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THE PATHOLOGY OF ARTERIOSCLEROSIS.

HERBERT T. COX, M.D., Los ANGELES, CAL.

According to Warfield, “Arteriosclerosis may be defined as a chronic disease of the arteries and arterioles characterized anatomically by increase or decrease of the thickness of the walls of the blood vessels, the initial lesion being a weakening of the middle layer, caused by various toxic and mechanical agencies.”

Before discussing the structure of the lesions we will consider the etiology. To begin with, two broad divisions of arteriosclerosis may be made: The first is the congenital form, so-called, or that which results from inherited tendency. This is based upon the theory that some people are not endowed with as good arterial tissue with which to begin life as they should have, on account of the constitutional diseases or habits of their ancestors. Consequently unless they escape the etiological factors of acquired arteriosclerosis they show sclerotic changes at a very early age. But if the tendency were known by guarding their living they might postpone the process for some time.

The second class is the acquired form, and it is, in fact, generally the only one we consider. The main factors in the etiology of this form is the triad: Tension, toxins and time. Probably as far as we now know in the order named. Hypertension is now believed to hold first place, although some seem inclined to place toxins first. But hypertension seems to be a cause rather than a result of arteriosclerosis. Among the etiological factors may be mentioned age. As time passes on the integrity of the arterial tissue seems to wane, but other things being equal probably the better the arterial tissue in the beginning the longer it resists these time elements.
Sex: The males seem far more prone to arterial disease than women.

Race: The Negro seems to be the victim more frequently than his white brother.

Occupation: The fact is that any occupation which requires either absorption of toxic substances, or prolonged muscular labor will hasten markedly the onset of arterial disease.

Infectious diseases, on account of the circulating toxins, seem to have a marked effect according to the length of time that they have acted. Other causes that may be mentioned are: Syphilis, chronic drug intoxications, over-eating, mental strain, muscular overwork and renal disease.

Having considered the main causes briefly, we will now turn to the pathological anatomy. The order of frequency in which arteries are affected is probably as follows: Aorta, splenic, femoral, iliac, coronary arteries of the heart, arteries of the brain, uterine, subclavian, brachial, ulnar and radial arteries.

The whole subject of the pathology of arteriosclerosis has been much enriched by the practical application of blood pressure instruments clinically upon man and study of experimental lesions produced by drugs and micro-organisms upon the aortas of rabbits. Simple atheroma, which shows small whitish plaques on the retina due to fatty degeneration, must not be confused with the lesions of arteriosclerosis, as they have no significance, except the danger of clot formation upon the eroded surface.

It is customary to differentiate three types of arteriosclerosis, namely, (1) nodular; (2) diffuse; (3) senile; but this is not a classification of distinct types, as they often exist in various grades in the same individual. It is better, perhaps, to separate the three groups into (1) nodular; (2) diffuse or senile; and (3) syphilitic.

In the nodular form the lesions are found on the aorta and large branches, particularly at or near the orifices of branching vessels. These
nodules may increase in size forming large, slightly raised plaques of yellowish white color. The initial lesion is in the media, consisting of an actual dissolution of this coat with rupture of the elastic fibers and infiltration with small round cells. There is thus a weak spot in the artery and, layer upon layer of intimal cells form over the injured place in an attempt to strengthen it, and at the same time there is a thickening of the connective tissue of the adventitia. The blood supply to the inner portion of the media comes from the blood stream itself, and as the intimal growth takes place the blood supply is cut off and this leads to softening in these places. These may rupture, leaving ulcerated places, or calcification may take place. The changes in the intima constitute the effort on the part of nature to repair a defect in the vessel wall which is to compensate for the weakened media and the widened lumen.

Two processes may take place due to hypertension: First, a dilatation and thinning of the arterial walls; second, a thickening and intimal hypertrophy. If the strain is pronounced there is dilatation. If only moderate, there is thickening of the walls, diverse manifestations of a common cause.

In the diffuse or senile type the aorta may appear smooth, but it is markedly dilated, particularly the thoracic portion which is elongated, as evidenced by its slight tortuosity, and it has lost the greater part of its elasticity. Associated with such changes in the aorta and its larger branches is marked sclerosis of the smaller arteries. Intimal fibrosis is common, together with hypertrophy and fibrosis of the middle coat, with sometimes, periarterial thickening. Calcification of the media is found and is preceded by hypertrophy of the media. In the radial artery the media, as usual, is affected first. The muscle cells undergo degeneration, and either marked thickening takes place or sacculation results, depending upon the severity of the exciting cause. Calcification of the media is common. This occasionally takes the form of rings encircling the vessel, because of the alternation in this artery of the circular muscle bundles with the circular yellow elastic fibers. This gives to the examining finger the sensation of feeling a string of fine beads. If calcification does not take place the vessel may become tortuous in character, due the loss of its elasticity.
The syphilitic form seems to have its seat of election in the aorta, just above the aortic valves, and in the ascending portion of the arch. There are semi-translucent, hyaline-like plaques which have a tendency to form in groups, and instead of undergoing an atheromatous change, as in the ordinary nodular form, they are prone to scar formation and puckering, so that microscopically the nature of the process may, as a rule, be readily diagnosed. Microscopically, the process is found to be a subacute inflammation of the media. There is marked round cell infiltration around some of the branches of the vasa vasorum and absorption of the tissue elements of the middle coat. This is accompanied by hypertrophy of the intimal tissue, and there follows a degeneration of the deeper portions of this new tissue and new capillaries are formed, which have their origin in the inflammatory area in the media. This granulation tissue in the process of healing contracts and forms the characteristic scars on the aorta. When the process is more acute, actual destruction instead of reparative processes takes place, resulting in aneurysmal dilatation at the weakened spot. Spir-ochete pallidae have been found in the degenerated media and in small gummata, which were situated beneath the intima. A large percentage of patients with cardio-vascular disease give the Wassermann reaction. In cases of aortic insufficiency the reaction is said to be present in almost every case. Obliterating endarteritis may occur in such organs as the kidney, liver, spleen and intestines. This generally occurs in the smaller arteries, and is an irregular thickening, with deposits of lime salts in the walls. Occasionally such an obliterating process takes place in a larger artery and a thrombus forms, but by a process of central softening new channels permeate the thrombus and the function of the vessel is restored to some extent.

**DISCUSSION.**

**DR. A. S. TUCHLER :** I would like to take issue with the statement the doctor makes as to the cause. It was always my idea, and we have been taught that it is the sedentary habits that lead to hypertension, while the doctor’s paper, as I understand it, says those who are accustomed to severe muscular labor are sufferers from that condition. I have observed that the ordinary working man that works hard, whether a boiler maker, a machinist, or what not, can eat three times a day and drink his beer and whiskey and indulge in food without any danger to himself. He needs an
abundance of proteids to give him energy to do his work. But let us of sedentary habits indulge in that and hypertension will be pronounced in a short time. Therefore, that is an important feature that I do not like to see passed by without bringing out that particular point.

DR. SAXTON: Perhaps I have as great opportunity for observing conditions among the laboring class of the far South as any of you. They are almost entirely of the laboring class, and yet I find a great many cases of arteriosclerosis. So it is not clear, in my mind, that sedentary habits or working habits are really the cause of arteriosclerosis. So far as the real condition that brings about arteriosclerosis, I think it is easier for us to treat the condition when it exists than to get a good clear idea of the cause. I do not know, but I will have to say as I did yesterday, “We don't know nothin' and we don't know that.”

DR. COX: I think that the doctor who has just spoken is correct, that we don't know nothin', but there is a good deal of work being done on this line, and the drift seems to be toward the idea that hypertension is the cause and not the result. A man might work hard and not be under the strain that would cause hypertension. There are so many factors that enter into blood pressure that relative blood pressure has very little effect. It is the continued blood pressure that makes the difference.

PULSATILLA IN INEFFICIENT LABOR.

HERBERT T. WEBSTER, M.D., OAKLAND, CAL.

Like most Eclectic remedies, pulsatilla has an ancient history. Before Hahnemann, even though his followers claim it as a Homeopathic remedy, it was made prominent through its specific influence on the eyes by Baron Storck. We will not, then, do ourselves proud by proclaiming ourselves its discoverer, or even by claiming any new uses for it. This remains for our posterity, if new application should ever be found. However, it might be profitable to look over our present application of it to disease, and ask ourselves if we are taking advantage of what the past has afforded us in improving all the valuable uses to which it may be put.

In a copy of the United States Dispensatory, bearing date of 1888, I find the following testimony as to its therapeutic value—a fitting
commentary on old school opinion of new school therapeutics. Of course, it was written twenty-seven years ago, and there has been some awakening since, though not among the majority of teachers in old school colleges. But to quote: “We have no actual knowledge as to the action of this new officinal. It has been employed in Germany and other parts of Europe, especially by Homeopathic practitioners, by whom the drug is much used for the relief of amenorrhea and dysmenorrhea, and for other purposes. Given in infinitesimal amounts, with due ceremony as to dilution, tumblers and spoons, to credulous, hysterical women, it may sometimes be of service; but whether it has any application is very doubtful.” No wonder that with such text-books the Allopathic branch is full of doubting Thomases.

The last edition of the American Dispensatory contains a very lengthy description of the therapeutic uses of pulsatilla, but omits its important application as a partus accelerator. Few of our writers on the remedy refer to this. It seems to have been overlooked, and yet I believe this is one of its most important functions.

As a safe and reliable remedy when the pains are inefficient and distressing, I have never found any other remedy so satisfactory as pulsatilla. Conditions are almost invariably changed for the better before the second dose is administered. At least, a few small doses, administered from fifteen minutes to half an hour apart, alter the labor favorably within a reasonable time. I can not indorse all that some Homeopathic authors claim for it in parturition, but perhaps I have not given it credit for all it is able to accomplish.

A little review of two leading authorities in that school may not be amiss here, for we all have something still to learn, and even an old acquaintance may possess some new charm. I am glad to appropriate anything good, whether it emanate from Homeopathy or from an ancient grandmother. Regarding the action of pulsatilla in labor, Kent, one of the comparatively late prominent authors, remarks: “Shivering in the first stage of labor. Hysterical manifestations through labor. Pains have all ceased or are irregular, so that they do no good. No dilatation has taken place. But when the pains come on we have some important symptoms. A pain comes on and it seems to be about to finish satisfactorily; it has been regular and prolonged until about two-thirds
through, and all at once she screams out and grasps her hip—the pain has left the uterus and gone to the hip, causing a cramp in the hip, and she has to be rubbed and turned over. This medicine will regulate the pains, and when the next pain comes it will hold on to the very end. So impressionable is this woman during confinement that if she is subjected to any emotion, such as having an emotional story told in the room, or if anything excitable occurs, the pain will stop. If she has passed through labor and the lochia has been established, from such a cause the lochia will stop, as if she has taken cold, and she will have cramps and troublesome after-pains, the milk will be suppressed, she will feel sore and bruised all over, and have fever."

I have frequently been called to labor that has been in progress for eight or ten hours and made a preliminary examination, expecting from the report of the nurse to find labor well advanced, to be surprised in finding hardly any dilatation at all. Another surprise has followed when, after administering pulsatilla, dilatation has gone on rapidly, labor terminating speedily and satisfactorily. In such cases pulsatilla undoubtedly favors relaxation of the os. It may not do this by acting as an antispasmodic, like lobelia or gelsemium, or jaborandi, but by correcting an improper distribution of the nervous impulse, which has acted to retard matters.

The excruciating, inefficient pains which sometimes usher in and continue through the first stage, seem to be speedily improved by the action of pulsatilla. Like macrotys, its action is invariably harmless, even if ineffective, so one does not go very much wrong if disappointed in its remedial action.

Some of the Homeopathic claims for the remedy seem to be rather extravagant, but even here I do not care to pose as too severe a critic. What I know about therapeutics I know, but I realize that there are many things I do not know, and find that I can learn something almost every day. That pulsatilla is capable of turning a child during labor seems like endowing it with an intelligence. I believe in specific affinity in therapeutics, but not in intelligence, so far as the action of a remedy is concerned. However, there are Homeopaths who assert that such is the capability of this remedy. The following from Hughes illustrates as well as affords some really useful hints as to the action of pulsatilla in
other respects:

“It presides in a most beneficial manner over the function of parturition. Given daily for a month or so previously, it greatly facilitates the process in women whose labors are tedious and difficult. In labor itself, when the pains are irregular, tardy and defective, yet ergot is hardly called for, pulsatilla will often do good service, as also when from the same cause the placenta is unduly retained. There are several cases recorded which leave little doubt but that in false presentations pulsatilla favors spontaneous version. You may smile at this property I have ascribed to this remedy, but you must remember that in these cases spontaneous version is not so uncommon an occurrence, which shows that nature has means of effecting the change, and may well be helped thereto by an appropriate drug stimulus. The evidence that pulsatilla does render such aid comes from several practitioners, both in France and in America. And if you suggest that the cures they report may have been instances of spontaneous version of which I have spoken, I will adduce the testimony of Dr. Mercy Jackson, of Boston. In a communication made by this experienced lady to the American Institute of Homeopathy in 1875, she relates fifteen successive cases of false presentation, being all that had occurred in her practice from a certain time onwards. In every case she administered pulsatilla, and in every one the body underwent rotation and the head came to the fore. It is beyond all probability that these fifteen cases should have been a series of coincidences.” With all due respect for Dr. Hughes and Dr. Mercy Jackson, now, I believe, deceased, we have it to remember that in her writings she asserts that she has felt a procidentia uteri rise into the pelvis so rapidly after taking sepia that its movement was plainly felt, as if raised by a power within the pelvis, and must accredit her with a remarkable imagination.

Still, after all is said and done, those who give pulsatilla a fair and impartial trial in parturition will hardly be disappointed in its favorable action wherever it is possible for a parturient to accomplish therapeutic effect.

I add twenty or thirty drops of the specific medicine to four ounces of water and order a teaspoonful every fifteen minutes, twice, then every half hour or hour, as circumstances demand.
DISCUSSION.

DR. H. C. SMITH (Glendale): In regard to pulsatilla in labor, I use it considerably and it has a specific application there, as do lobelia, gelsemium and macrotys. In our discussion of the “Twilight Sleep” yesterday, I did not mention that we must insist that we use our specific remedies according to specific indications, especially those that relieve irritability of the nervous system, and in nine cases out of ten we will not need “Twilight Sleep.” It is in the first stages that these remedies are usually indicated. We have had sufficient study of this matter to prove that the effect is on the sensory side of the nervous system and on the sympathetic nervous system; therefore, the labor that is retarded by hypersensibility of the nervous system will be relieved by pulsatilla and the labor will go on unretarded.

DR. F. M. CHANDLER: One other condition that has not been mentioned, where we are called a case and the woman is having some pain, irregular and inefficient in character, and there is question whether the uterus is trying to get busy or whether they are false pains, one or two doses of two or three drops each, which I usually combine with macrotys, will settle the thing in a very short time.

DR. E. G. SHARPE: I want to emphasize what Dr. Smith has said about pulsatilla as an accelerator of labor, but I have found it does not work the same in all cases, and we must select our cases as to the characteristic indications for the remedy. The patient that shows symptoms of lack of confidence, fear, etc., a dose of pulsatilla seems to benefit, and it answers the purpose as no other remedy will do.

DR. WEBSTER (closing): I am very much pleased to accept the comments that have been offered. They should have been in my paper.

ADAPTATION OF LIFE TO ENVIRONMENT.

J. A. MUNK, M.D., LOS ANGELES, CAL.

Man was made for the earth and not the earth for man. The greater must include the lesser and the process can not be successfully reversed. The earth was made long before man appeared, who was then created to fit his environment upon the earth.
The earth is only an atom in space, which is the most stupendous and staggering fact in nature. Space is something so vast that it is incomprehensible to the finite mind, and, like eternity, is without beginning or end.

As potent and versatile a force as we know electricity to be, it is no stretch of the imagination to say that it is existent and active throughout the universe and is the one agent that furnishes the heat, light and power of the revolving worlds in space. Gravity is also a form of electric energy (electro-magnetism), which attracts all objects within a given radius toward a common center, and balances the stars and keeps them in place.

The earth makes one complete revolution on its axis every twenty-four hours, which would make it seem as if we stood upon our feet one-half of the time and on our heads the other half; but we are not conscious of any change, because of the influence of gravity, which holds us in our proper relation to the earth. There is really no up or down upon the earth, as it is not flat, but round, and is changing its position continually, so that the perpendicular affects only the individual object in relation to its immediate surroundings. If we were consciously affected by the change of position, we would actually have the sensation of a man standing on his head, that would cause serious disturbance of the vital functions and soon produce death. Nature, however, has wisely provided for this action, not to have it produce any unpleasant or injurious effects; and has harmoniously adapted every living thing to its own environment and for a useful existence. Whenever nature's plans are interrupted and a cataclysm does occur, it is merely an incident in the cosmic scheme. Nature quickly heals the breach and continues on in her regular course, as if nothing had happened.

The endless variety of life that is found upon the earth is startling and something wonderful to contemplate. All life is of the same essence, but is manifested in a great variety of different forms. Of the principle of life, per se, we know absolutely nothing. During all the ages of the past it has eluded discovery and, judging the future by the past, it never will be found out. Life is the deep secret of nature that is not for man to know, and both its coming in and going out is equally obscure and mysterious.

Every day we meet in the open many kinds of life, but seeing them
often makes them familiar and common, and they fail to impress us. Only the unusual and rare things of life attract our attention and we are forever hunting something new and curious. We might find the common things in nature just as wonderful as are the rare, if we would only stop and think. The smallest form of infinitesimal life is just as perfect in its organism and action as is man, the highest type of terrestrial life.

The reason of our not understanding animals any better than we do is because of our ignorance, and we might think more kindly of them if we knew them better. The inferior animals, as we are pleased to call them, are just as wonderful as man and are even his superiors in some respects, since they know and can do things that he does not know and can not do. It would at least be nothing more than fair to give to animals such credits as they deserve, instead of denying them everything, as is generally being done. There are manifold intellignces just as there are many forms of life, and each kind is sufficient unto itself. All animals live in a little world of their own, which they know and understand best. They have a language, or at least some means of communication with each other, even though man does not understand them. Man often assumes wisdom that he does not possess and says by his actions, if not in words, that what he does not know is not worth knowing. There are many things in life about which we may believe much and yet can know very little; and because of our lack of knowledge we often err grievously in judgment. If we only knew what the other creatures thought of us, we might not feel nattered by their opinion. Such an estimate would be turning the table upon ourselves, by putting the hunter in place of the hunted, which is something quite different. We want some kind of an excuse to hide our ignorance and grudgingly give to animals credit for possessing instinct, but deny that they have any intelligence or reason. They have our five senses and many of the mental faculties are alike common to man and beast—such as love, hate, fear, joy, anger, jealousy, imitation, memory—yes and sometimes, even reason. An animal can be taught like a child in many things and shows by its actions what it thinks of the treatment it receives. In recent years there has been a closer study of animal nature and a change for the better, showing a growing sentiment in their favor.

In the beginning the earth was entirely covered with water and enshrouded in darkness by thick clouds of vapor that hung in the sky.
After long ages and many changes, during which time the earth cooled sufficiently to admit of life, life appeared, first in the water and afterwards upon the dry land. It took countless ages to fit the earth for the habitation of living things, but just as soon as the conditions were right, life sprang into being. All life has its origin in water and is, therefore, water born. Oxygen is necessary to animal existence and is obtained either from air or water. Man is no exception to the rule and though he has reached a high state of development, even yet he clearly shows his origin by living exclusively in water during nine months of fetal life.

Not all animals are suited to the same environment, but often live under diverse or opposite conditions. In the case of fish, some live wholly in salt water, while others live in fresh water, and to change from one to the other means death to either. However, there are exceptions, when salt water fish make brief excursions into fresh water without harm, as is true of the salmon during the spawning season. Life can only live and nourish in the environment to which it is naturally adapted.

Amphibious animals, like the frog, live both in the water and on land. While the frog remains a tadpole it functionates as a fish, but soon changes into a land-going animal. It loses its tail by absorption and develops legs instead of fins; and is able to creep and hop. The gills which extracted oxygen from the water, are replaced by real lungs that breathe and take oxygen from the air. Many marvelous changes occur in nature that seem like miracles, because they are new and we do not understand them.

Deep sea dredging has brought to light much new and curious life. The abysmal depth of the sea is pitch dark and almost cold enough to freeze ice, which is due to the flow of cold water from the Arctic Ocean to the Equator. It was thought, for a long time, that in this dark and cold underworld no life could exist, but investigation has found it teeming with interesting life. Many kinds of fish, of strange forms and bright colors move about through the water in perfect comfort. The weight of ocean water at a depth of 2,500 fathoms is two and a half tons to the square inch and increases with depth. An ordinary fish would be crushed by this heavy weight, but the abysmal fish is so organized that it receives no injury. The tissues are soft and porous and freely permeated by water, so that the animal is practically a part of the water which surrounds it. However, when one of these fish rises out of its
natural zone, it loses its self-control and shoots rapidly upwards to its death. The reduced pressure liberates a gas that fills the tissues and causes the fish to swell up and explode. They are mostly without eyes and blind, but have a fine touch and feel their way automatically. Some of them, also, are endowed with an auto-lighting apparatus of specialized organs, that produces a luminescence, which serves the purpose of eyes and enables them to find their way and take their prey.

It appears to be just as dangerous for shore fish to descend into great depths as it is for a deep water fish to rise to the surface. Each variety of fish is adapted to its own sphere of activity and can not change its habitat with impunity; which is likewise true of all animals. When a whale fills its lungs with air and "sounds," its body is subjected to a considerable increase of pressure that is borne mostly by the ribs, but becomes dangerous only when the animal dives deep enough. Several such broken and repaired bones have been found in skeletal remains, which show that denizens of the briny deep, like land animals, are sometimes the victims of serious accidents.

The atmosphere is much lighter than water and exerts a pressure of fifteen pounds to the square inch at sea level and diminishes with altitude. An adult man supports between twelve and fourteen tons of air as he moves about upon the earth, but without feeling any sense of inconvenience. The atmosphere is his natural element and necessary to his existence. Atmospheric pressure exerts an important influence on life, as it helps to regulate the vital functions. Its effect upon the human body is similar to the action of the governor on the steam engine, or the pendulum on the clock; and when such control is lost the machinery runs wild and rapidly wears out, or suddenly goes to smash. Under reduced atmospheric pressure the action of all the vital organs is increased; the heart becomes excited, pulse rapid, and the respirations more frequent. Atmospheric pressure is an important factor in climatology and can be used with benefit, either as a stimulant or sedative. At sea level it is a sedative, but altitude makes it a stimulant. As a rule, any patient who is afflicted with organic disease should stay near sea level and not venture into a high altitude, as death might be the result. Formerly it was inferred that the rapid breathing caused by mountain climbing was due to an insufficiency of oxygen in the air, but later it was discovered that the lack of oxygen was not in a deficiency of oxygen in the air, as it is proven that the same proportion of oxygen is present everywhere; but under the diminished pressure of a high
altitude the lungs fail to absorb the required amount of oxygen to supply the physiological need. After some time has elapsed and the lungs have become accustomed to the change, they are again able to take up the normal quantity of oxygen, and even more, with the result of an increased amount of hemoglobin and red corpuscles in the blood. Observation and experience both teach that when any decided change is made in altitude or environment, it should be gradual, in order to avoid any serious disturbance of the vital functions. A real advantage may be gained by a change in climate or environment, if made judiciously, but it has its limits and must not be carried to extreme.

The whole trend of civilization is to alter primal conditions and change the natural into the artificial, which is not always an advantage. The tendency of civilization is to create congestion and excitement, by crowding the people into cities, which is an artificial and unwholesome existence that is destructive of the integrity of the human race. Back to nature! Back to the land! is the despairing cry of humanity, that should be heeded and obeyed. Artificiality may seem good on the surface, but has no depth and is deceiving and false. Excessive development in any direction produces hypertrophy, an unnatural and dangerous condition that, under the natural law of reaction, is sure to rebound and end in ruin and death.

Nature is able to do things on her own account and needs no assistance. She works by a plan of evolution that builds upon a sure foundation from the bottom. Man's puny efforts may obstruct, retard or change her course, but can not stop her. He is ever striving to improve on nature, but is only wise in his own conceit, and every attempt that he makes to do the impossible can only result in failure. He may be able to influence her mildly, under favorable circumstances, but not to the extent that is sometimes imagined. With all of his ingenuity and striving, he can not equal or supersede nature. The truest thing in the universe is nature; but if nature is not true, there is no truth.

The colossal egotism of man is astounding. He is full of conceit and puffed up with self-esteem. He seems to think that the world was made exclusively for his own use and benefit, and that his intelligence is the sum total of all knowledge. He imagines vain things and strives continually after the unattainable. Civilized man takes great credit unto himself because of his diversified accomplishments and vaunted progress and forgets nature. But of all his works there is nothing
permanent; changes occur continually, as nations rise and fall. Man
goes marching up and down the earth, ripping up the ground, felling
forests, leveling mountains and filling up the valleys in his conquest of
the earth, and destroys everything that he touches. He makes a
plaything of life, as if it were a toy, and kills or tortures every living
thing that crosses his path. The savagery, brutality and vandalism of
the present European war is without a parallel in the history of the
world, yet some of the belligerents claim that it is being conducted in the
name of civilization, science and culture. Compared to such wanton
destruction, primitive life was a paradise and aboriginal man an angel.
By the record, man's last estate is worse than the first and what it will
yet be, who can tell? Life does not depend upon man's assistance, and
indeed nourishes best without his help, or the aid of eugenics and
wealth that are being used to make over the world into a Utopia; as life
existed before any of these things ever were, and never has been, nor
ever will be dependent upon them. In the last analysis, life was from the
beginning and by immutable laws works out its own destiny.

True greatness in man is inherent and natural, which fact is not always
recognized nor appreciated by the average mortal. All great men have
come from humble sources and were self-made. Nature's plan of creation
and growth is so profound, complex and mysterious that it is beyond the
power of man to know or understand; but in every emergency or crisis
of life the right man is always found to take command.

"I passed a stagnant marsh that lay
Beneath a reeking scum of green;
A loathsome puddle by the way,
No sorrier pool was ever seen.
I thought, how lost to all things pure
And white those foul depths be.
Next day from out that pond obscure,
Two queenly lilies laughed at me.

"I passed a hovel round whose door
The signs of penury were strewn.
I saw the grimed and littered floor,
The walls of logs from tree trunks hewn.
I said, "The gates of life are shut
To all within that wretched pen;"
But, lo! from out that lowly hut,
Came one who ruled the world of men."

PRENATAL CARE.

PAULINE M. BEUCLER, M.D., LOUISVILLE, OHIO.

One of the most trying conditions a woman faces is during the period of gestation, especially when pathological conditions are present, and these cases are becoming more numerous, brought on probably by changed conditions or mode of living.

While the condition is a physiological one, the woman who experiences little or no distress is the exception, for the gravid uterus is subject to displacements during the early months, and as it increases in size, through pressure and decrease of normal blood supply to the various organs and nerve centers, what was at first a physiological condition may become a pathological one.

Nevertheless, the subject is one of universal interest, and is attracting more attention now than in years gone by, when pregnancy was mostly considered a sickness that would pass away in nine months, and any suffering experienced was believed by many to be perfectly normal at that time, or had to be, seldom seeking relief, as little or no attention was bestowed on the prospective mother. This neglect led many to have recourse to the advertiser for a painless birth, as the agonizing pains of a normal birth are such when nature is left to itself, that many seek to eliminate some of the sufferings, and facilitate the final expulsion of the child, as is demonstrated by the agitation “Twilight Sleep” has aroused.

Yet it would surprise many how a feeling of buoyancy and well being can be established, relieving the worry and anxiety experienced by most women during that period, preparing them for a safe and easy delivery. I will not take up your valuable time entering into the details of hygiene, diet or treatment for the various disorders that may arise, but will just touch on the general treatment, which consists of free elimination, especially with “diuretics” and uterine tonics.

From the observations on a few cases where labor had always been difficult I have found that where free elimination had been maintained with diuretics and uterine tonics, labor was shorter and easier than
where uterine tonics alone were prescribed. Also when uterine tonics with digestives were prescribed, the labor was more tedious, as patients on that treatment gain in flesh, and the muscles become firmer. Whilst where free elimination is maintained with diuretics patients are apt to lose a little in flesh, the child, while well nourished, is not apt to be over-developed and the muscles are more elastic, labor terminating in less time, owing to the softened and relaxed condition of surrounding tissues. As the system is thoroughly flushed and waste products carried away, pathological conditions yield, finally doing away with much of the useless sufferings some women must contend with during this trying period of their lives.

**THERAPEUTICS OF EYE, EAR AND THROAT DISEASES.**

HERBERT T. WEBSTER, M.D., OAKLAND, CAL.

Little things in practice are those which go far toward making the success of the medical man. Of course, the big money comes from surgical operations, but the surgical practitioner who is incompetent in small matters is not liable to attract a very large clientele, and his important cases are, therefore, apt to be far apart. It might seem that in these days of specialists there will be little use for a knowledge of remedies in the eye, ear, nose and throat specialty by the ordinary or family physician, but even in these piping times the family physician is a lame duck if he neglect such matters, for it is an unfortunate fact that view specialists, especially among the elect or old school, are at all informed on this important subject.

Many cases of eye disease, in the hands of specialists, are allowed to drag along for months on local treatment, when the properly selected internal drug will either alone or in conjunction with local measures speedily bring them to a successful end. The essential matter is in the knowing how, and the knowing how consists in a study of the therapeutics of the eye, ear, nose and throat—the specific therapeutics. Of course, specific therapeutics can not be applied with the positive knowledge that attends mechanics or other arts, but it may come so near perfection as to prove of great assistance. I believe many cases drag along under the management of specialists that may be speedily cured by the family physician if he is well up in his materia medica. True, there may be some failures, but who is there among specialists
who does not frequently fail with his best applied local measures?

In all cities and many of the larger towns the specialist has almost entirely removed eye, ear and throat cases from the hands of the family physician, who speedily refers them to that authority in order to escape censure if good results do not follow his efforts; but after a failure in such hands the family physician may win laurels with his remedies attempting so-called hopeless cases. I know of at least one case of total blindness pronounced hopeless by the highest specialist authority, completely and permanently cured with drugs, and in a very short time, by an ordinary country practitioner. It will be impossible in an article of this kind to carry the subject out in all its details. I propose here to merely offer some hints and call attention to some remedies which should come to mind in these cases.

I fear my title is something of a misnomer, for a full discussion of the subject would fill a small volume. It is my intention to only briefly refer to a few of the principal remedies to be employed in this direction. Space for more than this would not be allowable in an article of this kind. I shall, therefore, content myself with the grouping of a few remedies for each of these specialties, with brief remarks upon their applicability.

EYE REMEDIES.—I do not expect to mention all the useful remedies in the treatment of ocular affections. My experience is only one in many thousands. If all the knowledge possessed by many observers were recorded a long list would be at our service. Only those which have been of striking benefit to me in my experience will be referred to. Possibly results in my own practice may not coincide with the experience of others, though they may at least serve as hints upon which to draw when the practitioner is confronted with similar cases. The first trial with a remedy in a given case will often decide its fate with a novice. If it fail, then it is usually discarded for good. If it succeed in the first instance it is given further trial, and several successes with it give it a standing which can not be undermined by an occasional failure. By long use, then, a diligent practitioner gradually becomes attached to a line of remedies in which his faith is so firm that no skeptic can disturb it.

In this article I will limit my remarks to the following eye remedies—aconite, bryonia, conium, euphrasia, kali mur., phytoacca, pulsatilla
and rhus tox.

Aconite.—Aconite, alone, is rather a feeble eye remedy. It acts best in combination with other agents, though it is of benefit in all cases of acute inflammation. In conjunctivitis it combines well with rhus tox., phytolacca and pulsatilla, and in rheumatic ophthalmia with macrotys, rhamnus cal. and other agents. In painful affections of the eye it is soothing, assisting in relieving spasmodic action of the ocular muscles, and thus aiding in relieving the acuteness of intense inflammatory pain. However, we can not expect much except auxiliary aid. Some Homeopathic authors consider it highly in sudden inflammation of the eyes, with great swelling of the lids and watery discharge. This would differentiate it from rhus tox., which is applicable to conjunctivitis without much pain and with mucous or muco-purulent discharge. In the first place, aconite would combine well with euphrasia, and in the second with rhus.

Bryonia.—This remedy possesses a specific affinity for the retina, and has made some wonderful cures of retinitis hemorrhagica. In my own case, a partial loss of sight following a severe attack of grippe, in 1889, was entirely removed with it in a few weeks after persisting for several months before its use. It seems to exert a reparative influence, promoting the nutritional power of the part. The practitioner will seldom require it, but when called for it is a remedy of great importance.

Conium.—This remedy is valuable in lack of proper accommodation. Headaches arising from this cause demand it. Sensitiveness of the eyes to light from the same cause will be much benefited by it. It is thus a fine remedy for some cases of photophobia. Aching in the occipital region referable to the optic centers call for its administration. It also exerts a curative action in nutritive faults of the eyeball, and has cures of corneal ulcer to its credit. Tired feeling about the eyes with slow ocular movements and giddiness. I believe that high attenuations often do better than material doses; at all events, the dose should be very minute.

Euphrasia.—This remedy applies chiefly to acute inflammation of the conjunctiva attended by profuse lachrymal discharge accompanied by extension of the inflammation to the nasal passages. Fluent coryza calls for its administration, and it relieves many of the attendant conditions, and where such cases lead to such chronic affections as corneal
ulceration the incipient stages may be controlled by it. In the early stages of what was termed strumous ophthalmia in olden time, its action is often of service, though its most reliable place is in the early stage of fluent coryza. The catarrhal stage of measles, when the eyes and upper nasal passages are coincidentally involved is an appropriate place for its exhibition. I regard it as a remedy for superficial affections of the conjunctiva attended by much lachrymation, and seldom employ it in other cases, for I believe we have better remedies when deep tissues are involved. We have better nutritional remedies and better remedies when the connective tissue, or even the deep part of the conjunctiva is affected.

Kali Mur.—This agent can hardly be considered a specific eye remedy, though it is often almost indispensable in inflammatory conditions of the eye involving connective tissue. We might better term it a specific for inflammation of connective tissue. In eye inflammation accompanied by chemosis and attended by invasion of the cellular tissue of the cheeks and other parts, kali mur. is an important medicine. I employ it in such conditions in alternation with rhus tox. with perfect confidence that early good result will follow. Even alone in such cases one may pin his faith to it.

Phytolacca.—Few practitioners appreciate the value of this common remedy in eye affections. It is a remedy for chronic or subchronic states. Its action in the early stages of trachoma or granulation of the lids is prompt and satisfactory, the granulation soon disappearing without local treatment through the systemic action of the drug. I have observed this effect in many cases and invariably prescribe it when children are brought to me with such a condition. It is almost as reliable in blepharitis ciliaris, and even when ulceration is present in such cases I expect much from it. It should always be given during the treatment of trachoma and chronic lid troubles, even though local measures are being employed. Well diluted, it serves a valuable service as a collyrium in such case, though I have usually depended upon its systemic or specific effect. Cures of fistula lachrymalis have been reported with it, though I have never had occasion to give the remedy such a trial.

Pulsatilla.—Pulsatilla, in its specific ocular action, affects especially the eyelids, though obscurations and hallucinations of vision may call for it. It differs from rhus tox. in acting best where the conjunctival discharge is thick and yellowish green in character, the catarrh in rhus tox. being
Rhus Tox.—I use this remedy more frequently than all other eye remedies known to me. In general practice it comes into requisition so frequently as to be a common standby. It is almost invincible in ordinary acute untraumatic conjunctivitis. As an illustration: Less than a year ago while visiting the family of an old and steadfast patron, the father of several children, I was informed that one of the boys had brought a case of pink-eye from school and it had spread to all the children in the family. I had been called for another purpose, for the parent did not suppose that in this day of specialists I could do anything in the eye matter, and had a fortnight before consulted a specialist, who had supplied him with an invincible collyrium, supposed to act promptly and cure every case, but no improvement had followed and discouragement was rampant. All were surprised when I informed them that I believed I could prescribe a remedy which would cure without delay. I was urged to do so and left rhus tox. in appropriate doses. Much satisfaction was expressed later, for marked improvement was manifest in three or four days, and before the end of the week all were well. Much astonishment was expressed that an internal remedy could thus speedily accomplish a cure without local measure.

Rhus speedily removes the stye habit. Rhus has cured it for my cases after years of persistence in a few months. I always speak with confidence when prescribing it for such cases, because it has never failed me. Not long ago a mother called with her little girl, a child of about seven years, with a complication of troubles, among which sore eyes was one of the complaints. A conjunctivitis of several weeks' standing had at length brought on a small granular growth over the sclerotic, not far from the cornea, the growth being on the conjunctiva. Phytolacca and rhus were prescribed for this, and when the child appeared a fortnight later the eyes were entirely well. The remaining ailments were banished by the later prescription.

Not only does rhus manifest a surprising influence upon the eyes, but the tissues of the face surrounding them respond to its influence. I have cured erysipelatous eczema of the face of years' standing with it,
without any local application.

EAR REMEDIES.—The list I shall offer here is not very extensive, and could probably be much extended by those who have had a wider experience in aural affections. The general practitioner, however, will find it worth study. I will mention aconite, belladonna, calcium sulphide, mercurius, pulsatilla, phytolacca and silica.

Aconite.—Aconite will seldom be used except as an auxiliary. In acute otitis, due to sudden development from exposure, with high inflammatory grade, attended by severe pain, it combines well with pulsatilla to assist in controlling the first stages of the attack. It modifies the severity of the condition and assists the true specific—pulsatilla—in controlling the local inflammation. Under its influence the pain becomes less severe and the inflammatory action less acute.

Belladonna.—Belladonna will be a substitute for aconite where otitis is attended by evident cerebral complication. It exerts little influence except in such cases, and should be combined or alternated with pulsatilla to prove of much satisfaction.

Calcium Sulphide—This remedy is applicable to suppuration of the middle ear, though not very reliable alone. In alternation with silica, I believe it hurries the cure where the otorrhea is profuse, suggesting breaking down of soft tissue. Involvement of bony structure is beyond its power for much good, but it acts on suppuration of soft parts more speedily than silica, and thus aids the action of that remedy. I would hardly think of depending on it alone.

Mercurius Solubilis.—In subacute otorrhea this agent will sometimes be found of excellent service. When the purulent discharge is mixed with blood, especially if there is nocturnal aggravation of the pain, attenuations of this remedy may be expected to render signal benefit, and even effect a cure. Such cases will be found following scarlatina and measles. After the discharge has continued for a long time we can not expect much from it. The 6 x attenuation, in small doses, at the strongest, should be employed.

Pulsatilla.—This is the stock remedy for all inflammatory diseases of the middle ear. More than that, it relieves pain when inflammation is not
marked. It is the specific remedy for that rather common affection among children and some adults—earache. It relieves almost certainly without local application, though a pledget of cotton moistened with the same remedy undoubtedly assists. It is a better application than laudanum, a very common nostrum among a large run of the profession and an ordinary popular remedy. In acute otitis media, either alone or combined with aconite, belladonna or gelsemium, as indications suggest, it relieves the pain and controls the inflammatory action. Unless the mastoid cells are invaded it is the remedy to tie to throughout. In chronic suppurative otitis it is the remedy for painful aggravations, alternated with silica or calcium sulphide. With this remedy to assist the action of the remedies for suppuration one may feel very confident of managing such cases with the greatest satisfaction, even after most specialists have given very poor service.

Silica.—There is nothing like silica for chronic suppuration of the middle ear. Its continued use will hardly ever fail, if a cure is at all possible, and few cases will resist its action. It is the remedy in all cases of suppuration of bone, as well as of suppuration of the soft parts anywhere, and if it acted only in suppuration of the middle ear it would be a remedy of untold value to the practitioner. In early cases it might be well to alternate it with calcium sulphide, especially if the discharge be profuse and thick, but in long-standing cases it might be as well to depend upon it alone. Of course, one must expect to prolong its use for months in order to affect a cure, but the result will justify faith in it. Painful states of the ear arising from cold may call for the occasional alternation of pulsatilla until the pain ceases, and mastoid complication may call for surgical interference; but so long as suppuration continues the remedy must be persistently administered. The 3x or 6x attenuation should be preferred, the 6x often doing the best service. It is a remedy largely neglected by specialists.

Phytolacca.—Dr. Kent O. Foltz (Dynamical Therapeutics) referred to this agent under ear remedies as follows: “In hypertrophic non-suppurative otitis media, the internal administration of phytolacca has given good results in my hands; tinnitus has been relieved, and improved hearing has followed. In syphilitic cases also I have had good results from the use of this drug.”

NOSE AND THROAT REMEDIES.—Aconite. The specific action of this
remedy on the mucous membrane of the throat can be well demonstrated by anyone who will touch the tongue to a vial of specific aconite. It is an excellent auxiliary in all cases of acute inflammation of this part. While a valuable remedy alone in acute inflammation here, it is best to combine it with other remedies, for, though it controls inflammatory action, it is not reparative in its influence. While it does well in controlling inflammation, it does not impart so much of a healing influence as some which combine in therapeutic action with it. It exerts little beneficial influence in chronic inflammation, and we will do best to reserve it for acute cases.

Anemopsis.—While it can hardly be claimed that anemopsis is specific in action, its local influence in catarrhal inflammation of the Schneiderian membrane should be borne in mind. I have had the best of results in douching the nares with a weak solution of this agent. From ten to twenty drops of the specific medicine to the ounce of water constitutes the strength, the solution being poured into one nostril, while the head is thrown back, and allowed to escape through the nostrils while the throat it closed by the soft palate and the head tipped forward. In chronic cases, where granulations exist, the addition of a minute quantity of thuja assists.

Baryta Carb.—Carbonate of baryta is specifically adapted to tonsillar enlargement with patulous and irritated follicles, often filled with cheesy concretions. This is a condition frequently encountered and seldom benefited by ordinary throat remedies. In some of these cases abscesses may form about the bottoms of the pockets upon slight exposure to drafts and occasion frequent disagreeable complications. The fate of a child thus afflicted is commonly submission to excision or enucleation of the tonsils, but in my experience faithful adherence to small doses of baryta carb., 3 x, will result in a permanent cure without resort to surgical measures. The remedy should be continued for several months and improvement may not be marked at first, but perseverance will bring its reward. I can look back to many cases of this kind thus cured permanently, some of them now being the heads of families, with good and perfect throats. Not long ago the father of two growing children complimented me upon my success in his own case accomplished when he was a boy of fourteen. He is opposed, it is needless to observe, to removal of the tonsils in children.

As a remedy for the abortion of quinsy, baryta carb. is not to be
despised. If begun early it will often cut short a threatened attack of this affection. Alternated with kali mur., in appropriate dosage, I have been well pleased with its action, and it serves alone, between attacks, to fortify the tonsils against the invasion of disease. However, a subject of quinsy seems a tough customer against any precaution in every instance.

Berberis Aquifolium.—This remedy comes in when we have a case of chronic pharyngitis with much catarrhal complication. It is also good to remember in granular or follicular pharyngitis. Its action is slow, but persistence with it will bring satisfactory results in many cases. Even where it is necessary to employ local measures to destroy granulations or enlarged follicles, the constitutional effect of this remedy is to be desired. It is a restorative to the mucous membranes of the pharynx and upper respiratory passages not to be despised.

Guaiacum.—This is the remedy for painful or aching cases of pharyngitis. It is an age-long remedy for rheumatism, and is supposed to be adapted to cases of pharyngitis in which rheumatic aches involve the throat, but whether it is superior or even equal to phytolacca here is doubtful. It has a reputation also in tonsillitis (acute).

Kali Bichrom.—This remedy is indicated where there is exudation from the mucous membrane of the throat. This may be stringy, tenacious mucus, white and glairy or tinged with blood, or a false membrane. Membranous diphtheria, or croup, with ulceration of the tissues calls for it. It is hardly a remedy for chronic cases, though syphilitic ulceration might be named as an exception. It is also a valuable remedy in subacute coryza, to follow the action of euphrasia in the earlier stage. I use the 2 x or 3 x trituration.

Mangifera.—This remedy exerts a speedy, soothing influence on the mucous membrane of the throat in pharyngitis when much burning or smarting attends. It is a good running mate with phytolacca, though it acts more quickly to produce a soothing influence, and lacks the property of relieving so readily the muscular pain which attends epidemic cases of follicular tonsillitis. I order the patient to gargle first and then swallow. Of course, in diphtheria the gargle ought not to be swallowed, but in ordinary cases of angina there is no objection. What I desire is the local action combined with the specific action. Many prefer mangifera to phytolacca in all cases, but there are many in which
phytolacca is preferable. Minute doses of aconite combine well with mangifera in this use of it, and I usually join the two. I have treated numerous cases of acute sore throat with it in which the patients would afterward call for “that red medicine” when another attack occurred. Its beneficial action is so prompt that it impresses the subject with its importance. Add from one to two drachms of the specific medicine to four ounces of water, using a teaspoonful every hour.

Penthorum.—This was Professor Scudder’s favorite remedy in chronic pharyngitis and is probably the most reliable one we possess, though its use must be persevered in a long time in order to get results. I have proven this to my own satisfaction. Probably the most adaptable cases are those of pharyngitis sicca, though it need not be confined to them. It influences the nutritional powers of the pharyngeal mucous membrane—a true restorative. The following extract from Scudder’s Specific Medication covers the facts: “It has proven the most certain remedy in pharyngitis that I have ever employed and has given such marked benefit in disease of the superior pharynx, posterior nares and Eustachian tubes that I should not like to treat these cases without it. I have also used it with the spray apparatus in nasal catarrh with most excellent results.”

Phytolacca.—Everybody knows about this grand old remedy in throat affections. However, an article of this kind would lack completion without a notice of it. The particular place for this remedy in preference to others is epidemic or seasonal cases of acute follicular tonsillitis. Such cases are attended by marked constitutional disturbance—fever and muscular pain. This does not exclude the remedy from adaptation to all forms of pharyngitis and tonsillitis, for it finds a place in all cases of angina. Enlargement of the lymphatic glands as a complication is also a particular indication for it. It reaches much farther than mangifera as a constitutional remedy, acting on the muscular system and cervical lymphatics. Aconite, I believe, enhances its action in acute cases, and I invariably combine it in instances of the kind.

Neither baptisia nor echinacea can be considered a throat remedy in a specific sense, except so far as constitutional influence is concerned, yet neither is to be forgotten where sloughy tendency is manifest, and in all cases of angina, echinacea in dilution of one to four or less, constitutes an excellent soothing and healing gargle.
WHO ARE ECLECTIC PHYSICIANS?

To those who may wish to be enlightened on this subject, I may be permitted to remark that the proper sources of information are not to be found in the tirades of abuse, libels and misrepresentations of its enemies, but rather in the teachings of those who are its exponents. If you wish to ascertain the truth of the Christian religion, you do not ask the infidel; so also, if you desire an explanation of the laws governing the movements of the heavenly bodies, you do not question an ignoramus or an illiterate.

Articles have been written, speeches made and arguments advanced against Eclecticism by intelligent physicians, which never touched the veriest outposts of the Eclectic doctrinal fortifications. Therefore, we can not think it strange that the public is ignorant of them. Taking the dictum of the family physician in regard to the matter, as the physician takes the assertions of his teachers in college, without question or cavil, opinions are formed which are utterly absurd and ridiculously erroneous.

The only true way to study any system of medicine is to test it practically at the bedside in treating the sick. Theorizing is an extremely poor substitute for practical work. “Why,” you will exclaim, “our doctor says he is Eclectic in treating the sick; that he makes use of the best remedies taken from any and every source.”

Yes, we know all about that. If you are of an investigative turn of mind, the next time you are in your doctor's office, ask him to let you see an Eclectic or Homeopathic work on the practice of medicine. Ten to one he can't do it. The writer has met a goodly number of such old school doctors, who, out of interest, profess to be Eclectic, and as yet he has failed to discover one who possessed Eclectic works in his library.

To answer the questions intelligently, “Who are Eclectic physicians, and

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1 Prepared for distribution to the laity at the request of the “Committee on Pamphlet Literature” of the National.
what is it that is denominated the Eclectic school of medicine?" it will be
necessary to briefly sketch from 1827 to the present time.

A BRIEF HISTORY OF MEDICINE.

The Eclectic system of medicine had its birth in a popular conviction
that the old school system of medicine (call it Allopathic or Regular, if
you wish) was erroneous in its principles, unsuccessful, unpleasant and
murderous in its practice; in fact, dangerous to the lives and health of
those who were compelled to employ it.

One has but for a moment to consider the character of this “regular”
practice during the early part of the last century to fully comprehend
the motives which prompted the principal actors of the Eclectic school in
the organization of a new school of medicine.

Disease was looked upon as an entity—a devil, as it were—to be
removed by violent means; a state of over-activity, to be reduced by
antiphlogistic or tearing-down treatment. Whatever the malady,
especially if acute, every means employed debilitated the patient, and it
was only when the extreme prostration forbade the further employment
of these methods —then, and then only—that a stimulant and tonic
treatment was adopted. The patient was picked up upon the point of the
lancet, carried to the brink of eternity, and then every art made use of
to bring him back.

After blood-letting came free purgation, mercury in its different forms,
antimony to sicken the stomach and relax the system, blisters, with
medicine in large doses to influence the kidneys and skin. They were
used in the order named, and as rapidly as possible. The purgative
followed on the heels of the lancet, mercury forming a part of it. The
calomel was then given for its constitutional influences by combining it
with opium; tartar emetic given to sicken the stomach and relax the
system and the blister proportionate to the extent of the pain or the size
of the part affected.

With such treatment the appetite for food was lost, digestion impaired,
and starvation added as a part of the regimen. Mercury and water were
thought to be opposed to each other, and, as the first was fully and
freely given, the latter was withheld for fear of salivation.
One must need have lived in those days and have seen the sick to realize the terrible character of the regular treatment of this “regular school of medicine.” The miserable patients, suffering from disease, were tormented continually by nauseant drugs, by unutterable sickness of the stomach, the torments of physic, the suffering from blisters and the terrible thirst, which, like that of Dives, cried to heaven for relief, but no Lazarus could cross the gulf and give the cup of cold water to moisten the parched tongue. The blisters were drawn, clipped and poultered, and not infrequently the odor arising from them could be recognized as soon as the door of the house was opened. “For fear of taking cold” patients were unwashed, clothing and bed clothing allowed to become dirty; dirt and bad odors, indeed, were characteristic of the treatment “by authority.”

The mortality was large, ranging from 10 to 50 per cent. in the ordinary diseases of the country. So imminent was death under such treatment that many people refused to call the physicians, if it were possible to be avoided, preferring to trust nature and domestic remedies. The increased death rate might have been borne (for the dead are relieved from suffering), but the slow convalescence and the frequency of chronic diseases of the stomach, bowel and liver, following the simple diseases of the country, informed the people in language that could not be misunderstood that there was a serious wrong in the practice of the day.

The diseases following the treatment were of a character not well mistaken—the loss of teeth, decaying bones, diseases of liver and bowels, mercurial rheumatism, and other affections too numerous to mention. The frequency of these unpleasantnesses added to their already distrust in this practice. Many have witnessed all I have named; many have experienced some of it. To them it is an unpleasant reality.

This constituted the barbaric farce called “scientific medicine,” given by the old school to suffering humanity during the first half of the last century.

ECLECTIC ORGANIZATION.

The earlier Eclectics were a sturdy class of men. Seeing the wrongs of
the medical practice, noting its disastrous results, and knowing the
superiority of milder means, they did vigorous battle for what they
deemed right and against what they believed a gross wrong. Believing
that the “Regular” treatment was killing thousands and wrecking the
health of millions, they said so in plain English.

On May 3, 1830, the following was adopted by the “Reform” Medical
Society of the United States:

Resolved, That this society deems it expedient to establish an additional school in
some town on the Ohio River, or some of its tributaries, in order that the people of the
West may avail themselves of the advantages resulting from a scientific knowledge of
botanic medication.

In accordance with the resolution a college was established at Worthing-
ton, Ohio, in 1832, under a university charter obtained by Bishop
Chase, Prof. T. V. Morrow, being the leading spirit.

“Martyrs are the seed of the church,” and the persecutions meted out to
pioneers of the Eclectic practice in those early days had much to do with
its wonderful growth.

In 1842, this college was removed to Cincinnati, Ohio, and, in 1845, the
Eclectic Medical College was chartered in its stead by special act of the
Ohio legislature. To-day it stands with few equals, and no superior, in
point of wealth and the thorough training it gives its numerous
students. It is the oldest Eclectic medical institution of America.

At the organization of the American Medical Association (old school) in
May, 1847, quite a respectable minority of progressive, liberty-loving
medical men rebelled at being bound, as it were, in medical slavery.
They believed the practice of medicine of the day a wrong, and the code
of medical laws that they were asked to subscribe to an infamy, and
they had the manhood to say so. For doing this they were hounded by
ridicule and persecution out from among their former associates.

The year following, in May, 1848, the National Medical Association
(Eclectic) was organized, and immediately proclaimed to the world, and
inscribed it upon their banner, that disease was an impairment of life
and not an entity to be removed by violent and pernicious drugs, but
rather by a conservative and supportive treatment. Dame nature should
be assisted back to health.
It will be noticed that it required only a year of organized social and professional ostracism, with a concerted effort to establish an Allopathic censorship over medical reformers (as the new school was then called) to make it necessary for the assailed to organize and accept a distinctive name, Eclectic (a word of Greek origin and signifies "I select").

ALLOPATHIC CLAIM TO ECLECTICISM.

There are many persons, who, while admitting of the truth of the above facts, argue that the Eclectic school of medicine has fully accomplished the objects of its organization; that the practice of the "old school" has been modified and changed, and is now altogether different, etc.; that the cause for the existence as a school is no longer present; that all schools are Eclectic in the sense that they choose the best from all sources.

While this is true of the Eclectics, and the progressive wing of the Homeopaths, our old school regular brothers have made their progress upon lines "more scientific than practical." With them the pendulum of medical treatment of the sick has swung to the other extreme, disgusted with their poverty-stricken materia medica of the past, they have adopted a policy of "watchful waiting" at the present, combined with ultra scientific laboratory work.

The following extract, taken from the editorial department of a leading "Regular" medical journal of a recent date, will illustrate to the reader how "science is worshiped" to the exclusion of the patient's interest by those who have ever claimed to be the medical salt of the earth. The article is entitled:

"DID YOU EARN IT?"

"Take that case of pneumonia. You were called immediately after the occurrence of the chill and had a splendid opportunity to study it throughout its entire course. It was a beautiful case—and the patient was so tractable, a nice young fellow, and lent himself so cheerfully to your studies. How beautifully you elicited all the classic signs—the increased vocal fremitus, the Skodaic resonance, the percussion
dullness, the bronchial breathing, bronchophony and pectoriloquy. What an interesting bacterial flora you found in the sputum—the diplococcus, of course. The urinary findings, especially as regards the low percentage of chlorides, were quite interesting and you spent hours studying the blood. The leucocyte count was rather low—said to be rather a bad prognostic sign; pity nothing can be done for such a condition.

“Whats that? Oh, he died. You know we really can do very little in a case of this kind. Of course, I provided a good nurse and give him oxygen at the last. But it was an extremely interesting case from a scientific point of view. Yes, I made—let me see—about thirty calls; got about $60.00 out of it—enough for a new Abbe condenser.”

“Did you earn it?

“And that case of typhoid? Sad case wasn't it? Mother in her prime—left three little children. Rather tough on her husband. If ever a case was studied with the utmost scientific precision that one was. Widal reaction positive on the eighth day. Diazo showed the changing colors in the urine beautifully. You incised a rose spot and found the bacilli typhosi in large numbers—also in the general circulation a little later. The splenic enlargement was most painstakingly mapped out. Your study of the sulpho-conjugate acids was an exceedingly careful one and served as a basis for your paper in the Journal.

“Treatment—let me see. Well, you see, the Widal was not positive until the eighth day, and there being some uncertainty regarding the diagnosis, I thought it unwise to administer any medicaments. Dieted carefully, of course. You know it is a self-limited disease. After that we gave the Brand baths. Yes, she was rather nervous about them—made too much fuss I thought. Can't say that they did much good; nevertheless, all the authorities now indorse this method. Stools? They were very offensive and there seemed to be an unusual amount of tympanites. Possibly this explains the large amount of the sulpho-conjugate acids—I shall look into it further. I took in about $150 on the case—bought the wife a new diamond ring.’

“Did you earn it? God forgive the scientific do-nothing—we can't.”

This outburst of truth coming from a medical editor who stands high in
the “councils of their faith,” whose membership is numbered by many thousands, is very significant and full of serious meaning. What he so aptly said of pneumonia and typhoid fever applies with equal force to all others. For be it known, they diagnose for a name to tag the malady with, while we diagnose for a curative treatment, believing that the patient and friends are more interested in a cure than the results of an extended laboratory analysis of the case, which takes valuable time, better devoted to medical treatment of the patient.

SPECIFIC MEDICATION FOUNDED UPON SPECIFIC DIAGNOSIS

As taught and practiced by the Eclectic school is a great advance and improvement over their practice of fifty years ago, and is as much ahead of the old school now as it was then. The early Eclectics were content in their efforts to abate the evil practices of the old school physic, and accomplished this. They trusted to their successors the developments that have since been made.

Eclectics give a remedy because it is indicated by certain well-known symptoms. They have studied the remedies of each school with reference to this matter—all that has been written for the past two hundred years, and they have carefully noted the cases where the remedy acted well, and where the symptoms were named. These experiments have been made to determine the “specific” or positive relationship of symptoms with the curative action of medicine, until at last the indications for its uses during the treatment of any given case of disease were defined. The entirety of specific medication has been built upon this. Chosen in this way, the action of a given remedy can be predicted and is entirely satisfactory in practice.

THE DIFFERENCE.

A remedy selected by this law becomes a powerful help to nature in her work of restoration and never reacts against the patient. The sick organ or part is simply helped back into a condition of health—medicine doesn't overshoot and hit the patient.
CLOSE WORK.

The Eclectic practice of medicine is no child's play. There is no routine about it. We treat diseases not according to their names, but according to their nature. The study of specific medication (based upon the law of choosing) for well-defined pathological or diseased conditions requires continual work, investigation and study. A man with a thimbleful of brains and no education may disgrace Eclecticism, but he can never practice it. Thus guided in the selection of his remedies, the Eclectic is not obliged to resort to “shotgun” practice in combining six to a dozen nauseous drugs in one prescription, but rather applies his remedies singly or in simple combination direct to the diseased part.

QUALITY, NOT QUANTITY.

The quantity of any medicine determines merely the intensity of the quality. The great thing is to get the right medicine in the right place. If we have not the right medicine, an increase of quantity will only make matters worse.

Some people will take a few doses of medicine from an Eclectic, and if it don't cure at once, they think there is nothing in it. But they will take large doses of strong, poisonous drugs and serums, week after week, and, though they do not improve, they think it is all right because the medicine has a big bulk and a powerful taste. They think it is doing something. Well, so do we. It oftentimes gives the undertaker a job. Sudden deaths from so-called heart failures are entirely too common; there is a cause.

When a patient dies under our treatment—for the windowless chamber of death is the destiny of all—it is never because he didn't have medicine enough, but because the recuperative powers of nature were not sufficient to repair the damage done the system by disease. Medicines can only assist in a cure.

IMPROVED MEDICINES.

The early Eclectics administered the various remedies principally in the form of infusions (i. e., teas and powders), but with the constant
investigation and progress of the Eclectic school came an improvement in the quality of the remedies used. With them the dirty, trashy, unreliable black tinctures and so-called fluid extracts that are in such common use by the old school at the present time to us are memories of the very distant past. They may be good enough for the "regular" doctor but to an Eclectic, who only appreciates the best, they are worthless. We use not only the granules, alkaloids, tablets, serums and vaccines, etc., manufactured by the leading chemists with established reputations in these lines, but also those peculiar to the Eclectic school.

A class of remedies termed "specific medicines," made from the fresh prime drug gathered in its proper season, free from dirt, and as entirely free from coloring matter as possible, prepared with the greatest care by carefully established processes regardless of expense, are the preparations. Being pure, their actions are positive, being concentrated, the dose is small and not so unpleasant to the patient.

**DISPENSING MEDICINE.**

The Eclectic holds that it is much better practice for the physician to largely dispense his own remedies at the time when they are needed. There is greater certainty that the remedies are good, less liability to mistakes, less trouble to the person or family, besides the saving of valuable time.

**CALOMEL.**

The extravagant use of this poison was one of the great evils that the Eclectics turned their attention to and opposed so bitterly. It is the abuse that Eclectics object to rather than the use of the drug.

Mercury, in its various forms, is used by all schools at the present day, although, through the untiring efforts of Eclectics, the method of its administration has been so modified that the harm resulting from its use is not so great as in former years.
ECLECTIC TREATMENT.

Our treatment is seldom unpleasant. It is not a fight with the little folks to compel them to take it, and a wry mouth with the big ones. Ours is safe, never followed by bad results. As the Irishman said, our medicines don’t “keep the patient sick four weeks after he has got well.” Old school treatment is unsafe, and frequently followed by painful and otherwise distressing consequences. Ours cures more quickly, because we relieve the diseased part direct, without affecting other organs. Theirs cures less quickly, because, owing to drug complications, it many times takes their patients as long to recover from their treatment as it does from the disease. Ours cures more surely, because, by treating the sick part directly without assaulting the physiological integrity of the healthy parts, “we husband all the life forces.” Theirs cures less surely, because of the mass of medicine given having indirect action, resulting many times in the establishment of “drug diseases” in healthy parts, for a drug disease uses up as much life force as any other of the same extent.

One of our recent writers very aptly remarked: “It may be unkind, though it is just, to remark that the Allopathic school has been fifty years in reaching some of the vantage points taken up by the founders of the Eclectic school of medicine, and at the present pace they will yet be many years in reaching others.

“It is no uncommon occurrence for 'Regular' medical journals at the present time to herald the discovery of a drug as possessing superior powers over certain conditions, while the same drug has been used for like conditions by the Eclectic school for a quarter or half a century.

“Eclectics have ever been progressive in their methods, and, as a result, there are as great differences between the schools now as fifty years ago.

“As a school we do not profess to be superior in all departments of medicine, but in the domain of medical treatment we do profess to stand supreme. All are agreed that this is the most important and the one to which all others are subservient. We do not refuse to accept whatever all others have discovered that is valuable, and in this way we enjoy an advantage which the old school waive by their refusal to accept the results of our observation.”
PRESENT STATUS OF ECLECTICISM—HOSPITAL STATISTICS.

When it comes to a comparison of the records of hospitals and treatment of epidemic diseases, the Eclectic school of medicine makes a very favorable showing. It cures more cases than the old school. Eclectics have proportionate control in some hospitals of the North and East, and their students have equal advantages with all others. The results of their treatment in curable cases has been entirely satisfactory; throughout it shows a lower death rate for the Eclectic practice.

ECLECTIC INSTITUTIONS OF LEARNING.

There are at the present time eight colleges and universities regularly chartered by the States wherein they are situated, and recognized by the National Eclectic Medical Association as being of good standing. The advantages possessed by these colleges for thorough medical training are fully equal to any in the land.

GOOD COMPANY.

The Eclectic practice is patronized mostly by that class of people who read, observe and think for themselves. In the north, east and west, where Eclectics are numerous and long established, a majority of the educated and most prominent people employ Eclectic physicians. The lower classes of society generally employ that class of doctors who give something so strong that two or three doses turn the patient inside out, or they will think “nothing is being done.” The greater the ignorance of the patient, the louder his demand for “strong” medicine when sick.

SCHOOLS OF MEDICINE.

There are three regular schools of medicine, the Allopathic, Eclectic and Homeopathic. They all study the same anatomy, physiology, chemistry, pathological anatomy, and microscopy, pursuing a regular course in each. In obstetrics and surgery they differ only in medical treatment. Let this fact be placed prominently before you—that in all the departments of medicine the three schools are alike, save in the important branch of medical treatment. One school is just as regular as
the other. The absurd position taken by the members of the Allopathic or old school of medicine, that they are the only ‘Simon pure’ and regular article in the market; that all outside their camps are ignoramuses, is too ridiculous to receive a moment's consideration from an intelligent person.

HOMEOPATHY.

Eclecticism extends the right hand of friendship to Homeopathy, and accepts all it has positively shown to have proven of value in the treatment of the sick, giving the credit where it belongs. Eclectics have reaped a valued harvest from the investigations of this medical school, which they have added to their own therapeutic wealth. In return, Homeopathy is indebted to the Eclectic school for the discovery and proving of many new and important remedies, chiefly from the indigenous medical plants of this country.

Homeopathy is a divided household. One-fourth of its followers give medicine in doses so small it would be very difficult to convince anyone as to its having an effect at all. The remaining portion buy Eclectic literature, patronize Eclectic chemists, and give their remedies in appreciable doses, studying the relationship of drug action to diseased conditions and with the exception of name and the minor details of theory as to “the why” of curative action of medicines, are, to all intents and purposes, Eclectic physicians.

And, again, the Eclectic school of medicine is non-sectarian in the fullest sense of the word. None more so “prove all things and hold fast that which is good” has been a cardinal principle with it from the very first, and “physician” (unlimited) applies with equal truth and force at the present time to each and every member. No educated medical gentleman is barred from a respectful hearing either at the bedside, in consultation or upon convention floor, in the free expression of his views. We are liberal and are willing “to give and take.” Eclectics and Homeopaths are oftentimes found thus working together for the general good of their patients, for they both hold many views in common, both treating disease not by name, but specific conditions as they find them in each separate and distinct case, and their excellent success in the cure of the sick fully justifies their well-founded belief.
No two human beings are exactly alike, and the exception emphatically proves the rule. The idea that disease and man are subject to the exact laws that govern in chemistry is not true, nor never can be, from the very nature of things, at least not in this world. If, then, every human being is a distinct entity, it follows that each one when ill must be treated in all respects according to his individuality. To attempt to lump them and their disorders under any given disease name for treatment, as our “Regular” old school friends do, is not only unscientific but absolutely confusing, thereby leading to an unsuccessful treatment.

PROGRESS OF ECLECTICISM.

Born less than a century ago, by a growth before unparalleled in the history of medicine, it has from its infant state developed into its present proportions. Never before has there occurred in the medical world so radical a change in the method of combating disease. Based upon demonstrated facts and not experimental theories, it has advanced and spread wherever education and intelligence predominate over illiteracy and dogmatism. Founded as it is, upon a law of nature and organic life, it will continue to make progress over all opposition. Being indigenous to American soil, it recognizes no monarchs and no serfs in the realm of intellect. Desiring the common good of humanity as its highest aim, it builds no barriers through which afflicted mankind may not profit by the combined resources of all the medical world.

The code of medical laws by which it is governed is as broad and kind as philanthropy itself. With its regularly organized and chartered colleges, its numerous journals and other periodic literature, its 10,000 practitioners and millions of patrons, its national association, its State societies all over this union and its medical works upon practice, teaching the most innermost points concerning a medical system which is exerting a liberalizing influence upon the whole medical world today—a system that is too broad for the partisan, too generous for the bigot, the Eclectic school of medicine will continue, as it has in the past, its efforts in this field.

“While the grass grows and the rivers run to the sea, Eclecticism, or The American Practice of Medicine, will be perpetuated.”
The Combined Annual Meetings of the National and Ohio Eclectic Medical Associations will be held June 19-23, 1916, at CEDAR POINT ON LAKE ERIE.

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