

VIRES VITALES SUSTINETE.

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TRANSACTIONS

OF THE

National Eclectic Medical Association

OF THE

UNITED STATES OF AMERICA,

FOR THE YEARS 1888-89.

INCLUDING THE

PROCEEDINGS OF THE EIGHTEENTH ANNUAL MEETING,
(AS REORGANISED), AT DETROIT,
MICHIGAN, JUNE, 1888;

TOGETHER WITH

ADDRESSES, THE MEDICAL SYMPOSIAC,

AND

PAPERS AND REPORTS

SUBMITTED.

EDITED BY ALEXANDER WILDER, SECRETARY.

VOL. XVI.

PUBLISHED IN BEHALF OF THE ASSOCIATION.

Every man is indebted to his profession, to elevate its character, increase its efficiency, and to elevate its usefulness and prosperity. Every physician should bear in mind that the Hippocratic Art is superior to the narrow sphere of a wage-earning craft.

ORANGE, N. J.:

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NINETEENTH YEAR.

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TAKE NOTICE.

THE NEXT ANNUAL MEETING WILL BE HELD AT
NASHVILLE, TENNESSEE,
ON TUESDAY, WEDNESDAY AND THURSDAY,
JUNE 18th, 19th AND 20th, 1889.

WHY PHYSICIANS SHOULD BE LIBERALLY EDUCATED.

Opening Address by KENT O. FOLTZ, M. D.

The question of what kind of education the modern doctor should receive has agitated the minds of the medical fraternity for years, but the discussion has been confined almost exclusively to the medical curriculum. The preliminary instruction, for the most part, has been ignored. Yet this is much more important. Without a liberal education before the branches of Medical Science are taken up, only mediocre results can be obtained.

Let us briefly glance at the requirements of some of the medical colleges of our country:

“Applicants for admission to the college must bring certificates of good moral character.” This clause we find in all the announcements, and of course we may presume it to be rigidly enforced.

One institution, which if it is not scientific is nothing, as shown by the emphasis on the word “*regular*” states further: “and must give evidence of at least a good English education, including mathematics and the elementary principles of physics.” In my ignorance I supposed mathematics and physics were included in all educational institutions, no matter what language was taught; but it seems these two branches are simply accomplishments, and are usually omitted from the regular course of instruction.

This inference, so far at least as regards the educational attainments of many of our scientific brethren, seems to be correct.

Another circular makes, it a little stronger, saying “Applicants are required to give evidence of possessing a good English education.”

A very noted school trots up to the mark with the following euphonious announcement: “Some of the States have recently enacted laws, by the requirements of which students not provided with literary degrees, or other certificates of scholarship necessary to the study of medicine, must undergo an examination before a State Board in the subjects of such preliminary study, as a prerequisite for a license to practice medicine

within their borders. That the graduates of this college may be spared the trouble incident to compliance with these regulations, all students intending to engage in practice in those States and such others as may desire it, will have the opportunity of undergoing such an examination before a committee of the Faculty, and will receive a certificate therefor.”

Another school tacks the foregoing to the following statement: “It is assumed that perceptors sending students to the college have satisfied themselves that their pupils have received proper preliminary education, and the college does not require a matriculating examination.”

“A fair English Education” is a common expression and I suppose comprises “the three Rs.”

Such requirements would be all very well if they were enforced, but the experience of the most of physicians is, that they only appear in the annual announcement, and beyond a few questions, which any school-boy of ten years should answer, are like many of our statutes, practically dead-letters on the books.

In no vocation is a liberal education so necessary for success as in the medical profession.

By a liberal education I mean all that the term *liberal* implies not simply a “fair English education” but a knowledge of the natural sciences, arts, etc.

By success I do not mean simply the acquisition of wealth, although this is usually no objection, but that expertness in curing the sick or warding off disease which we are all striving for.

The practice of medicine does not consist entirely in the giving of physic. In fact this is of minor importance in the majority of cases; for nine out of ten will get well without any medication whatever, and the tenth one will in all probability die easier without medicine than with it.

The physician is supposed to know everything, from the name of the latest discovered bacterium, to that of the eminent medical gentleman who presided at the birth of Abel. To confess ignorance on any subject which may be brought up, would be a step downward in the scale of respect of our self-appointed inquisitor.

A liberal education is an aid in many ways, but is only obtained by hard and diligent study on the part of the individual.

Some poor citizen wishes to know whether his water-supply is potable or not, and being unable to pay a competent chemist; and knowing also the unreliability of “Boards of Health”—maybe by bitter experience—he goes to his family physician and wants to know of him whether the water is fit for household use—it does not require an expert chemist to determine whether water is potable or not.

A plant is held in high esteem for curing some or all ailments, and is carried to the medical attendant for identification. Here a knowledge of Botany is useful. I might extend the list but it is useless.

A new novel is the rage and the opinion of the doctor is sought, and usually carries considerable influence.

In fact the modern physician should be versed on all the current topics of the day, as well as possess some knowledge of the sciences, manufactures, arts, etc.

A liberal education does not necessarily imply a collegiate course, but it does mean a correlation of the mental faculties with the senses; in other words, cultivation not only of the senses to the highest degree attainable in each person, but also the perceptive and reflective faculties, continuity, without which no one can succeed, and also comparison. These four are essential elements in the success of every one, and should be studiously cultivated, and it is not necessary to attend college for their improvement.

All the *mental* faculties, however, are important factors in the struggle for eminence and are the distinguishing marks which makes man a reasoning animal.

The doctor who is orthodox in medicine is also bigoted in all his views, consequently is unfit for his high calling.

Boards of Health and laws regulating the practice of medicine are annually being called for; ostensibly for the protection of the “dear people.” Is this the true reason for the clamor ?

Who is it that raises the hue and cry? Not the “dear people” by any means. Nor is it for their welfare that the demand is made, but for the protection of our very regular brethren who lack the energy and often the ability to progress.

The priesthood for ages would not allow the people to be educated. Why? Because their positions as dictators depended upon the ignorance and superstition of the masses.

The sectarian physician as he sees his following lessening, and the cemeteries growing plethoric through his mal-practice, sends up a howl for protection; in a manner similar to the priesthood, when they denounced the printing press as an invention of the devil.

The regular doctor talks learnedly of bacilli, zymes and phytes, and proclaims to the world: “I am the only scientific doctor.”

The art of printing has lessened the power of the priesthood, and every one has the chance of investigating for himself. The feudal days are past when the man on horseback ruled the country. The invention of gunpowder and the printing press put his henchman on the same footing, and the feudal lord had to come down.

The Dark Ages of Medicine, when incantations, sorcery, blood-letting and poisonous doses of nauseous drugs prevailed, have about disappeared and a brighter era is dawning.

Liberally educated physicians are using drugs in medicinal doses, for direct effects, and the terrors of medication as a result are lessened.

Of this class of doctors the Irishman's soliloquy no longer holds true “Be gorra! after a short sickness it took me six weeks to get well of the medicine I took.”

When the physician has received his diploma, he must not think that his medical education is completed, for he has only as yet learned the alphabet. The future is before him, and it rests with him whether it shall prove a benefit or a curse to the community in which he makes his residence.

The doctor must not, and the liberally-educated will not, think that he can get along by simply reading his text-books and the occasional

“sample copy” of a medical journal sent him. He should take, and carefully read, not only the best medical journals but also one or two good literary and scientific periodicals.

When I say carefully read, I mean understandingly. It does not require a man of brains to read Darwin, Haeckel, Gray, Carpenter, Howe, Scudder, Goss or John King, but it does require study, and intelligent study at that, to understand and be able to use the knowledge therein contained.

It is a common occurrence to hear a physician say: “If I had had the chance that Brown had, I would have been equally as successful.” I deny it. In this country of free schools, free libraries and cheap literature one person's advantages are as good as another's, and the use made of them lies entirely with the individual.

If he sits down and builds air-castles, or wishes he knew as much as Smith, or was as rich as Jones, what can you expect? Nothing above mediocrity at the best. However if he says: “I am not going to allow any man of equal ability to surpass me;”—employing his leisure moments usefully, the chances are, that he will attain a higher eminence than those of more brilliant mental powers who have not the same incentive.

The race is not always won by the fleetest. Those who study understandingly are on the vantage-ground in the struggle for superiority, and here is where a liberal education places the physician in the front ranks, not only of his profession, but also of the community in which he lives.

The way to elevate the standard of the profession is not by legislative measures, but by the efforts of individual physicians.

Let each doctor, when an applicant for medical instruction presents himself, ask the question mentally: Is the applicant the kind of a person I would wish my family or friends to employ? Am I willing to have it known that he is a student of mine? If both questions, can be answered in the affirmative, then careful enquiries as to the person's fitness for the profession should be made, and also whether the arduous duties pertaining to the calling are fully understood. If the answers are not satisfactory the best rule would be, always to discourage the aspirant at once from entering the profession.

The life of the physician is not composed of sunshine and roses without thorns, and many persons enter the field with very vague ideas of the bitter struggle that is before them. They are dazzled by the handsome turn-out of some successful M. D., but do not think of the years of earnest, persevering labor, that have been passed through before such results were obtained.

The demand everywhere is for intelligent physicians, and for such a wide field of usefulness is open, but it must be remembered that intelligent men are what they are, through earnest and close application.

Success in any calling is only attained through thorough and hard work. It has been said that “there is no royal road to wealth;” it can be more truly said that there is no easy road to distinction.

Remember, in our profession as in all other vocations, the bottom-rungs of the ladder are crowded—overflowing in fact; but at the top there is plenty of room, and those who get there do so only by being liberally educated, liberal in all their views as necessarily they must be, and above all, liberal in their medical opinions, which position alone can place them on the broad platform of Eclecticism.

BY DR. HENRIETTA K. MORRIS.

What does *Liberal* Education really mean? Hardly free in the sense of being abundant, unrestricted, independent, or possibly heterodox, as we may have learned the definition. It is taken from the word *liber*, in the idea of being free by virtue of intelligence. The truth makes free; knowledge is power. A liberal education is a *book*-education, instruction in literature and the liberal arts, a training in those pursuits which place mental improvement in the foreground. Such considerations as the getting of a subsistence by means of such learning place it on the plane of a trade, mercantile pursuit or handicraft; divesting it of intellectual character and sinking it into a vulgar materialism. A liberal education is therefore a broad culture, as well as thorough instruction.

A physician ought certainly to be and know all which that means. He or she can afford to be ignorant of nothing. The fault, too often found with the medical profession, is that many of its members know books and literature too little for purposes of social and professional culture. Yet I

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would consider this matter itself with no exclusive sentiment, but broadly and intelligently. A physician who has little knowledge or familiarity with books and culture is certainly not as liberally educated as he ought to be; nevertheless, the one who has little conception of knowledge except which he derives from books is far less educated. There is a knowing of the world around us, a capacity of dealing with things as we find them, an intelligent appreciating of every person and experience at the proper value, that infinitely surpasses any measured, conventional, or prescriptive attainment in the mode of learning.

To be educated is to be developed, cultured, perfected. So, to be liberally educated is to be enlarged in scope of mental vision, to be broadened, elevated and made complete and thorough in what the individual should be. Whether this ought to be the case with the physician is hardly a question to argue. It proves itself. If the members of our own School of Medicine would give more attention to these matters, and less to the shortcomings of their rivals, we would have less difficulty to attain our rank and place. The learned, refined and cultured exalt those who are allied to them, whereas the unlettered, the coarse and low-minded are clogs and weights to drag their betters down.

To my sisters in the medical profession, let me add a word: Discipline yourselves thoroughly to be womanly; be practical, self-reliant and self-possessed. If, then, any narrow, exclusive, half-educated, ill-cultured person, being a male, does not extend to you respectful courtesy and the right hand of fellowship, you will be by virtue of your breadth and liberality of your education above and beyond any disquiet. You will leave the slight unnoticed, and go on your own way intrepidly. If you are thoroughly educated, you must be liberal, and so broad enough to realise that all physicians, and all schools of physicians, have intrinsically equal rights to treat the sick and bind up the maimed. So far from resenting a slight, you will be exalted sublimely above the consciousness that any has been offered.

A broad, abundant and liberal education implies culture and refinement on a higher altitude. A classical education is a valuable auxiliary to the attainment, and a physician cannot afford to be without it. He always carries weight and encounters obstacles that the others escape. The higher the culture the greater the capacity to be useful, and to win as well as deserve confidence.

DISCUSSION.

DR. HOWE.—There is no limit to our education. All can have a liberal education. What standard is there? As I went along I ran against many obstacles, and either climbed over, went under, through or around them. I would advise all young men to do the same. Medical lexicons, however, do not contain all the words that we meet in medical parlance. However, flee to your lexicons, your Latin and Greek ones, and master everything that you butt against, and do all the good that you can. In order to get an education, begin to be a student, and at once to *study*. What I learned thirty years ago helps me now. At the close he will have a liberal education. The more Latin and Greek he knows, the sooner he will learn medicine.

POSSIBILITIES OF UNITING THE SEVERAL SCHOOLS OF MEDICINE

DR. ANNA E. PARK.

It may be well, before considering the matter of uniting the Schools of Medicine, to form some definite idea of what schools there are to be taken into the account, whether we shall propose to unite them all or to select some and discard others. We have first our own, the Eclectic; then the Old-School, the Homeopathic, and then the Hydropathic, the Electric, the Mesmeric, the "Faith-Cure," Christian Scientist, Movement-Cure; and in this way we may extend the enumeration indefinitely.

The School which we so frequently call Allopathic, is usually styled the *Old School*, and very properly, as many of its old tenets, teachings and even practices have become obsolete, while others are also falling into "innocuous desuetude." Curiously enough, however, it brings forward as undaunted a front as if it had never changed, never taken a new idea from others, while living by such things. It calls itself "regular,"—its practitioners in the different countries often disagreeing.

The designation *Eclectic* seems to perplex the lexicon-makers, in regard to how to give it the most wrong definition. Webster defines it as "selecting and combining without unity, principle, or a consistent system;" and utterly disregards the Eclectic method as set forth by the Apostle Paul : "Prove all things and hold fast that which is good,"—the only way really Eclectic. Duglison's *Medical Dictionary* is also more or

less in the wrong, and apparently on purpose: First, defining the Eclectics as a sect of physicians who preferred to choose from other sects, it names Agathinos of Sparta as its founder, and Archigeês and Aritaos as its greatest ornaments. It omits Galen, who was an Eclectic and a philosopher, who was compelled to leave Rome because the “regular physicians” of the time denounced him for teaching the people, and instigated mobs to do him violence. It, however, concedes that every judicious physician must be an Eclectic, and adds the calumnious assertion that the name is used to designate an exclusive practice. Probably, the compiler thinks that it does not pay to tell the truth and be candid.

Plainly enough any selection of doctrines, methods or remedies must be in accordance with a principle and consistent system or it could not be Eclectic. The Alexandrian physicians, Eristratos and Hêrophilos, discarded blood-letting and depletive treatment generally, employing simpler methods and remedies, and depending largely upon diet, bathing and exercise. Against them were ranged the Empirics, who declared themselves opposed to any theoretic or rational treatment, and to base their methods entirely upon acquired experience. It is easy to discern which of these classes our Eclectics have followed, and which the others. As it was then, so it is now—the Empirics under pretext of superior learning and orthodoxy, persecute the Eclectics. The Ishmaelites, sons of the bond-woman, persecute the the children of the free-woman.

Homeopathy comes next. Its motto “*Similia similibus curantur,*” is freely translated by Bishop Newman : “Smile on me, smile on us, and cure your auntie.” Yet to be candid, the Homeopaths have served the Healing Art; and their minute doses have often been found most beneficial. Yet it is noticeable that very many of them discard almost entirely the infinitesimal dosing which won them favor, and now use largely the “new remedies” of the Eclectic Practice, while they often out-herd the Old-School in traducing Eclectics.

The Hydropathist method is by no means to be undervalued, whatever the extravagance of its champions. It has changed much, however. The packs and innumerable applications of cold water of Priessnitz have been succeeded by warm baths, Turkish baths, Russian baths, and innumerable sanitariums in which the application of water is by no means distinctive. Most of the Hydropathists and other Hygienists who study medicine, generally are careful to secure diplomas from the Old

School. My cat was once sick and refused the usual catnip remedy for the woes of cathood. Being observed to dip his feet in a basin of water, a larger supply was procured, in which he immersed himself and remained so for about half an hour. He came forth another cat, whole, in his right mind and normally hungry. If that was instinct, then let reason defer to it. At any rate the agency, water, was a perfect cure.

Of the other methods there is but little to say. Most of them are simply auxiliary. Mesmerism is of this character. A physician who "has no magnetism" may get along somehow, but he will often have cause to wonder why others were more quickly successful than he. The Movement-Cure has a limited field, and is admirable in exceptional cases. That is the best that can be said of it. The methods designated Faith-Cure, Metaphysics and Christian Science, I have little to say about.

Electro-Therapeutics deserves favorable notice, at our hands. It is apparently Nature's own remedy, although there are instances in which it is not applicable. If I could have but one method to choose, I would without hesitation say: "Electricity!" It is, however, but one agent among many, and there is no occasion to consign it, like the Homeopathic Materia Medica, to a single school of practice. Our object is to cure the sick; we are not to be so precise about the way except not to employ harmful medication, but to conserve and sustain the vital forces.

The proposition of combining these several methods and the distinctive Schools of Medicine into one fraternity, with a common object, is very attractive. There would be nothing more enjoyable to me than to witness the halt and the lame walking, the blind seeing, the sad dyspeptic returning to a joyous life,—the father restored from the sickbed to his place at the head of the family, and the mother re-called from the summons of death to her seat in the family circle, No crown can compare with this in brilliancy. Can we unite the different schools to such an end? We can—when the prominent aim is not domination and personal aggrandisement, and there are none to stand at the front to say superciliously to others: "Stand by thyself, come not near to me; for I am holier than thou!" The lamb may think to lie down with the lion when the lion will not rapaciously seek to pillow the fleecy head inside his greedy maw. We can all walk in peace and unity like one fraternity, when we make it our first care to do our whole duty to God and our fellow-man; when we in response to the appeal from our patients, use the best means at hand for their benefit and restoration. Life is too

fleeting to be spent in animosity and controversy about methods. When we seek to act well our part, and refrain from judging one another, we will be certain to be ready to cooperate as one school with one heart and purpose, to battle with disease, arrest the progress of pestilence, and diffuse the blessings of health—wholeness and happiness.

MEDICAL EXCERPTS.

By JOHN KING, M. D., North Bend, Ohio.

Cramp of the lower limb, or an involuntary contraction of a muscle or muscles of the calf, suddenly manifested upon the limb or foot being extended, or placed in an improper position, is a very common affection. The cramp is attended with severe pain, hardness and swelling, which do not always disappear with the spasm, but may remain for several hours subsequently. Corpulent, sedentary and nervous persons appear to be more subject to attacks of this malady, especially when under the influence of cold, fatigue, or some interference with the circulation, etc. I have seen numerous cases of this spasmodic difficulty during the past forty or fifty years, and have invariably succeeded in giving prompt relief by a very simple, yet certain method, viz.: the patient, or a member of his family, is requested to seize upon the foot of the affected limb and raise its anterior portion, as though endeavoring to bring its superior surface in contact with the anterior tibial portion of the limb (shin). The foot being thus firmly held for a minute or two, the cramp ceases.

Ophthalmia Neonatorum. In the treatment of a number of cases of this malady, I have of late years entirely dispensed with the application of solution of nitrate of silver. My chief reliance has been upon the following mixture : Rx. *Pulv. Hydrastis Can.*, 1 ounce; *Pulv. Geranium mac.*, 1/2 ounce. Mix. Of this mixture, the nurse is requested to place about fifteen grains in a warmed cup, and then to pour upon it, a tablespoonful of boiling soft water. Cover this, and when cold strain to obtain a clear fluid. In warm weather this will require to be made every day, as it soon spoils; in cold weather, every two or three days. The affected eyes are to be cleansed with this decoction every two or three hours, care being taken that some of it passes beneath the lids and upon the surface of each eye. A thin compress moistened with the decoction may be kept upon the lids, when the lashes are obstinately adherent or

glued together, changing it every hour or two. In very severe or obstinate cases, and especially when there is reason for diagnosing a gonorrhoeal vaginal discharge as the (maternal) cause of the ophthalmia, in addition to the preceding treatment, by means of a camel's hair pencil, apply some of the solution of the chloride of gold and soda, hereafter referred to, once or twice a day. With this solution alone, applied three times a day, in *gonorrhoeal ophthalmia* from careless introduction of gonorrhoeal matter upon the eye, four cases, in adults, have been cured, and one case in which a drop of chancrous matter had come in contact with the eye.

The preceding treatment will also be found efficacious in *scrofulous*, or *phlyctenular ophthalmia* which, among children, many cases have been successfully treated.

Trachoma or *Granular Conjunctivitis*. Moisten an end of a pencil of sulphate of copper, hereafter described, and apply it thoroughly and carefully over the entire surface of the everted superior granulated lid; hold it thus everted for half a minute or so, then at once wash the lid, by means of a camel's hair pencil, with cool water. According to the irritation following this application it should be repeated every one, two or three days. In addition apply daily to the upper granulated lids, everted, using a camel's hair pencil, some of the solution of chloride of gold and soda, being careful to allow three or four hours to pass between this application and that of the copper pencil. This course has effected most remarkable cures of granular lids, in some instances of which an accompanying pannus had caused almost entire blindness. Of course, attention must be paid to the general health, hygiene, etc., of the patient.

Pencil of Sulphate of Copper. R. Pulv. sulphate of copper, one ounce; pulv. alum, half an ounce. Mix ; place in a porcelain vessel, and gradually melt the mixture. The fused mass is now to be poured into a bronze or copper cylinder, having a diameter of not-quite one-fourth of an inch. These sticks, when cold, may be removed, and an extremity of each one be pointed by holding it in water and scraping the softened part, repeating this until the desired reduction is had. Ordinary potash alum is to be used, and the metallic cylinders used as moulds for the pencils prevent the metallic copper from being precipitated.

Solution of Chloride of Gold and Soda. Rx. Chloride of gold and soda, twelve grains; hydrochlorate of ammonia, twenty-four grains; distilled

water, two fluid ounces. Mix, and keep in a glass-stoppered bottle. When employing it pour a little into another smaller vial for present use, as the introduction of organic matter occasions a precipitate of the gold

This preparation is of value as a local application in the greater portion of corneal and conjunctival diseases, especially when these are associated with a strumous habit, as, in purulent ophthalmia scrofulous ophthalmia, trachoma, pannus, corneal nebulous exudation, corneal ulceration, chronic iritis, etc.

Echinacea angustifolia. Narrow-leaved purple cone-flower. This plant abounds in Illinois, Nebraska, and from Missouri to Texas, being found in prairies and marshes. The root is the part used in the form of tincture. It was introduced to the medical profession in 1886 by H. C. F. Meyer, M. D., of Pawnee City, Nebraska. This gentleman states that he has used the article in his practice for more than sixteen years, and eulogises it very highly as an antispasmodic, and an antidote for blood-poisoning. Indeed, he asserts he has successfully used it in so many forms of disease, and under such varied conditions as to lead to a suspicion that he may have deceived himself in regard to its therapeutical value; and yet, so far as the remedy has been tested, his statements have certainly been corroborated.

Dr. Meyer deems it a specific in stings of insects, poison from the poison ivy, typhoid fever in which he relies upon the tincture alone, and in rattlesnake-bites, of which he has successfully treated over 613 cases among men and domestic animals. His confidence in the remedy induced him, as he states, to allow himself to be bitten by one of these snakes. When the arm became swollen from the hand to the elbow, he bathed the parts with some of the tincture, then swallowed a teaspoonful of it, lay down and went to sleep. Upon awakening the swelling had disappeared, and the doctor still lives! He kindly, offered to send the writer a rattler eight feet long, that the antidotal influence of the tincture upon dogs, rabbits, etc., bitten by said serpent might be tested; but having no friendship for the reptile, and being unaccustomed to handling this poisonous ophidian, the generous offer was courteously declined.

Taken internally, Dr. M. considers the root-tincture a specific in malarial fever, cholera-infantum, cholera-morbus, boils, internal abscesses, and in colic in horses; also in typhoid fever when taken internally, and at the same time applied externally upon the abdomen; upon the throat in

ulcerated sore throat; upon and around old ulcers; upon parts suffering from the effects of poison ivy, from erysipelas, carbuncles, poisonous bites or stings of bees, wasps, spiders, etc.; upon hemorrhoids, and by spray (diluted), in nasal and pharyngeal catarrh. He likewise recommends its employment in eczema, scald head, milk-crusts, acne, scrofulous ophthalmia, fevers of all kinds, congestive, remittent, etc., nervous headache, and in trichinosis, one case of which he reports as having recovered under its employment, the only instance of which he has had an opportunity for prescribing it.

Prof. I. G. M. Goss, M. D., (Marietta, Ga.,) who has experimented with the remedy, reports that he has successfully employed it in mad-dog bite, chronic ulcers, chronic catarrh, gonorrhoea and syphilis. (See *Chicago Medical Times*, August, 1888, and *Medical Brief*, St. Louis, Mo., February, 1888). Dr. G. L. Nichols, (Pawnee City, Neb.,) reports to have successfully used it successfully in rattlesnake-bite, syphilis, and old fever-sores. He considers it a prompt and certain alterative. (See - *Medical Index*, Kansas City, September, 1886.) Dr. A. Parker, (Wilber, Neb.,) has efficaciously administered it in a case of blood-poisoning pronounced hopeless by the leading physicians. Dr. J. S. Hayes, (Denver, Col.,) reports to have employed it with excellent results in hemorrhoids, in irritated and extremely sensitive conditions of the rectal mucous membrane, in malignant diphtheria, in "mountain fever," in typhoid fever, and in blood-poisoning. (See *Eclectic Medical Journal*, February, 1888, and *California Medical Journal*, March, 1888.)

The writer has tested the Echinacea in a few cases, and the patients have certainly derived prompt benefit under its influence. As the intention is merely to invite the attention of medical men to this remedy that further investigations may be made, particulars will not be entered into, but results alone will be briefly mentioned. Thus, in four cases of nasal catarrh, two of which were of several years standing, the disease having extended into the pharynx, and being of an obstinate character, recovery was effected in from four to nine months, the tincture being given internally, and applied locally in spray, one part to three of soft water. It has also proved efficacious in three cases of rheumatism, one being articular; in three cases of cholera morbus; in two cases of cholera-infantum; and in two cases of chronic ulcer of the leg, one of which was accompanied by an eczematous condition of the limb that had resisted years of treatment. It was used internally and locally. Also four cases of long standing and painful hemorrhoids were speedily overcome by its internal administration, at the same time applying it locally two or three

times a day, one part tincture to three parts cerate; one case of vaginal leucorrhœa, with ulceration of the os, in which it was given internally and applied locally, one part to four of water, on cotton introduced within the vagina, renewing it twice daily; five cases of poison-vine eruption, seven of stings of wasps, and four of bumble-bees (*Bombus*). In two of the latter instances a swelling and redness of the arm extended nearly to the shoulder. In all these poisonings the remedy, being only locally applied, acted with promptness. In three cases of abscess (one internal, the pus being voided with the urine), the internal employment of the tincture speedily checked the pus-formation. In six cases of dyspepsia its internal use has been decidedly beneficial, and though they can not be reported as having recovered, great relief has been afforded and permanent results are anticipated. One of these patients had for many years suffered great distress in the region of the stomach being constant, and which was invariably aggravated after a meal. Numerous remedies had been taken without the least benefit, and the person had given up all hope of relief from medicine. The first dose of Echinacea promptly relieved him and made him "feel better and more natural than for years past." He highly extols the medicine, and recommends it to every dyspeptic whom he encounters.

Prof. J. U. Lloyd has kindly made an analysis of this root for me, which I will now state. He writes: "Echinacea root is warm and peppery to the taste, leaving a tenacious aftertaste, and a peculiar numbness of the tongue. Its tincture is of a reddish-brown color, and imparts the above-named sensation to the tongue and fauces.

"The root is destitute of alkaloids and does not yield crystalline organic constituents by any method that we have applied to it. The characteristic principle, that which gives the peculiar action of the drug when chewed, and which predominates its sensible properties, is of a resinous nature.

Description.—This resin may be obtained by extracting the dried root with alcohol, evaporating the tincture thus obtained to a small bulk, and precipitating by means of an excess of water. The crude resin, when washed with water and dried is of a dark brown color, odorless, and when chewed, tasteless at first, but after a time imparting the warm tingling sensation that is characteristic of the root. Chloroform dissociates it, dissolving a soft, greenish resin, and leaving a dark-brown one. The portion insoluble in chloroform possesses some of the sensible properties of the original resin, but it is questionable whether this is not

owing to the presence of some of the resin soluble in chloroform that remains tenaciously attached, perhaps mechanically, with the other, resisting even the influence of good solvents to remove. This resin is inert.

“The chloroform soluble resin is in small proportion, but intensely active in sensible properties. It has a green color, no odor, is soft at ordinary temperatures, and when dissolved in alcohol gives a solution that is very sharp and pungent to the taste, and imparts the sensation heretofore named of numbness and warmth to the tongue and fauces in an intensified degree. This resin is the proximate principle that gives to *Echinacea* its peculiar taste, and no other characteristic substance was developed by my investigation.”

The *Echinacea purpurea*—Purple cone flower, sometimes called “Black Samson,” (see *Am. Disp.*, 1870, P. 722), is a variety of the *E. angustifolia*, more common in the eastern section of the country, and is stated to possess similar therapeutical virtues. These plants should be thoroughly investigated. Especially would I recommend them in that class of renal diseases, now becoming so common and so fatal, which are generally known under the name of “Bright's Disease” a malady for which I have employed *Rudbeckia laciniata* with great benefit.

COLLINSONIA CANADENSIS.

By HENRY POVALL, M. D., Mount Morris, New York.

Common Names.—Horse-Balm., Stone-Root.

Description.—Calyx two-lipped, the upper lip three-toothed, the lower two-cleft; corolla greenish yellow, somewhat two-lipped; the throat expanded; the upper lip nearly equally four-lobed, the lower much larger, the margin fringed; stamens two, rarely 4, much exerted.

A perennial herb: Stem two to three feet high, somewhat branching above; leaves three to eight inches long and three to four inches broad, ovate, serrate, acuminate, the lower on long petioles, the upper almost or quite sessile. Flowers racemose, the racemes disposed in a large panicle; they appear in summer.

Habitat.—In rich, moist woods; common to United States.

Parts Used.—The root and herb—not official.

Constituents.—When bruised this plant has a strong, somewhat disagreeable odor, faintly suggestive of a lemon or lime. Like other labiates its chief important constituent is a volatile oil.

Preparations.—Employed in infusion, tincture and fluid extract.

Medical Properties and Uses.—It is said to be diuretic and tonic, and, as its name implies, useful in calculous affections. The late Robert S. Newton, M. D., gives his experience of its properties and uses in a paper contained in *Transactions of the Eclectic Medical Society of the State of New York*, Vol. V., 1870-71. After referring to the American Dispensatory, in which it is classified as a stimulant and irritant, exerting an “influence on the mucous surfaces,” “beneficial in chronic catarrh of the bladder,” “fluor albus and debility of stomach,” besides many other properties, he adds: “My own experience with the use of this remedy has induced me to think that it has little or no effect upon mucous surfaces, nor does it possess the ordinary diffusible stimulant property. Its physiological action is almost entirely upon the pneumogastric plexus; so much so that in many conditions attended with high arterial excitement and cardiac irritation, it almost instantly overcomes this excitement. It is only through this medium that it acts upon the mucous surface of the stomach and other tissues of the body. In any organic disease it produces little or no effect, nor can it be relied upon in cardiac, pulmonary or gastric difficulties, but only in cases of functional derangement. In the latter it has been successfully used, but in the former it possesses little or no value. Even under the most favorable circumstances, if given in large doses, it produces great prostration. In some peculiar organisations we have observed, even where there was no organic difficulty, a degree of nervous prostration to follow its use, requiring prompt and active stimulants to overcome its effects.” Dr. Brown, of Pittsburgh, Pa., informed him (Dr. Newton) that after taking the third dose of twenty drops of Merrell's fluid extract, the nervous system became so prostrated, his hands and feet so cold, as to require active stimulants to produce reaction.

Dr. N. says that he had observed the same effect in some cases to follow the administration of every preparation of this article which circumstances had called him to use. The fluid extract acts with great certainty, but much remains to be learned concerning its range of

application, one thing is certain, however, namely: that the dose varying from ten to thirty drops four or five times a day, as recommended, of the “concentrated tincture” is too large ; better results having been obtained from doses of five drops four times a day, “In the irregularities of heart-action dependent on hysteria, chlorosis and angina pectoris, it will be found of great benefit.. In pain attending digestion, or congestion of the liver, and during incipient stages of diarrhea and dysentery, it has a a soothing effect. Combined with *Dioscorea* and *Gelsemium* it acts promptly and beneficially in bilious colic.”

“Collinsonia,” says J. M. Scudder,¹ “is a specific in minister's sore throat ; administered in the proportion of:

Rx. Fluid Ext. of Collinsonia, simple syrup, each of equal parts to make half a teaspoonful to a teaspoonful four times a day. It proves beneficial in other cases of chronic laryngitis, in chronic bronchitis, and phthisis, allaying irritation and checking cough.” “Collinsonia (he continues) is a specific in the early stages of hemorrhoids, and will sometimes effect a cure in the advanced stages of the disease.”

John V. Shoemaker, A. M., M. D., Philadelphia,² in an article which recently appeared in the *British Medical Journal*, extols Collinsonia very highly and says: “Acute cystitis can be more quickly relieved by it, combined with aconite and morphia, than by the administration of any other remedial agent.” “Spasms of sphincter ani and vaginismus can be readily and safely relieved without resorting to the ludicrous or painful methods narrated in the text-books, by the continued employment of rectal and vaginal suppositories of Collinsonia, combined with narcotics, selected as the case may demand.”

“The antispasmodic properties of Collinsonia render it of value in flatulent colic, infantile colic, and biliary colic. It is especially serviceable in the latter affection, if given in the form of warm infusions so as thoroughly relax the biliary passages and facilitate the onward movement of the irritative calculi.”

“Collinsonia is equal, if not superior, to Cimicifuga in the treatment of chorea, and may be substituted for arsenic with advantage in many

¹ *Specific Medication*, p. 116.

² This paper was read by Dr. Shoemaker at the “Eighth International Medical Congress” so called, September, 1887, and appeared in the *Medical Times*, of which he is editor. He describes Collinsonia as being much employed in “domestic,” by which he means *Eclectic Practice*.

cases of that disease occurring in infancy and early childhood.”

“Externally it constitutes an excellent application to contused and incised wounds. Ascarides may be effectually destroyed by rectal injections composed of fluid extract diluted with four parts of water.”

With such commendations *Collinsonia* is certainly entitled to a careful and intelligent use and a further elucidation of its properties.

DOSIMETRIC MEDICATION.

By JAMES M. HOLE, M. D., Salem, Ohio.

Allow me to call your attention for a few moments to what is as I regard it an additional, important and rational method of treating disease, called the *Dosimetric Method*. We claim the “*ecloge*” or privilege of selecting or choosing the remedy in the management and treatment of disease, and that, too, independent of any school or sect of medicine.

In our examination of this new method of Dosimetry, we find that its author, Prof. Burggrave, does not, according to Dr. Castro's work on *Dosimetry*, attempt or design a new system of medicine, in the manner of hoisting a flag in opposition to Homeopathy, Allopathy, or any other “pathy.” The word *system* implies the idea exclusiveness, and this is in formal opposition with the spirit of Dosimetry, which is, on the contrary, a method essentially the contrary—it is Eclectic; it acts according to the circumstances, and repudiates all systems. Prof. Burggrave has never neglected in a single instance to protest against calling this a “system of medicine,” when there were present those who would not be informed that such was not the case, nor is he claiming any such premises. On the other hand, it is a better method, if you please, of the management of the sick, than has heretofore prevailed.

Prof Burggrave was Chief Surgeon to the Hospital of Ghent, and many years ago was deeply impressed by the great mortality among those who had been operated upon. He observed that about two-thirds of them died in consequence, either of traumatism, or of purulent infection. Later on, the antiseptic dressing of Lister reduced the mortality to fifteen and twenty per cent. Subsequently, Dr. Burggrave, by his alkaloido-therapeutic treatment, both preventive and curative, brought

the mortality to two and a half and five per cent., where it has since been maintained. He judged that the traumatic fever was due to a stoppage of blood in the capillaries, caused by a paralysis or a fatigue of the vaso-motor nerves which control the circulation. He thought that by restoring to these nerves their tone, and improving their vitality, he would bring back the circulation to its normal condition, and put a stop to that stagnation of the blood which is at first a source of heat, and then of inflammation, and thus becomes the origin of congestion, change of texture and finally of lesions.

He recalled to mind a successful treatment of intermittent fever and cholera in Russia, in 1832, by Dr. Mandt, of St. Petersburg, described in a *Memoir upon Indian Cholera*, which had been read in 1854, by Dr. Everard, before the Royal Academy of Medicine in Belgium. No attention, however, was paid to it, the cholera-epidemic having ceased. Dr. Burggrave found in this *Memoir* material for serious study, and he decided to try Dr. Mandt's method to fever-cases in the hospital of Ghent. He, however, substituted alkaloids for the extracts of plants which Dr. Mandt had used.

He gave his patients strychnia in small doses, repeated at short intervals, in order to give tone to the vaso-motor nerves, and thus to reestablish the circulation of blood. At the same time with the strychnia he gave small doses of aconitin and veratrin to lower the temperature and stop the fever. He thus made the discovery that it is sometimes possible to prevent the fever, and very often to jugulate it. In each disease he distinguished two periods; the first, *dynamic*, presenting only functional disturbance; the second, *organic*, accompanied by a change of tissue. It is in the first period that the physician should use the most active means possible to jugulate the disease, or cause it to abate. From this Dr. Burggrave adduced his rule to give an acute attack an *acute treatment*, and to repeat the small doses till the desired effect is obtained independently of the quantity of medicine administered. Then he sought to do away with the notions of maxima and minima, which have been regarded as axioms, especially when employing the alkaloids, which are as great hindrances to success as are the massive doses of certain drugs that are currently employed.

Small doses facilitate the absorption of the medicine, and make it certain that the needed quantity will not be exceeded. The disease may be considered in the light of a resistance to the remedy, or a resistance of the human organism, in a state of disease, to the remedy. The dose

should, therefore, be adapted to the morbid resistance. This adaptation cannot be known beforehand; the organism and the condition of the patient alone can suggest it. The Dosimetric physician has thus the route which he is to follow, clearly traced before him by the imperative indications of the facts in the case. He is in no danger of imprudence by giving too much of the remedy, because he stops it or gives it less frequently, when the usual effect at which he is aiming, begins to be accomplished.

Again, the medicines should be chemically pure, which should command the careful and accurate pharmacist's closest attention in the preparation.

The Dosimetric Method, introduced by Prof. Burggrave, himself known as an eminent Professor of the University of Ghent, has been awakening the attention of many eminent physicians all over Europe, and also quite recently in this country, of medical men not heretofore identified with either Eclectic methods or the Homeopathic system of treating disease. Finding that this Dosimetric method was commanding the attention of such physicians as above referred to, we some years ago began an investigation of its tenets, and are yet greatly interested, as it takes for its "war-cry" the Eclectic methods, not claiming any new "system," but great superiority in the management of disease.

We obtained first the *Dosimetric Medical Review*, the only journal of the kind printed in the United States at this time.. We also ordered and received the medicines and *Therapy* connected with them, and began with a cautious administration of them in cases where we felt it safe to treat in that manner, following the method as carefully as we could. We found to our surprise a greater certainty and more favorable results than we had anticipated. Indeed, we are glad thus far to have tried, to us, a somewhat new method of treating disease. We now can depend with greater certainty upon them and shall continue to prescribe and dispense them. The method has advantages over other systems or modes of treatment; the use of alkaloids principally, and very highly concentrated and chemically-pure liquids, and the time and dose of medicine, which may be continued till the desired results are manifested. Not expectant as are other methods, or systems of therapy, I am, therefore, quite a believer in this way of treating disease. Each case more and more confirms me in its great advantage in curing the sick. Of course, I have for years been practicing much upon this plan, or method, and have often jugulated fevers of various types. But till I had

examined this method, I practiced with much larger doses and at longer intervals in giving them.

In order that some of our young brethren may have their attention called to the matter of why the Eclectic physician should and does command the confidence of the intelligent masses of our people, I will briefly give, as I think, the true status of Eclectic physicians. They are treating diseases, not upon any laid-down former system of medical practice, but upon the discovered and improved methods of such men as were not content with the system and routine of the fathers of the Healing Art. Not that there is a difference in the anatomical, physiological or other conditions of the human organism, nor yet in the medicines and their chemical combinations; not that there is in disease any difference in regard to whether an Allopathist, Homeopathist or Eclectic happens to be summoned to treat it; nor yet because it is an American, German, or Frenchman that has the “measles.” To explain, a little girl told our High-School Superintendent the other day, when he enquired where her brother was, that he had not been at school, “Why,” said she, “he has the Dutch measles.” “Oh, no,” said the Professor, “you mean French measles,” as there were some of his scholars sick with them. “No, indeed,” said she, “Johnny caught them of Barckhoff's, and they are Dutch.”

Yet the complaint was measles all the same, and if an Allopathic physician had been called to treat it, the little girl's version would have been “*Dutch Allopathic* measles;” and this case would then come under the Allopathic code, and the modes of Allopathic medication strictly administered on the expectant plan; and the enquirer would be told that “if so and so did not occur, the case would get well.”

Eclectics are not, therefore, bound to a system or a code when they are treating disease; as to the kind, quantity, quality or time of administering remedies; or whether the patient is Dutch, French, or any other nationality; or Allopathic, Homeopathic, male or female.

When called to the sick, the field of nature with all its surrounding air, water, fire, minerals, vegetables and animals, is at their command, and can be employed without let or hinderance by by them in the relief of the sick and suffering as you may choose—no system to say nay. You have a grander, nobler and more God-like liberty, based upon, yes, upon the best methods known to medical literature, independent of systems, codes, or “pathys.”