have any symptoms of fever, and were not affected in any way.

This whole family lived in a small threeroom house and all took turns caring for the visitor. I am confident that sodium hyposulphite will abort smallpox if the treatment is begun within two or three days after a known exposure. It has been used in several other cases with equally good results.

**UTERINE IRRIGATION, ETC. IN MENORRHAGIA**

CHARLES WOODWARD, M. D.,
CHICAGO, ILL.

In answer to numerous inquiries concerning the intrauterine irrigation method for treating menorrhagia and
metrorrhagia, conditions so frequently met in general practice, we should first consider the etiologic factors which predispose the system to these conditions.

- First, anemia.
- Second, retained membranes and decomposed blood following abortion.
- Third, endometritis and uterine atony during the menopause.
- Fourth, polypoid endometritis and overwork.

First, in anemic patients the blood is thin and the vessels relaxed, without sufficient tonicity to prevent hyperaemia and hemorrhages and especially metrorrhagia. These cases should have the uterus cleansed out every third day and specific belladonna and hydrastis should be prescribed.

Second, retained membranes and septic substances result in a determination of blood to the uterus. This condition requires the uterus to be cleansed every 48 hours with a 50 percent solution of peroxide of hydrogen, alternated with a 5 to 6 percent solution of any good nontoxic antiseptic, and thoroughly swabbed every fourth day with a solution of equal parts of carbolic acid and tincture of iodine and then followed immediately by the above treatment.

Third, the presence of endometritis and atony of the uterus during the menopause has a tendency to ulceration of the endometrium and to induce menorrhagia. These patients usually have deficient elimination from the skin and bowels and a uterine exudation. In this condition the uterus should be swabbed every fourth day and followed immediately with the cleansing treatment every 48 hours as given for controlling hemorrhages occurring after abortion. Then a solution of sulphate of iron, grs. 3 or 4 to the ounce of water, should be thrown into the uterus to contract the vessels and heal ulceration; this finishes a single treatment. The skin and bowels should be stimulated to normal action and these remedies prescribed as follows:

- Specific veratrum, 1/2 dram;
- belladonna, 10 drops;
- dist. ext. hamamelis, 10 drams;
- aqua, q. s., 4 ozs.

Sig: One teaspoonful in water every 2 or 3 hours, as necessary to control the determination of blood.

Fourth, if the diagnosis is definitely clear that the hemorrhage is due to a polypoid endometritis the curette may be used to remove the vegetative growths, then the swabbing and irrigation treatment will complete the cure.

Overwork: Advise less work and treat similarly to the other cases.

These local treatments can be repeated every 24, 48 or 72 hours, and at any time before, during or after the menstrual period and especially...
whenever the flow continues too long and the loss of blood is greater than normal.

It is scarcely ever necessary to cleanse the uterus oftener than every 48 hours, unless membranes are retained, when they should be removed.

The best solution for restraining menorrhagia, after the uterus has been swabbed and washed out with the peroxide and other antiseptic solutions, is sulphate of iron, grs. 2 to the ounce of water, for women under 40 years of age, and 4 grs. to the ounce for those older. Observing the age, specific hydrastis and colored pinus canadensis form excellent solutions, 10 to 20 minims to the ounce. The dehydrating pack should be omitted until the menorrhagia is under control.

**LYCOPODIUM**

F. C. HARRISON, M. D., CHRISTOPHER, ILLINOIS

Lycopodium is a remedy that I consider an important one in the narrow field of its operation, and one which I feel has been neglected. The especial indications to which I refer are not of frequent occurrence, but its promptness in acting upon these indications, justify us in keeping the remedy where it can be easily obtained.

There are occasionally cases of fever which are quite persistent, in which the fever is worst about the middle -of the afternoon, with a remission in the morning, but no complete intermission. There is no marked periodicity which would point to malaria.

With this fever, it will be found that the urine is scanty and of a dark red color, depositing a sediment which stains the clothing a pinkish color, is very tenacious and not readily washed out. In this class of cases, I have found lycopodium a remedy which will change the entire urinary condition and will assist materially in controlling the fever.

I was called last winter to see a boy ten years of age, who was taken with convulsions. In this case, with a rise of temperature, there were symptoms of cerebral and spinal irritation. I gave gelsemium and controlled the convulsions, and the fever to a certain extent, but a condition soon developed in every way similar to that which I have just described.

I prescribed lycopodium and within twenty-four hours there was a marked improvement in the entire condition of the patient.

Another case was that of a boy sixteen years of age, to whom I was called in consultation. The fever had been running a long time and the urinary condition was persistent. I advised lycopodium in this case, stating to the physician that I was sure that it would do much in controlling the fever, as well as in overcoming the urinary conditions.
The prescription used in this case was twenty drops of specific lycopodium in four ounces of water, a teaspoonful every two hours when awake. The improvement was apparent from the first. The medicine was renewed on the third day and there was a satisfactory recovery in a short time.

As the editor of THE TERAPEUTIST has often said, a single remedy of known efficacy, when applied to a specific condition, is indeed very important when that condition is met, and this is one of those remedies.

COMMENT:—The indications named above may be depended upon as quite reliable when prescribing this remedy. The urinary symptoms may appear during the course of dyspepsia, or from faulty action of the stomach or intestinal tract of a chronic character, and the remedy will thus assist in relieving constipation, palpitation, and regurgitation from the stomach of acids or of undigested food.

It is especially useful in indigestion where there is a chronic catarrhal condition of the stomach with its characteristic symptoms, and can be given for the uric acid diathesis whenever it is present, especially if there are symptoms of rheumatism.

Catarrh of the bladder, whether in adults or children, with painful urination, if accompanied with uric acid deposits, or with urates or triple phosphates, will often be relieved with this remedy, and if congestive headaches or dizziness are present from these faults, they will disappear from the action of this remedy.

INJECTION ANESTHESIA AND ITS CRITICS

G. H. CANDLER, M. D., CHICAGO, ILLINOIS

The success of the new anesthetic—hyoscine, morphine, cactin compound—seems to have no limit. The more it is tried the greater the demand and the more enthusiastic the reports from those who utilize the formula in their surgical and obstetrical work. Dr. Abbott informs me that he has now placed in the hands of the profession at large over two millions and a half tablets. This would probably mean about one million anesthesias.

Up to the present, despite the facts that the anesthetic is an entirely new thing, used under all sorts of conditions by all sorts and conditions of men, one death only has been charged to H-M-C. Enquiry proves that in this solitary fatality, death followed, not the anesthesia but the swallowing of his tongue by the patient, who was carelessly left by the nurse. This accident occurs during anesthesia quite often, regardless of the anesthetic used, and the unparalleled safety of hyoscine, morphine, cactin would seem to the observant physician established beyond question.

Certainly we must discount seriously the statement made by the younger Wood that this agent would cause the death of one patient in each 221 anesthesias. There is a striking difference between one death in 221
and one in one million anesthesias. Neither ether nor chloroform, even today, when their use is so thoroughly understood, can show such a record, and it would be invidious to compare the fatalities which followed their use in the early days with this showing. There seems to be absolutely no disapproval of the new anesthetic save the almost venomous opposition offered to Dr. Abbott and his product alike by the group of men connected with the Journal of the A. M. A. and the Council of Pharmacy. The attacks made by these gentlemen upon H-M-C reveal an animus which entirely prevents a fair presentation of the subject.

The main attack of late has been made on cactin—earlier hyoscine hydrobromide received some violent but mistaken criticism. It is unfortunate that most of the testimony in regard to the therapeutic efficacy of cactus comes from eclectic sources, and these the council finds it convenient to ignore. I fancy the Council will find it rather difficult to convince the eclectics that cactus is “inert” and useless, simply because they failed to find an alkaloid or other active principle in it. It seems difficult sometimes for more than one idea to find lodgment in a man’s brain. The Council made a number of laborious experiments, and determined that cactus could not replace digitalin and strychnine in therapeutics.

If they had turned to the eclectic literature upon the subject, or even to the few reports that have been made on cactus by the old school physicians, they would have found that this was exactly what the advocates of cactus have always held. If one of these critical theorists would relinquish his preconceived ideas and try cactin clinically he would within a week discover that its action upon the heart is promptly and positively apparent.

The principal object of this article is to call attention to the “impartiality” and scientific acumen of this Council of Pharmacy and Chemistry. It is well to recollect, however, that this body is composed exclusively of chemists, that there is not a single practising or practical physician in it, excepting Dr. Simmons, and so far as is known Dr. Simmons himself has never had any experience in medicine save along homeopathic lines.

There is, therefore, not a man on the Council who is really qualified to pronounce upon any question of therapeutic efficacy or clinical observation. Their weakness in this direction, however, does not seem to have penetrated the consciousness of the members of the Council, who have given their judgment in this matter from the standpoint of the pharmacist purely.

In very striking contrast to their presentations are the reports emanating from regular, homeopathic and eclectic practitioners alike. In these not a trace of sectarianism or partisan spirit is shown, (why should there be?) but full credit is given the formula and
its originator, with a frankness and enthusiasm which must grate harshly upon the sensibilities of the Council whose ipse dixit runs so entirely to the other extreme on H-M-C anesthesia.

Reading the reports from perfectly competent men it seems inexplicable that any physician would allow prejudice or the “say so” of some self-constituted authority to deprive him of the enormous advantages offered by H-M-C. The output of the preparation and the steady stream of “repeat” orders prove conclusively that in this as in other matters the mass of the profession prefers to think for itself.

One cannot but hope that the triumph of this preparation will cause a thorough study of the vegetable materia medica by the physicians of the regular school. Eclectic physicians have for many, many years called attention to the inestimable richness of this field, the superior efficacy of the remedies obtainable therefrom. Alkalometry, with its insistence upon the exhibition of the “smallest-known-to-be-effective” dose of the always-evenly-effective remedy has given us over fifty well understood active principles, and the laboratory is continually giving us new alkaloids, glucosids or resinoids which, exhibited in definite quantity, give definite therapeutic results.

Medicine promises to become a positive science, and those who would obstruct us in our search for truth and positive therapeutic agents need better arguments and. more efficient champions than have made their appearance so far. Powdered cinchona bark served the Jesuit fathers, but we prefer quinine; ether and chloroform have an unquestioned value, but H-M-C bids fair to surpass them both in general utility and safety.

**NASAL CATARRH**

A. Z. CAPLE, M. D., ARGAS, INDIANA

In a recent issue of your valuable journal, I noticed a suggestion from a correspondent concerning the use of stillingia and echinacea in the treatment of nasal catarrh. The writer made quite a strong point on the curative effect of this combination in nasopharyngeal catarrh, claiming that its effects were very salutary.

When reading that article, my mind immediately reverted to a stubborn case I was then treating. I at once prepared a prescription which contained one ounce of echinacea and five ounces of the compound syrup of stillingia. Of this I gave a teaspoonful every four hours.

The gentleman now says that he feels better than he has for three years, and in addition to the relief he has obtained from the severe nasopharyngeal symptoms, he claims that the combination has cured him of a persistent urinary trouble, which was characterized by cystic tenesmus with constant diurnal and nocturnal urination.
Hoping these suggestions may be of benefit to other readers in the treatment of that stubborn condition, catarrh, I take pleasure in writing these few lines.

**PULSATILLA**

Pulsatilla is one of the most frequently indicated medicines in America. If you were to manufacture the pulsatilla subject, a full-fledged pulsatilla patient—if I wanted to produce a proving in a hurry I would select persons naturally sensitive, of a mild disposition, and of the blond type; especially those who are mild and gentle, that have the principles of plethora and easily excitable. Now, stall feed these patients. High living, sedentary habits, not much exercise. Feed them on rich food. If it is a woman, put her through, let her raise a good sized family, and as a result we have a state of nervous exhaustion. Weakness, tremulousness, full veins, disordered stomach—and these patients have full veins—always worse if the room becomes heated or close. They must be out in the open air. The whole venous system is engorged, and is so sluggish that it cannot carry on or return the blood to the heart rapidly enough and the patient needs to be stimulated by cold air; that contracts the caliber of the veins so as to favor the circulation of the blood back to the heart, and then they are more comfortable. —J. T. Kent in Progress.

* * * * * *

**Specific Symptoms**

During the present year, I have frequently met with the following conditions, occurring especially in children. I desire to know what remedies are especially indicated for these symptoms:

The child is irritable, either one or both of the cheeks has a bright red spot on it without any fever, there is a moderately dilated pupil, and a white circle around the mouth.

With the above symptoms, we have been having a number of cases of watery cholera, or a true gastro-enteritis, resembling somewhat that form of diarrhea which occurs in hot weather. With bottle-fed babies, it begins with vomiting of curded milk. Coincident with this, there are large Watery movements from the bowels. These symp toms may be accompanied

According to the census of 1905, the duration of life in Iceland is 61.8 years.

This is nearly double the mean duration of life as generally computed in civilized countries. In Sweden and Norway, which are the next highest, it equals about fifty years.

There may be some valuable lessons to be learned in the determining of the reasons for the superior health of people living in cold climates. It is certain that the real reason is not generally known.

* * * * * *

**Therapeutic Facts**

Single truths from many doctors and many truths for each doctor.
with some fever, although the temperature is not usually high.

What is the most directly indicated treatment of the above symptoms?

S. RINEHART, M. D.

COMMENT:—The circumscribed redness of the cheeks with the white circle around the mouth, point directly to intestinal irritation. While these symptoms are found in those cases where intestinal worms are present, they will quite commonly follow any intestinal irritation, whatever the cause may be.

While santonin is seldom used except as a worm remedy, it can be depended upon with positiveness in relieving this condition. From 1/4 to 1/2 grain three or four times a day is given to a two year old child. I have made it a custom to triturate it with the sugar of milk, and it is surprising how prompt its influence is.

The enteric symptoms, with the watery diarrheal demand the arsenite of copper. A tablet containing the 1/50 of a grain, dissolved in half a glass of boiling water, should be stirred until cool enough to administer. This should be given as hot as the child will take it, every ten minutes for from two to four hours, depending upon the severity of the symptoms. In fact, I have continued it from eight to ten hours, but it usually causes a marked improvement in the diarrhea in a few hours, when the doses may be given farther apart.

It may be necessary to previously evacuate the intestinal tract with a high, colonic flush, and if there is an inclination to vomit after curds have been expelled, some soothing remedy should be given to allay gastric irritation.

Aconite would be indicated for the fever, or very minute doses of colocynth if colicky pains are present.

Sore Nipples and Mastitis

In the treatment of sore nipples, nipples fissured or tender, or those which are apt to induce mastitis, I have been in the habit of using almost routine treatment, a formula which is made of

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Quantity</th>
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<tbody>
<tr>
<td>Alcohol</td>
<td>ounce 1</td>
</tr>
<tr>
<td>40 per cent solution of Formaldehyde</td>
<td>drops 30</td>
</tr>
<tr>
<td>Water</td>
<td>q. s ounces 2</td>
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</tbody>
</table>

Mix. Sig. Saturate with this a piece of sterilized gauze, and apply it to the nipples for half an hour three or four times a day. When removing the gauze, sponge the nipples with sterilized water and apply on lint an ointment of petroleum and subnitrate of bismuth. This can be wiped off each time before nursing the child. This course has been successful in preventing or curing every case of sore nipples in which I have used it.

In those cases where the breasts threaten to become inflamed, instruct the nurse to begin early and massage the breast with warm olive oil, beginning at the base and rub with considerable firmness directly toward the nipple. This might be done once in a couple of hours. Any extreme fullness of the breast should be prevented by the use of the breast pump when the child does not nurse.

W. S. SMITH, M. D.
**Tonsillitis**

For ten years I have used tincture of guaiac for tonsillitis, and I call it as nearly specific as any drug I can find. I have many patients who have as much faith in it as I have.

I put one teaspoonful in a glass of water and direct them to use it as a gargle every one-half hour, and take one teaspoonful every half hour unless it nauseates. If that is given as soon as the chill and pain comes it will generally abort it. Sometimes it appears necessary to give other medicine and I give:

- Specific aconite drops 5
- Specific gelsemium drops 10
- Specific phytolacca drops 20
- Water ozs. 4

Sig.: A teaspoonful every hour.

Sometimes I find a patient who will do as well on ammoniated citrate of iron as on the last prescription, if they are anemic and in a run down condition before the attack. The bowels should always be corrected if wrong and the kidneys also.

In the November number N. M. Cook advises aconitine for sciatica. I used it for neuralgia in the arm on one patient, for two or three months, and he improved very much. I believe it is good for such pain.

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**A Prophylactic Measure In Catarrh**

During the present year, I have been using formaldehyde in a peculiar manner for the prevention of catarrhal conditions. I add enough of the solution to a pail of water, so that the vapor in the rooms will not be irritating, and this is added to the water in the water chamber of my furnace, and from the heat of the furnace, is vaporized and diffused uniformly throughout the entire house.

I am convinced that it exercises an active influence in preventing the occurrence of catarrh, whether nasal or bronchial, and the many forms of cold which occur with the opening of winter.

GEO. R. WRIGHT, M. D.

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**To Prevent Subinvolution**

While I do not always approve of routine in the treatment of any class of cases, I have been in the habit of giving every patient, after confinement, beginning with the expulsion of the child, from eight to ten drops of a good fluid extract of ergot, every hour, for perhaps thirty-four or forty-eight hours, when the patient is awake.

While this course is not original with me, I have though it productive of good results and justifiable in most cases.

C. L. WAKEMAN, M. D.  
GEO. R. WRIGHT, M. D.
COMMENT:—It seems to me that the above course in every case, would hardly be demanded. There are two results to be accomplished with this remedy; one, the prevention of postpartum hemorrhage, and the other the securing of complete involution.

While the first result is being attained, the remedy will quite frequently so materially increase the after pains, as to make it necessary to administer some remedy for their relief. As to the latter in securing involution, I do not think a physician is justified in treating a condition unless it exists. If he is assured later that involution is not sufficient then, and then only, should he prescribe for that condition.

I should advise all physicians to consider every case by itself, as to whether ergot is demanded or not. I at one time made it an arbitrary rule to give, perhaps, twenty minims of ergot in all cases immediately after the expulsion of the head. Later I applied the above rule to that procedure, and considered the demands of each case, concluding the correct course to adopt was to use the remedy only when it was indicated.

I have obtained excellent results from the remedies which I used in preparing the patient for confinement, and from the previous influence of these remedies the normal processes have been carried on after labor, without any further assistance.

Passive Hemorrhages

I have treated a number of cases of passive hemorrhages with the use of very small doses of atropin, from the 1/1000 to the 1/500 of a grain every fifteen, twenty or thirty minutes for three or four doses, then every hour or two. This has resulted in a satisfactory control of some stubborn cases.

R. W. MCCULLOM, M. D.

Hamamelis in the Treatment of Hemorrhages

I desire to call attention to the use of as common a remedy as witch-hazel, in the treatment of hemorrhages. In severe cases of uterine hemorrhages, from any and every cause. I invariably administer it in puerperal hemorrhage. I prescribe thirty drops of distilled witch-hazel every fifteen minutes. I have also successfully used the remedy in pulmonary hemorrhages, although in those cases the intervals may be longer—from two to four hours when prescribed for more or less constant use.

B. H. BURD. V. S.

Three Facts

Carduus (Silybum) marianus is the remedy for varicose veins from pregnancy, or other cause. Add two drams of a strong fluid preparation to six drams of simple elixir and give one teaspoonful four times a day.

Ammonium chloride as a local remedy in rhus poisoning excels all others in effectiveness. It is free from offensive odor and cleanly to use. One or two drams added to a pint of water. Apply freely.

The dry oxide of zinc in powder applied to a soft corn will so affect the tissues that the “corn” can be picked out from the flesh and be thus gotten rid of.

S. J. SMITH, M. D.
Quinin in Rhus Poisoning

Concerning the treatment of rhus poisoning published in a recent number of THE THERAPEUTIST, I have confirmed on very many occasions the statement made by Doctor Webster, that moistened quinine applied over the inflamed surface, is a positive and reliable specific.

It is a prompt remedy, easy of access and of application.

DR. O. H. ROBERTS.

Hemorrhages

Nasal:—Plug or hold the anterior nares. Then have the patient lean forward with the head down. A clot soon fills the cavity and stops the flow in all but hemophiliacs.

Post Partum:—Introduce a speculum and grasp the cervix with a pair of strong vulsulum forceps. Make strong traction downward. This generally stops the flow while you prepare for the pack or for local applications.

J. H. LONG, M. D.

LEUCOCYTOSIS IN THE DIAGNOSIS OF CANCER

One of the diagnostic points in determining the presence of internal cancer, is the fact that leucocytosis occurs in from thirty-three to fifty percent of all cases. This may be the first indication of cachexia.

The nature and degree of leucocytosis varies with the proportion, size, rapidity of growth, and malignancy of the tumor. It occurs in high degree in carcinoma of the stomach, of the uterus, or of the intestines. Also where there is an involvement of the kidneys, pancreas, and thyroid glands in general.

The larger the tumor and the more rapid its growth, the higher is the degree of leucocytosis. These facts have been determined by Wyle and are reported in The American Journal of Surgery.

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It is stated by those who are apparently informed, that many Japanese physicians use charcoal as a general antidote to agents which have been taken into the stomach which will produce poisoning.

These observations, it is stated, have been farther proved by French physicians who claim that if powdered charcoal is taken soon after the ingestion of poison in very large quantities, its influence upon the poison will be noticed from the first.

A tablespoonful may be mixed with a little water and taken frequently in divided doses, the whole amount within one or two hours.

* * * * * *
The statement is made in The Medical Council, that a case of writer's cramp of fifteen years' duration was cured by the simple process of tying a piece of rubber tubing round the arm over the biceps muscle, morning and evening, for twenty minutes each time.

Within a week the improvement was permanently apparent.

* * * * * *

A recent writer suggests that a dressing be applied to warts and wart-like moles, of a two percent solution of pure carbolic acid. It is applied on a small piece of cotton immediately over the mole and covered with a piece of rubber protective large enough to cover all the dressing.

This is held in place by a bandage of adhesive plaster. It should be moistened once or twice every day. This will remove a mole or wart without a scar.

Letters

GANGRENE AVERTED BY ECHINACEA

Editor Ellingwood's Therapeutist:

I was recently called to see a man suffering from a cut on the leg, near the knee. The injury had been sustained four days before I saw him. It was during the hot period of July, and he had been lying out in a cow yard and the limb had received no attention. As a result, serious infection had set in. The limb was greatly swollen and was discolored—almost black in spots and very painful. The temperature was 104 degrees.

At this time some friends of the patient interfered and called in two other physicians, who immediately decided upon an amputation. To this the patient objected. By reason of my having practised in his family successfully for several years, he had confidence in my judgment, and ignoring the advice of the other physicians, requested that my suggestions be carried out in detail.

I enveloped the limb, from the ankle to the hip, in surgeon's lint, which I kept wet with a solution of echinacea, one part to four of water. This wet application was continued for fourteen days, when I discharged the patient completely cured.

I should like very much to enlarge upon the action of echinacea upon this class of cases, as it has certainly done wonders for me whenever there was blood poisoning, regardless of cause. As your journal is small and the space limited, I will not say more at this time.

I subscribe for THE THERAPEUTIST, believing it embraces the very essence (briefly told) of that which is good in all systems of medication. So far my faith is receiving constant confirmation.

C. S. WHITFORD, M. D.
RUBUS ODORATUS

Editor Ellingwood's Therapeutist:

I would like very much to have you publish in the next issue of the THERAPEUTIST something on rubus odoratus ("rose-flowering raspberry ").

My attention was called to this plant recently. Thus while it is an old remedy, it is new to me, and I think perhaps an invaluable one in diseases of the kidneys.

In looking up the rubus family I find that the rubus occidentalis, (thimble berry or mulberry) and the rubus odoratus, while they belong perhaps to the same family, their properties are different, the former being the black raspberry, while the latter, rubus odoratus, the flower being large and many being about two inches in diameter, fruit broad, thin and bright red, and to it are ascribed the principal diuretic properties, which has been very thoroughly demonstrated in the case of anasarca treated by it here. I never saw the case, but the physician in charge has kept me in touch with it.

We have another species of the plant, rubus chamæmorus (cloud berry), a small plant, which differs from the rubus odoratus. This is from 3 to 5 feet high. The berries of the latter are said to contain much sugar, citric acid and yellow coloring matter. This also possesses some diuretic properties, but is not to be compared with the rubus odoratus.

Some 5 or 6 weeks ago one of our physicians called to see me about a case of albuminuria in a young married woman. The tissues were full, and I guess from what he stated the abdominal cavity also contained an accumulation of the effusion. The urine when I examined it contained not less than 60 percent of albumen. The case had resisted all previous treatment, but yielded very readily to the influences of this plant, which I conclude yet is the rubus odorata. I can find nothing in all my library on the subject except what little I find in the American Dispensatory, page 1682 and 83, and not much at that. It states in this article that the plant is an active diuretic. I have never had any experience with it; never gave it any attention until the doctor spoke to me about it, and stated that the patient's father had gathered some of it, and was giving her an infusion of the leaves with very positive results.

I think too many of our old and tried remedies are being discarded for some modern ones, which largely are valueless, and the use of them largely experimental with only negative results.

This certainly must have some powerful diuretic properties, judging from the increased flow of the urine, which seemed to be augmented from the moment the remedy was first given in this case. I am trying to procure some of it, having a case in Columbus that has resisted all treatment, but I have not been thus far successful in
obtaining it.

I am very much interested in this plant, and hope to learn more about it.

G. S. FARQUHAR, M. D.
Newark, Ohio.

HETEROGENEOUS PRESCRIPTIONS
Editor Ellingwood's Therapeutist:

I feel as if it were my duty to enter a mild protest against the method of some of your writers who claim to be specific, in presenting some of the polypharmacal prescriptions which are there presented.

If they are specific prescribers, why do they present such prescriptions? The components of their formulæ are as numerous as the letters of the German alphabet, and the method does not deserve to be called specific. As such it would be a misnomer.

Under the title “Our Faith,” on the first page of the cover of our guide, THE THERAPEUTIST, there is enough to set every thinking physician to work to solve for himself a correct method of drug application.

It seems to me that it is the duty of every physician, whether he has been educated in specific methods or not, to study these principles very thoroughly, and to adjust the method to them, looking always for a greater success than he has ever been able to attain in the past.

I have taken THE THERAPEUTIST since the first number, and I assure you that I have been more than repaid by the many valuable, direct suggestions. These impress upon me the fact that the journal should be made a source of education in direct lines, to every reader, especially those who have not had a course of clinical training in these methods.

May the journal live long and make many true converts to these principles, is the best wish of the writer.

Yours, for a perfected knowledge of single remedies,

H. H. MORGAN,

COMMENT:—This letter, I regret to say, is justifiable from the character of some of the articles I have published; but I have thought, in giving this matter careful consideration, that I cannot prove our contention unless I do publish some of the heterogeneous prescriptions that are furnished me.

They are but few as compared with the host of direct suggestions, plainly specific, which we have published. Many of these writers are just taking their first lesson in specific drug action, and are earnestly seeking for the real truth.

It is a most unfortunate thing, and, I think, entirely unwarranted, that all colleges, of whatever school, have not for fifty years, been studying and teaching the direct action of single remedies in exact conditions of disease. How this has been overlooked for so long is a mystery, indeed, to those to whom its simplicity, directness and superiority are now so strikingly plain.

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Let each of us try for the coming year, to materially improve the knowledge of all, by contributing freely our direct, specific facts in the most direct manner possible.

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A writer in The Medical World reports a case of epilepsy which he treated with the use of verbena. He had some tablets made from the concentration, each of which was equal to 1/5 of a grain of verbenin.

At first he gave one of these three times a day; later he gave two three times a day, and increased each day until the patient was taking six tablets three times a day.

He restricted the diet, excluding a large part of the nitrogenous food. He reduced the amount of salt taken by the patient also, substituting a little sodium bromid, which he afterwards discontinued because he thought he observed unpleasant results.

He took special care of elimination and encouraged moderate exercise. For twenty-two months the patient was entirely free from epilepsy. Then upon overdoing, there was a slight return and the remedy was continued again. At the present time she has had no attack for two and one-half years, but takes large doses of verbena each day.

THE FACT

When you, as a reader of this journal, first saw the statement made in the announcement of THE THERAPEUTIST, that the subscription rate was one dollar a year and a straight therapeutic fact, you took it as a joke. You now find that perhaps the most important part of the contributions to this journal are these facts, and I can assure you that the fact, as a part of your subscription, is no joke but a serious and important truth.

Out of the 2500 subscribers we had for the first year, about twelve or fourteen per cent of them contributed their fact. The rest are yet to come, and that probably includes YOU, doctor. Give this matter very serious consideration and send us a fact at once, so that we can arrange them all for the coming year, in proper, classified order.

I sincerely hope that every subscriber, who has not contributed his fact for the first year, will not fail to send in his contribution before the first of February. Then I will surprise you for the coming year with a classified
arrangement, that will be attractive and useful, because it will be exceedingly practical, the like of which you have never seen before in any journal.

Of course these facts are not all as exact as we would like to have them. That depends upon you, doctor. Do your best in writing them, to make them direct, as covering a distinct group of symptoms.

Neither are the statements all new to every reader. There may be many of them that are of no material benefit to you; but while this is true, there are many also which fit so perfectly into some tedious and hitherto, unsatisfactorily treated condition, that you hail their presence with delight, and find them worth much more to you than a year's subscription.

Others find that your fact fits into their necessities in the same manner; and thus, by this interchange, it is most surprising what an important accumulation of therapeutic knowledge, absolutely reliable in character, we are securing.

It is my intention ultimately, after perhaps a year or two, to arrange all of these facts in systematic order, with reference to the conditions to which they apply. Doctor let me have your earnest co-operation.

**FIRST PRINCIPLES**

The following trite statements which embody the principles which we have taught for many years, are taken from The Texas Courier-Record. The only objection we have to them is that they state them as if they were their own, and do not give credit for them to those who have developed the truth of these statements, and have evolved, by persistent labor, the most correct principles of practice known to the profession. The statements are these:

"Use single drugs in the smallest possible quantity for physiological and therapeutic effect.

When the single drug does not act, make your own additions as the symptoms demand.

Don't take anybody's word for your therapeutics, without some personal experience.

This is the true principle of medicine. Did you ever try it? It will surprise you."

This opinion is now being held by the leading medical journals of our country. Many of them are claiming that it is simply a material evolution of their own labor. Others give credit to those to whom it is due. These are some of the underlying principles which have guided the practice of eclectic medicine for over eighty years.

**A GENERAL ECLECTICISM**

Twenty years ago, the then renowned president of Rush Medical College, stated that the Eclectic School of
Medicine had the method which must be ultimately adopted by the profession of the world. "They must all come to it in time," he said, "as it is the only correct principle."

A writer in the December Medical Times, of New York, defending the use of the word “Regular” as applicable to the old school profession, says: “Members of the Schools of Medicine, established in adherence to certain pretty fixed doctrines, have christened the so-called ‘Regulars’ as Allopaths. As a matter of fact, the regular profession of medicine has never formally recognized that its treatment should be allopathic, or indeed, guided by any single principle. The only term that could not be as objectionable as ‘Regular’ which we can think of as at all applicable, is ‘Eclectic,’ and this has a well known sectarian significance to which the Regulars themselves have ever formally objected.”

It has become quite a common practice among those who will recognize the fact that the profession at large is eagerly seeking after a knowledge of those things which our school has determined and taught, to claim that their method is eclectic.

While this word was originally intended to represent a catholicity of sentiment, it now includes a knowledge of the specific action of drugs. This the profession at large is seeking after with an earnestness never before exhibited, and when once attained, as I believe it will be at no distant date, the word eclectic may well be applied to the profession in its entirety.

**INDEPENDENCE IN MEDICAL THOUGHT AND PRACTICE**

Among other excellent things, Dr. George F. Butler, in an address before the Mississippi Valley Medical Association, speaks as follows:

The practice of medicine cannot be improved by a trust. “Hand me down” methods, theories, or dictatorial advice can not aid the intelligent, independent practitioner. Kindly suggestions and the plain, unprejudiced statements of the results of personal, clinical experience are valuable and are welcomed by all liberal and progressive physicians. The time has passed when a few men can successfully set themselves up as authorities, or dictators, or arrogate to themselves any special theory of procedure.

Candid practitioners to-day recognize good in all systems based upon scientific thought and pursued with intelligence and sincerity. By means of release from the shibboleths of the past and adherence to a given “authority” or “school” the freedom of present practice is greatly enhanced, to the immense benefit of the patient and the lasting honor of the physician.

Remembering the function of our profession to be the prevention and cure of disease and the relief of suffering, and remembering that no two cases of disease in the whole
history of the medical profession presents identical conditions, it is monstrous for any man or set of men to forbid the use of any method, any instrument or remedy, or any treatment which in the opinion of the attending physician promises success.

I repeat, it is an insult to our independence and intelligence that we are not allowed to read any book or medical journal we please at any time or place, whether in a medical society or in the seclusion of our offices, to use any remedy we please, whether it be so called “regular,” “homeopathic” “eclectic,” “alkaloidal” or “proprietary,” or any method of treatment whatsoever, even though it smack of Christian Science or osteopathy, without being subjected to public ridicule and criticism by a few self appointed “authorities” and “leaders” in medicine.

In the medical profession, as in religion or science, the perils of dominating influence cannot be escaped. While the evils flowing from industrial concentration can be met, the evils that must follow the syndication of intelligence cannot be avoided. As stated before, the struggle of the ages has been the emancipation of truth from authority.

No thoughtful physician can fail to see the immense advantage of a liberal mind in the pursuit of his calling. It is of signal importance that the doctor should not only welcome every advancement in medicine, but he should at all times be willing to put the broadest construction upon opinions conflicting with his own.

Every physician having the interest of his profession and of humanity at heart should admit candidly the value of any method, theory, or practice which may promote the common object of alleviating human misery, taking the generous view of things, without which the pursuit of learning is but a jaundiced, melancholy affair.

Fortunate it is for him who has learned the charity and liberality which characterize all genuinely great or progressive men in every profession. His open heart and intellect are spared many a regret, and throughout his career for him the sun of truth is shining everywhere.

If we find our pathways obscured by shadows it is because we are walking away from the light and not towards it. The sacred flame that glows upon the altar of truth illuminates and cheers only as we approach it.

If we wish to progress and influence humankind in the right direction, each of us should be modest in the presence of nature, fearless in the face of authority, unwearying in the pursuit of and absolutely free to seek the truth in our own way.

“Freedom's secret wilt thou know? Counsel not with flesh and blood; Loiter not for cloak or food; Right thou feelest, rush to do.”

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CONSTITUTIONAL SYMPTOMS IN SURGICAL CASES

When a patient sustains an injury of any kind, it is a very common practice on the part of the surgeon to treat the local injury, and to pay no attention to the constitutional symptoms, unless the shock is pronouncedly severe and its influence upon the heart and nervous system are plainly marked.

I have long held that the indications for medical treatment should be carefully studied in every surgical case and promptly met. At first in these cases, the shock shows itself by general weakness, by a feeble pulse and usually by retarded respiration. If the pulse be carefully studied, it will be found that it is an index of the degree of shock in its influence upon the sympathetic nervous system; also upon the circulation and the tendency to local congestion.

This latter condition can be determined also a little later on, by the appearance of the eyes, and as time passes, there will be tongue appearances which will show that atony or inactivity of the gastrointestinal tract are progressing, and these will need treatment. The full character of the impression upon the heart must be well studied, and immediate stimulation of the heart will be suggested by careful observation.

In cases where the extent of the injury cannot be estimated upon, as in the case of internal injury, some opinion can be formed of its extent by close observation of the action of the heart, circulation and respiration as named.

To meet the common indications, we have the emergency stimulants. At first, if there are evidences of a primary congestion, belladonna or atropin are directly called for. If a profound impression is made upon any organ, with a marked tendency to stasis with pain, hot applications and belladonna or glonoin will render excellent preliminary service.

Where there has been a direct injury to the brain or spinal cord, ergot is almost invariably demanded to prevent local stasis and to assist in maintaining a proper equilibrium in the circulation. This can be well combined with belladonna. Later, when the circulation is partly re-established, if there is laceration, much muscular soreness, or muscular pain upon movement, it is well to give small doses of arnica at frequent intervals. Aconite or gelsemium should be given for fever.

Where there is severe shock threatened with much pain, a hypodermic of morphin at the onset is demanded; but where the pain or distress is not severe at first, but slowly increases in intensity, the above remedy may abate it or a simple course may be adopted in which a grain of morphin and two drams of sodium bromid are added to two ounces of water, and a teaspoonful given every ten or fifteen minutes until the patient is soothed and the pain disappears.
This is a remarkably satisfactory course if there is a tendency to increasing nervous excitement or agitation from fear or apprehension with a slight injury. Where from laceration or contusion there is danger of subsequent infection, it is an excellent plan to give echinacea or the calcium sulphid in small doses from the first.

These are only general suggestions, but they should lead to a careful consideration of every injury, and make it possible to restore the patient very much more quickly than to leave all the conditions to nature except the plainly marked surgical conditions.

**GERANIUM**

I should like very much to present a symposium on the action of geranium. It is certainly a remedy that deserves the most careful attention. I have written upon it a good many times, and notwithstanding my previous enthusiasm, I find myself constantly growing in confidence in its influence upon gastric troubles.

Its real influence, I think, we know but little about as yet. It is classed as a simple astringent. It is all that, but it is infinitely more, and I am not as yet prepared to say just where our future observations will place it.

Given persistently in gastric ulcers, with or without hemorrhage, in doses of from ten to fifteen drops every two or three hours, it has not, in my tests, constipated the bowels at all, nor has it in any way interfered with their action in any case, but it has produced striking effect upon the other existing conditions.

However, given in diarrhea, whether of an acute or chronic character, where active inflammatory symptoms are not present, it will effectually restrain the loose movements and assist in the restoration of tone. It controls the hyperacidity, regulates the outpour of the digestive constituents of the stomach fluids, and promotes a normal tone.

I have been using it in the last two years in cases where palpation would reveal enlargement apparently in the walls of the stomach, and have found these enlargements, with other untoward symptoms, slowly disappear.

In another article, I have written on the action of geranium in the treatment of hepatic hypertrophic cirrhosis. Its influence was certainly remarkable in the case observed.

**TO PREVENT THE RECURRENCE OF PNEUMONIA**

Among those who have had experience, there is a positive belief that those who are once attacked with pneumonia are usually susceptible to its recurrence. With many it is apt to recur at times each winter or with the recurrence of certain conditions of the weather.
A very simple course will sometimes prevent these patients from having the second attack if the attack can be at all anticipated. In the first place, of course, the general conditions should be properly adjusted to the patient, and the patient should have the chest properly protected.

There are auxiliary methods, such as sponge baths, or with some patients cool sponge baths to the chest on rising in the morning, that are of assistance; but the most dependable measure is to administer three or four drops of the oil of turpentine on a square of loaf sugar three or four times a day for a long period, with the occurrence of the “preliminary cold” which usually leaves a bronchial or pneumonic difficulty.

The treatment does no harm. I find quite a number of physicians who should be more familiar with this common remedy, claim that they know nothing about it as an internal remedy, and I find that their belief is that very small doses will produce renal irritation.

It is only in very exceptional cases that anything less than a dose of from fifteen drops upwards, frequently repeated, will produce renal irritation and a tendency to hemorrhage.

**THE TREATMENT OF ALCOHOLICS IN PRIVATE PRACTICE**

It is less than fifteen years since the profession at large recognized Alcoholism as a disease. During the period named there has been a growing tendency to treat alcoholics in hospitals and sanitariums.

It is now being universally understood that, with confidence on the part of the physician, these patients can be treated at home the same as those afflicted with other diseases are treated by the family physician.

There is no secret now concerning the cure of this disorder. The patient should be put on proper diet, surrounded with pleasant environments, and a certain amount of restraint put upon him; then he should be visited by the physician once or twice a day.

Sulphate or nitrate of strychnine have been recognized as important remedies with which to do away with the craving for alcohol. The strychnin is combined with atropin and the proper dose should be injected into a thick muscle two or three times a day. This should be continued for about four weeks when it may be reduced to once a day.

To supply the patient with a stimulant which will do away with the craving for alcohol, I have been in the habit for many years, of giving from two to five drops of the tincture of capsicum with about fifteen drops of the tincture of red cinchona, with perhaps a tablespoonful of bovinine or other strong, concentrated food.

With positiveness and confidence on
the part of the physician, associated with the cooperation of the patient and his friends, it is not difficult to cure a great many of these cases. The use of apomorphin to do away with the tendency to maniacal excitement or delirium, is suggested.

Many physicians use hyoscyamin for this purpose also, and as a sleep producing agent. I shall be glad to have reports from those who have made it a practice to successfully treat their alcoholic patients.

**GONORRHEA**

I have been pleased with the treatment of this disease in the acute form, in the male, by a very simple method, and so uniformly successful is that method, that although I have on other occasions presented it to my readers, I take pleasure in writing more fully the details of the treatment, in perhaps a more specific manner.

In the first place, with the development of fever and a high degree of nervous excitement, accompanied with a profuse urethral discharge at the onset of the disease, I give full doses of gelsemium, three or four drops, and two drops of macrotys every hour or two. It is seldom that I give aconite for the fever. These two remedies combined control that manifestation in a satisfactory manner. The parts may be bathed in tepid or cold water, and the organs should be supported by an ordinary support and the patient should lie very quiet and abstain from solid food.

I also, for four or five days, rigidly exclude alcoholics and tobacco. I have cured many cases with this simple method alone, but it is not all sufficient for most of them. There is a thick, creamy discharge that contains pus cells in large quantities. With most of the cases there is pain and a frequent tendency to urinate, and chordee.

Gelsemium is the indicated remedy for these symptoms, but I am very favorable to the use of irrigation with which to cleanse the urethral canal. I first use warm, sterilized water in a small catheter, permitting the excess of the fluid to return from the urethra around the catheter. This it will readily do if care be taken in the selection of the catheter.

On some occasions it is a good plan to introduce the catheter while the irrigating fluid is flowing, inserting the catheter slowly into the canal until it has reached the full length of the urethra without entering the bladder.

When the irrigating fluid returns perfectly clear, I use a very mild solution of permanganate of potash, perhaps 1 to 5000. This is inserted slowly, the irrigating fluid flowing from the catheter as it is inserted and continuing to flow the entire length of the canal. This should be introduced as warm as the patient can stand it and should in no way precipitate before it is introduced.
It is not a bad plan to use sterile water again after this is used until the water runs clear. A very thorough irrigation should be used for the first three days, perhaps once every day; subsequently not oftener than once in three days, or it may be discontinued entirely.

The success depends upon the thoroughness of this irrigation. If local engorgement is severe and there is some degree of persistent, nervous excitement, with the internal medicine advised I would give, at bedtime, fifteen grains of sodium bromid and fifteen minims of fluid extract of ergot, for one or two nights.

If there are sharp, shooting pains on the passage of water, I would give hydrangea in full doses with the first named mixture. If, after the first five or six days, there is a slight discharge present, I would then give with the gelsemium and macrotyis, kavakava. Where a number of weeks have gone by and still there is a slight discharge, I use staphisagria and adjust the food so that but little of the nitrogenous principles are taken.

I anticipate a tendency toward ulceration within the urethra, or the recurrence of a persistent discharge of purulent matter occasionally, by the use of a mild solution of sulphate of hydrastin, with a little sulphate of zinc used as an injection in warm water twice a day. This may be followed by the irrigating fluid later on.

In the treatment of this disease in females, I lay a great deal of stress upon the use of permanganate irrigating fluid, but use it much stronger and persist in its use until all the signs of local infection have disappeared.

The vagina should be dilated and the warm solution should be brought into contact with every portion of its surface.

AN EARLY DIAGNOSIS

In the December issue, there is a strong appeal made to physicians to diagnose cancer early and treat it with confidence in its cure. The admonition applies to many if not all serious disorders. I am quite confident that I have anticipated chronic nephritis and have caused the suggestive symptoms to disappear. The now general belief in the curability of incipient phthisis is but the general acceptance of this idea.

Keen, close observation—acute discernment—are essential in correct diagnosis. It is not only positively necessary to know what the disease is, but to know what may develop from the symptoms which are apparent if they are allowed to remain.

It is a too common practice among all physicians to pass over slightly a single symptom or a few indefinite indications which do not clearly point to any well known disease. These should each be considered and dwelt upon, until their full, present or future bearing upon the health of the patient
is determined. They should be properly placed and if possible specifically treated at once.

It is by an exact knowledge of the indications and the remedy or remedies that will meet those indications that we are enabled to become exact prescribers. By curing the indications, we will find that we are warding off often chronic disease which, if we wait until we can clearly diagnose, has become too firmly seated to cure and must be pronounced incurable. No conspicuous symptom should at any time be overlooked.

By keeping thus a close watch upon apparently minor indications, the physician sometimes has an intuitive sense of the approach of a definite disorder which this intuition enables him to name with positiveness, and to ward off by means which a correct knowledge of his remedies makes possible. This is rapidly becoming the duty and obligation of every physician.

THE ACTION OF CACTUS ON THE HEART OF THE AGED

I desire to call the attention of our readers to the action of cactus upon the hearts of aged people. I have been able to watch its effect in some very interesting cases during the past year, and have drawn some conclusions which I think will be of benefit to others.

I had an opportunity to watch its influence in the case of an old lady, aged eighty-five, of previously good constitution, who for the past three years has been suffering from what her friends called a rheumatic condition of the right shoulder, and progressive feebleness of the heart's action.

After the death of her physician, who had attended her many years, I was called to see her one morning, and found her pulse in a very feeble condition and the patient apparently on the very border of a collapse. I was told that that condition was quite common and that she had had digitalis and other heart stimulants for a period of perhaps fifteen or eighteen months, and that the family was not alarmed.

I was further told that the occurrence of those “weak spells” as they called them, was looked for every day, and usually in the early morning. It seemed to me that the heart did not have strength enough to continue its pulsations for any extended period.

I found no evidence of valvular disease. There was nothing except extreme weakness. For its immediate influence, I gave three drops of specific cactus every hour, and advised this to be continued after the first day every two hours. Later I gave two drops every three hours and continued this treatment for a period of five or six weeks.

For deficient stomach action and failure to properly digest the food, I give a mild digestive, and later, after perhaps a month, I gave the 1/134 of a
grain of arsenate of strychnin four times a day for two or three weeks.

I have been called in to see this patient on two occasions when there was some weakness, and once when pain in the right shoulder and the soreness around and beneath the shoulder blade were severe. As there was a slight icterus in this case, I gave iris and sticta in small doses for the pain beneath and through the shoulder blade, and occasional small doses of chionanthurus.

These remedies were given in port wine and continued for about three weeks, when the pain in the shoulder was materially abated. The improvement in the action of the heart under the influence of cactus, not only impressed me greatly, but caused her friends, and the patient herself, to ask me to equip them with a vial of “those green drops” for use during their winter's stay in Florida.

The patient was active and cheerful and apparently as strong as she had been at any time in the past five years when she left for the south the first of December.

**GERANIUM IN HYPERTROPHIC CIRRHOSIS OF THE LIVER**

During the past summer, I was consulted by a patient, aged about sixty-five years, for abdominal enlargement. The patient had for years suffered from a very severe ulcer of the tibia.

She was a very “fleshy,” plethoric woman, and a year before had sustained an impacted fracture of the head of the femur, and had therefore, for the past year been exceedingly inactive.

The first symptom that had attracted her attention, was the excessive enlargement in the upper part of the abdomen; the encroachment upon the stomach and the persistent vomiting after eating. I found no evidence of extreme enlargement in the lower part of the abdomen, and no dropsical effusion anywhere within the body or the extremities at that time.

There was a slight jaundiced condition of the skin—a mild icterus. The liver dullness plainly gave a clue to the condition. The enlargement of this organ was extreme. It extended across the stomach to the left side of the abdomen and down well below the navel.

The surface of the liver was smooth and its edges were round and very distinct. The dullness was also high in the chest, extending up to the fifth or sixth rib and posteriorly it was distinctly marked. It caused an upward displacement of the diaphragm, as there was considerable difficulty in breathing, the patient being obliged to occupy a sitting posture during the greater part of the night.

With the vomiting there were many symptoms of gastric catarrh, and extreme acidity militated against the
diagnosis of a cancerous condition of the stomach itself.

With these symptoms there was extreme tenderness over the region of the spleen and occasionally mild, shooting pains in this organ, although no great degree of enlargement.

The skin symptoms were distinctly pronounced. There was itching and a general roughness of the skin, resembling greatly exaggerated goose-flesh. This appearance with the mild jaundice was pronounced and persistent. In addition to this there was a local inflammation of distinct areas of the skin which was announced by a petechial appearance first, then by red discoloration with blebs and blisters which closely resembled impetigo contagiosa. This condition had persistent special treatment and only yielded after the utmost care and faithfulness in carrying out this treatment.

I diagnosed this condition as one of hypertrophic cirrhosis, and gave an unfavorable prognosis. I put the patient on ten drop doses of specific geranium every two hours, and gave subnitrate of bismuth suspended in water, when necessary for the immediate stomach symptoms.

This has constituted almost the entire treatment from the first day of September until the present time—the end of December. As a result of this treatment, there has been a reduction of at least one-half in the size of the liver; the tenderness and shooting pains have long since abated, as well as the oppression in breathing; for the past ten weeks, the patient has been able to lie down and sleep quietly all night; there is only an occasional attack of vomiting—perhaps once each week; in general, the patient and her friends remark upon her satisfactory improvement.

The fact that she is able to get around the house on a crutch and assist very materially in doing her housework, doing the entire sewing for a medium sized family, convinces them that she is greatly improved.

I cannot explain the action of geranium in this disease, if it is that agent which has produced the satisfactory results. The fact that steady improvement has followed the persistent administration of this remedy, almost alone, in a disease which seldom shows improvement under any treatment, convinces me that the agent must have had some influence.

The abatement of the stomach
symptoms and the return of the normal appetite are very satisfactory results. At no time has there been any constipation since geranium has been given.

If any reader has made an observation concerning the action of geranium in conditions of this kind, we ask them to report, either in private letter or for publication.

**EPSOM SALTS AS AN ANESTHETIC**

I called attention in the early part of the past year to Doctor Burgess' little work on the use of epsom salts. The conditions for which the doctor suggested this remedy are so varied, and his statements so enthusiastic, that but few will receive his conclusions with credence.

Whether his statements have had any influence in the bringing out the investigation of this remedy or not, we are not prepared to say. It is more than likely that they have; but very many have become enthusiastic concerning the action of this simple remedy in conditions in which it has not been previously used.

He refers frequently to its external influence in controlling pain, but he says nothing about the hypodermic use of the remedy as an anesthetic. The public press has recently announced that Doctor Samuel J. Meltzer, of the Rockefeller Institution for Medical Research, in New York, has recently discovered that a solution of the sulphate of magnesia injected over the course of a nerve, or at its origin, produces local or general anesthesia according to its application.

The claim is, that at one time, after injecting a quantity of the solution into a dog, the doctor noticed the respiration growing fainter and fainter, and finally respiration ceased with but little reduction of the heart's force or action.

This caused him to make another experiment on a dog, when he found that without any influence upon the temperature, a very satisfactory anesthesia was induced. He is reported as then having tried it on several patients with very excellent results.

In one case where the patient was dying from lockjaw, after having had the various serums and all authorized treatment, improvement set in after the very first injection of epsom salts, and continued until the patient recovered. We shall look with some impatience for the doctor's report of his observations on the action of this remedy.

**LEONURUS**

The field of this remedy, so far developed, is a narrow one, but so satisfactory is its influence in that field, that it becomes an important remedy. It is known as motherwort and is used to restore the lochial discharge when suppressed or retarded from any
cause, especially when suppressed from cold, after it has once appeared.

I have had very satisfactory results in the administration of the remedy in from ten to thirty drop doses in, perhaps, two ounces of hot water every two hours in these cases.

I have seen no unpleasant results from its influence.

Doctor King, in his old dispensatory, advised the application of a fomentage of the herb with its internal use, but I am convinced that any hot fomentage will encourage an excessive flow, and its internal use will be all that is needed.

I believe that if the remedy were carefully studied from the present vantage point of our therapeutic knowledge, we would find that it could be used in conjunction with aletris or salicin or viburnum with excellent results, in chronic uterine disorders.

It has been observed to act satisfactorily when there is general feebleness, also when, with general feebleness, there was lack of tone in the important organs.

**DIRECT REMEDIES**

**Corydalis.**—This remedy was very highly esteemed by the early physicians of our school. They prescribed it for its distinctive alterative influence, employing it in all cases where there was a suspicion of disorder of the blood.

They claimed to be able to cure syphilis with this remedy alone at times although this opinion was never general. It is certainly a valuable addition to alterative compounds. It is a remedy for depraved states of the blood where there is a general feebleness.

When in these conditions there is a tendency to diarrhea or dysentery with foul breath and foul secretion, it is a good remedy. It is very serviceable in diseases of women which are dependent upon blood disorders.

**Calendula.**—Calendula has been employed for many years by the homeopathists. It is of service diluted, in the external application for the treatment of wounds or where there is broken skin, such as excoriations, or in the chafing in infants; also where there are ulcers of an indolent character, or cold abscesses, or general catarrh of a chronic character.

It may be applied also where there are varicose veins or echymoses, or in petechia.

It is directly serviceable in capillary engorgement where the capillaries are weak and where there is a tendency to venous engorgement with dilatations. It is thought to prevent suppuration and to promote health in all cases where there is a tendency to abscess formation.
Viburnum Prunifolium.—This remedy is an active regulator of the menstrual function. I consider it our most reliable remedy in preventing abortion or miscarriage, whatever the cause of that condition. I have yet to see it fail when given in sufficient doses.

It is a waste of time to give it in three, four or five drop doses in cases that are immediately threatening. In those where there is pain or hemorrhage, a teaspoonful should be given every hour. I have never observed any harm to come from large doses and should not hesitate to give it every half hour if I thought it would be beneficial.

In habitual miscarriage, the remedy should be given for some time previous to the time in which the symptoms usually appear, and should be continued during the time for the period. At the same time the patient should be put to bed and kept very quiet and only light food given.

The remedy is also advised where, during severe fever, the menses suddenly appear. In these cases a mild antiseptic vaginal douche may be used at the same time. In the early stage of pregnancy, with vomiting and nausea or other stomach symptoms or where there are uterine pains, this remedy will assist in controlling the entire condition.

Combined with other uterine tonics, it is an excellent remedy in preparing a patient for parturition, as it controls erratic pains and induces normal uterine action.

**GLEANINGS FROM THE MEDICAL SUMMARY**

In most cases of anemia and chlorosis of young women purgatives will do more good than iron.

Attach a soft rubber catheter to a syringe and irrigate the colon of babies suffering from ileocolitis.

Fluid extract of conium in half-dram doses is claimed to have given good results in threatened abortion.

Cannabis indica in 1-4-grain doses, three times a day for a long time, is curative in many cases of chronic headache.

To sober a “drunk” in short order give a hypodermic of apomorphine, 1/10 grain, and follow with capsicin. If there is much depression, strychnine and ammonia will be indicated.

A little pineapple juice is a better digestive ferment than most of the pepsin preparations on the market. A small slice may be eaten after the meal, but the fibrous portion should not be swallowed.

Bed-sores are best treated by bathing in alcohol and dusting with stearate of zinc; or, one drachm of tannic acid added to a halfpint of alcohol and the same amount of water used several times will do the work.
Do you see anything to love in a little child?

Have you sympathy with all good causes?

Can you look straight in the eye of an honest man or a pure woman?

Will a lonely dog follow you?

Do you believe in lending a helping hand to weaker men?

Can you be high minded and happy in drudgery?

Can you see as much beauty in washing dishes and hoeing corn as in playing golf and the piano?

Do you know the value of time and money?

Are you good friends with yourself?

Do you see anything in life besides dollars and cents?

Can you see sunshine in a mud puddle?

Can you see beyond the stars?

Editorial in The Medical Standard.

C. B. Williams, M. D., claims that viburnum, in his hands, has relaxed a rigid os as quickly as chloral. It is agreed that it is a perfectly safe and very accessible remedy.

Books


This work is a synopsis of the facts which are essential to a student in the study of materia medica. These facts are arranged in an exceedingly simple and natural form, and as each alternate page of the book contains a blank page for notes, the book is one which a lecturer could readily follow—the students entering their notes on the blank page. The work is so prepared as to be of value, not only to students of human medicine, but to veterinary students, and to pharmaceutical and dental students as well. The work in previous editions has become quite popular, and this edition should and doubtless will receive its share of patronage.

- WHAT TO DO FOR THE STOMACH. A careful arrangement of the most Important Symptoms in Diseased Conditions of the Stomach and the Remedy Indicated in the Cure of these Symptoms. By G. E. Dienst, Ph. D., M. D., Author of "What to Do for the Head." 202 pages. Cloth, $1.00 net; postage, 5 cents. Philadelphia. Boericke & Tafel. 1907.

The homeopathists have taught us some very important lessons in the grouping of symptoms and in the
selection of single remedies for each indication. This little work of two hundred pages is an exhaustive consideration of stomach symptoms, arranged in order, making it accessible to those who are familiar with the methods of adapting homeopathic remedies. For instance seventeen pages are occupied with the arrangements of eructations under different conditions. Hiccough occupies three pages. Nausea occupies twenty pages. It is my intention during the coming year to classify the symptoms which present in certain organs in disease to an extent, thus beginning a work which I hope to complete in time. This little work will be valuable to those who understand its careful adjustment to this class of remedies.

• THE ECLECTIC PRACTICE OF MEDICINE. By Rolla L. Thomas, M. D., Professor of the Principles and Practice of Medicine in The Eclectic Medical Institute, Cincinnati, Ohio. Price, cloth, $6.00; sheep, $7.00; The Scudder Brothers Company. Second edition now ready.

The writer has been studying this lately published work devoting to it all the time possible the last two months. We object to the conventional review stereotyped as it usually is: a reference to the book, the naming of the author, the publisher and, maybe, the price, with a few commonplace remarks conveying the reviewer's notions of the merit or lack of merit of the book, according to his whims or prejudices. There are books deserving little else than mere mention, it is true, but if a reviewer call attention to even a very few meritorious features it may encourage the author to a renewal of effort, when lacks may be supplied and weaknesses give way to vigorous energy in the next revision.

The matter of making a medical book a textbook of practice, such as we are trying to give unbiased review, involves the practice of deductions almost illimitable.

There is so much to be left out, a thousand more than to be put in. When the straw, the cheat, the cockle and the blasted wheat are riddled and fanned out, one may obtain concrete knowledge. It is hardly necessary at this late day for an author to indulge much theory or speculation concerning the how or the why certain agencies called medicines exert favorable influence. The question has been turned over so many times that the neophite in medicine need not be at a loss to know. After actually studying Professor Thomas' book we are more convinced that the above expressed notions of the writer of this review, governed largely when "The Eclectic Practice of Medicine" was written.

The author's chief aim was to collate proven facts as well as to present others coming to himself, by reason of many years' experience in actual practice. Professor Thomas was a close student of Scudder, and it appears but natural that his deductions parallel the products of him who was so prominent in medical epoch making the middle epoch of Eclectic medicine in America. Enough and no more is given of nomenclature, definition, history,
etiology, pathology, symptoms, complications, diagnosis, prognosis and treatment. It is a textbook and will serve for some years the requirements of students in colleges.

If a practitioner be supplied with “Webster's New Eclectic Practice” and with “Ellingwood's Treatment of Disease” and with the work under consideration, he could not reasonably expect to surpass such a practical list by additions. These contain and convey in succinct form and statement the present position of Eclectic medicine in America, and they all do full credit to the acknowledged ability of each individual author. Now, as in the recent past history of medicine, the literature of medicine is being added to largely by Eclectic authors, and the time is not far distant when a budding independence in those yet under surveillance will acknowledge the fact. Due credit and acknowledgment must come, although the evil genius—designing prejudice—live on after the throning and reigning of tolerance.

W. L. LEISTER, M. D.


This little work of about 150 pages, considers quite fully the underlying principles of vibration, its influence in nature and its influence upon the human system. It considers the chemical influence of vibration, and the relation between vibration and electric influence to which are added the therapeutics of light. The principles of vibration are also applied to drug action, and to the absorption and appropriation of cell foods. The work is indeed a comprehensive consideration of the subject.

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Dr. Norton, Brooklyn, N. Y., in Medical Record.

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