THE DISSECTOR.

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ARTICLE I.

The Mysteries of the Faculty.

Physicians of learning and experience know that no dependence can be placed on the old astrological symptoms, by which they have been taught to distinguish tubercular disease, nor on the common imbecile remedies for it, as is seen by the following declarations of the distinguished professor, M. Lugol, of Paris, to the students of medicine, 1841*.

"Tubercles may exist in parenchymatous organs, may even partly annihilate them, without their existence being revealed by any external symptoms. Our want of success in the use of the ordinary means of diagnosticating tubercles, proves that those means are inadequate, that we follow an erroneous course in our investigations, and that we must resort to new modes if we wish to be successful. The numerous checks and repeated deceptions to which physicians are daily exposed in the diagnosis and treatment of tuberculous diseases, do they not prove that it is necessary to leave the beaten track of inquiry and pursue some other which is less fallible?"

Few physicians, however, will leave the old beaten track for a new one, until they are driven from it by public opinion; no matter what the consequences may be to their patients.

"Wherever we have any thing like principles to guide us, *our prescriptions are extremely limited;* wherever we have no fixed principles to guide us, *our prescriptions accumulate with empirical rapidity.* But what, it may be reasonably enquired, is the principal cause of all this complexity of formulæ in chronic diseases? Undoubtedly it arises from that vagueness of opinion which exists respecting the nature of these diseases in their onset, and in the greater part of their progress; and so long as we attempt to cover our ignorance by such terms as *nervous, bilious, dyspeptic, spasmodic,* and the like, so long shall our practice be mere experiment in most chronic affections. We may make a sort of druggist's shop of the stomach of every patient laboring under chronic disease, by alternately cramming it with most of the articles of the pharmacopœas; but we shall not, probably, advance in the treatment, until we deduce pathological principles, from *cautiously marking the rise and progress of the symptoms, and exploring their seats and effects.*—Dr. Armstrong.

"The whole science of healing is built upon fortuitous and chance discoveries. Like the alchemists of old, we have discovered a thousand valuable things, where we never thought of looking for them; and while uselessly seeking for talismanic gold, we have lighted on a pearl of great price. Every thing, in fact, is presented to us as the result of experiment; and, in the treatment of disease, the most valuable remedy can boast of no higher origin than its more humble neighbor."—G. B. Childs.

In addition to the testimony of the distinguished physicians above mentioned, is the following extract from the *London Lancet*, for January 14, 1843, to the same effect; and this brief paragraph is only one of the many evidences afforded by that very high medical authority, and indeed by the medical literature of the day, that a brighter era is beginning to dawn upon this momentous subject:

"How much have we yet to learn, how little do we really know, of the nature and rational treatment, not only of the diseases of the cerebro-spinal system, but of diseases in general! Assuredly, the uncertain and most unsatisfactory art that we call medical science, is no science at all, but a jumble of inconsistent opinions; of conclusions hastily drawn; of facts badly arranged; of observations made with carelessness; of comparisons instituted which are not analogical; of hypotheses which are foolish: and of theories which, if not useless, are dangerous. This is the reason why we have our homœopathists, and our hydropathists; our mesmerists and our celestialists!" (and he might have added an army of arrant quacks.)—Dr. Evans. Edinburg.

Mr. Wakley, M. P., in his editorial article, in the same number, advises the members of the medical profession, to commence collecting facts, in their several districts, *de novo*, on which to found, at a future period, a rational and effectual mode of treating diseases.

* The professors of our medical colleges, like the ancient astrologers, who were physicians, priests and astronomers, pretend to distinguish chronic diseases by feeling the pulse, the aspect of the urine, the odour of the stools, &c. &c., and they will continue to teach such nonsense as long as it is of any value in the market.

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The illiberality with which I have been treated, by many of the leading men of the profession, while I have been alone engaged, through a long series of years, in establishing the true character and great importance of the new symptoms and remedies, in chronic diseases, and in the only way in which I could hope for success, will fully justify me, in thus exposing to the public in the years of my triumph, the heartless impositions those men are constantly practising.

The following observations upon the mysteries and fallacies of the faculty, are from one of the most intellectual men of the age.

Observers of passing events cannot have failed for some years past to recognize the approach of a new era in the science of medicine. The practitioner who has imbibed his dogmas during his hospital pupilage, who, from inertness, indifference, or incompetency, rejoices in the conjectural nature of his art, who contemns its principles, closes his ears against its reasoning, and his understanding to its improvements, may proceed self-sufficiently, and empirically, to the termination of his career. The practitioner of this stamp may boldly vaunt his experience as the infallible criterion of the means that are available by man in alleviating misery and prolonging existence, and may continue to play upon the weaknesses and sufferings of humanity, and the contingencies of life, regardless alike of the advancement of learning, and of the useful practical results which flow from it.

But the disciples of a truly rational medicine, who are now daily filling the ranks of the profession, who, being active, emulous, and competent, are watching with a vigilant eye the progress of science, and are drawing continually from its tributary streams, for the means of rendering more complete their knowledge of the animal economy—who seize with avidity every newly developed truth, view it in all its relations, compare it with previously discovered truths, fix its legitimate value, and assign its proper locality,—who, slow to adopt crude theories, founded upon uncertain data; slower still in resorting to expedients of conjectural utility, both in medicine and surgery; arrive, albeit, imperceptibly, at unerring principles, as the basis of a considerate and cautious, but an energetic and fearless practice. Such men must hail with the liveliest enthusiasm, every new impulse received by the science, at a period of its history when there is promised a richer harvest of beneficial results than at any which has preceded it. HENRY ANCELL, Esq.,

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ARTICLE II.

Symptoms of Tubercular Disease.

Tubercula, or Scrofula, is invariably distinguished by pain, more or less severe in proportion to the intensity of the disease, produced by pressure on the ganglions of the spinal nerves, in the intervertebral spaces along each side of the spine: no matter what name may have been given to the malady by physicians, nosologists, or other medical writers. These ganglions are organs of sensation, and are connected with the skin and serous membranes, as well as the serous surfaces, in every part of the body, through the posterior spinal nerves; while the anterior and motor spinal nerves, are connected with the mucous membranes, and mucous surfaces in every part of the body; and this arrangement of the nerves of sensation and motion, was obviously necessary, both to the inception and existence of the animal creation, to prevent the irritating effects of the atmosphere, of fluids, and semi-fluids, or other non-solid substances, which are necessarily and constantly in contact with the mucous membranes, and mucous surfaces of sentient creatures. The following case, in which nearly all the organs and limbs were affected with tubercular disease at the same time, not only gives a very clear view of the simplicity and accuracy of these symptoms, but also conclusively demonstrates a direct connection between the ganglions of the spinal nerves, and the serous membranes and surfaces:—

Mrs. J. P., of good constitution, light complexion, and naturally full habit, aged 22 years.

Called to see her January 11th, 1835. She has a swelling on the right side of her neck and face, which commenced about the 10th of November last, and has been out of health about three years.

Suspecting tubercula, and without making further inquiries, and in the presence of a number of gentlemen and ladies, we commenced an examination of the lymphatic glands along both sides of the spine, and first with those of the first cervical vertebræ, and pressed with the finger upon one lying close

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to the right side of the vertebræ, and of the size of a very small bean, which produced a scream from severe spasmodic pain, which, on every repetition of the pressure, darted violently, and with the rapidity of lightning, into the external cervical and submaxillary tubercles, and into the upper jaw, ear, and right side of the head; and on her complaining of its darting also into her throat, we examined it, and found two tubercles rising conspicuously in the right tonsil, and one in the gum of the upper jaw, all of which were very sore, and also painful under pressure. We now applied pressure in the same way to these cervical and submaxillary tubercles on the side of the neck and the under-jaw, which produced the same kind of pain in them, which, at every repetition of the pressure, darted violently along the neck and under the clavicle into the upper portion of the right lung. We now applied pressure to the left side of the first vertebra, on a still smaller tubercle, and she screamed again, and pointed her finger to the spot *the pain darted to*, on the upper portion of the left side of the neck, and on examination, we found there a large submaxillary tubercle, and on applying pressure to this, the scream was again repeated, and she at the same time applied her hand to the left breast or mamma, and then pointed out the course of the pain from the tubercle along the neck and under the clavicle into the breast. We now examined it, and found it every where literally crammed with tubercles of the size of peas; the breast one-third larger than the right; color of the skin natural. The right breast flaccid every where, and neither gland nor tubercle to be felt in it.

The small tubercles along the right side of the other cervicle vertebræ were sore or tender, and pressure on the upper ones sent darting pains into the right side of the neck, and on the left side of the lower one into the region of the heart, and checked her breathing. Pressure applied now on the sides of the first, second, third, and fourth dorsal, produced pain which darted into the stomach; and on the second, third, fourth, and fifth lumbar, produced the most severe spasmodic pain, and darted violently into the uterus. Pressure on the sides of the other vertebræ produced no pain or effect whatever.

We now inquired at what time she first discovered tubercles or swellings on the side of her neck? She answered, about the first of June, or the first of July, her attention was first directed to one on the side of her face, in front of the ear, that was very sore, and at times painful, and that at such times there was "soreness along the chords" of the neck, but "never thought of examining there for tubercles." We now told her she must have white swellings of some of her joints or limbs, besides that of the neck and face, when she presented her left arm permanently flexed into an obtuse angle. On removing the clothing from this arm, it presented a white swelling of the elbow joint and arm. The swelling of the arm was united to that of the joint, and extended more than half way to the shoulder, and there was plainly felt along the under side of this swelling, or under and inner side of the arm, a large or wide ganglia of tubercles, extending from the elbow six or seven inches above it. These tubercles were of the size of peas, near the elbow, but became gradually smaller, and of the size of small seeds where they were lost in the upper part of the swelling.

We inquired now whether she had any other swellings about her, when she answered, "no, that's all," but I told her it would not do,—she must have white swellings of the limbs and joints of the right side, as well as of the left; and after viewing me for a moment with an expression of hesitancy, she began to make preparations to show me her right leg. It was swelled from the ankle to the knee, and had an elastic and puffy feel, and I plainly felt along the front and sides of the tibia, small tubercles from the size of small seeds to that of a small pea. She now told me she would show me the other one. It was swelled, and in all respects like the right leg.

Diagnosis, tubercula of the uterus, both legs, left arm, left breast, heart, stomach,

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right lung, cavity of the ear, right lobe of cerebellum, right side of the neck, upper jaw of right side, and right tonsil.

On applying the stethescope to the region of the heart, we found its action strong, and it appeared to strike hard against the ribs, but its sound was subdued or muffled, and its action was felt and heard under the clavicle of the right side, very nearly as plainly as in its own region, but could hear it very slightly under the left clavicle, and left and right side of the back. The respiration was natural in every part of the chest, except in the upper portion of the right lung, where it was very slight, and at times inaudible. Diagnosis by stethescope: Hypertrophy of the heart and tuberculated upper and front portion of the right lung.

We now inquired into the history of this case, which is as follows:---

The disease commenced about three years since, when she was living in Cincinnati, and soon after an attack of cholera, with the usual symptoms of chlorosis. Her catamenia commenced when she was fifteen, but appeared but twice during that year, and only two or three times a year since that time, and then only from the influence of medicine, up to the first of December, 1833, when she was married.

Previous to her marriage, they had been absent eleven weeks, but appeared in a day or two after, and have re-appeared since that time oftener than before, in a proportion of about two to one, but have always been very slight or small in quantity. About three years since, a discharge commenced from the uterus which was adhesive, and of a white or milky color, and after few months became of a yellow color, with cheesy matter or flocculi, and has continued to this time. Her feet and ankles began to swell about six months after the discharge commenced, and about a year from that time, her legs began to swell and be painful. Her back became very weak soon after the discharge commenced, and has continued so to this time, and she has frequently more or less pain along the lumbar vertebræ. About the middle of December, 1833, and two weeks after her marriage, her left arm began to swell and be painful, and in the first part of June last, her left breast began to swell, and she soon began to feel darting pains in it at intervals of from one to five or six days, which still continue, and are gradually becoming more frequent and violent. In the first part of July last, her right ear began to swell, was very red, and soon became very painful, and the pain extended through the cavity of the ear into the right and middle portion of the head, and in three days the swelling of the ear subsided and left a tubercle of the size of a pea, on the upper side of the jaw, near the ear; but the pain in the internal ear and head has continued with intervals of ease. On the 10th of Nov. last, this tubercle began to enlarge, and to be irritated; and the external cervicle and submaxillary tubercles of the same side began to increase in size, and to be painful, and soon after the throat, with the gum of the upper-jaw of the right side became sore and painful; and in a few days after, the right side of the neck, with the lower and upper-jaw, began to swell, and with the ear and right side of the head became very painful. Her heart began to beat very hard about the last of November, and this strong or hard beating continues. On the 26th of December she began to cough and expectorate, and this cough and expectoration continue.

Her stomach, from the commencement of the disease in the uterus, has been more or less disordered with first mild and then acute symptoms of dyspepsia: bowels confined.

The marasmus has been slow but constant, and is now much advanced, with flaccidity of the muscles.

The disease, it will be seen by the history of this case, was traced with great accuracy to the different organs and limbs. It was then in an active state, in consequence of a cold; for when we repeated the examination, about two weeks from that time, after the cold had subsided, and the disease had consequently become passive, the pain produced by pressure did not dart into the diseased organs as before.

We can, therefore, not only determine the

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character of the disease by these symptoms, which are constant in all the cases, but we can determine whether it is in its active or passive state, in patients of all ages and conditions, without any previous knowledge of them.

When the disease commences in one organ or limb, it is frequently propagated to the other organs or limbs, as is seen in this and the following cases :—

Mrs. T. S., aged 31 years. She came to see us August 14, 1836, and says she has been out of health about five years. The examination in her case was commenced as usual, by an examination of the spine, and first of the first cervical vertebra.

Pressure on a small tubercle of the right side of it produced severe pain, which darted into the right side of the throat, and right side of the head. Pressure on the right side of it produced pain, which darted into the left side of her throat. Pressure on the sides of the second joint also produced pain, which darted into the upper and front part of the neck. Pressure on the 2, 3, 4, and 5 dorsal, produced severe pain, which darted into the stomach. Pressure on the right side of the 7, 8, and 9 produced severe pain also, which darted into the region of the liver. Pressure on the 3 and 4 lumbar dorsal was painful. Pressure on the other cervical dorsal and lumbar vertebræ, produced no pain or effect whatever.

We now examined the line of glands along the neck, and under the jaws, and found them very much enlarged, and told her that her tonsils and palate were enlarged, and that she had the dyspepsia, chronic disease of the liver and leucorrhœa, besides swellings of some of her limbs.

She said that was right, and that the disease commenced in the uterus five years before, and about a year after it commenced in her liver, and in a few months after that, in her stomach; and that it was now nearly three months since her ankles and legs began to swell. It is now a year since her catamenia disappeared, and they have not since returned. On examining her throat, found the tonsils and palate very much enlarged, and the tongue one-third larger than natural. The tonsils are very sensible to pressure, and have, with the palate and rest of the throat, a dark red color, and during the last few weeks the act of deglutition, or of swallowing solid food, has been difficult and painful. She has had more or less pain in the right side of her head with dizziness, during the last few months. She is also very pale, feeble, and emaciated.

Mr. W., merchant, aged 28 years, called upon me May —, 1836, who told me he had been out of health a number of years, and had been growing much worse during the last few weeks.

On applying pressure to the 2, 3, and 4 dorsal it produced a dull pain in these vertebræ. Pressure on the right side of the spine, between the 7 and 8 and 8 and 9 dorsal, produced the same kind of pain. Pressure on the right side, between the 12th dorsal and first lumbar vertebræ, produced severe pain, which darted into the region of the right kidney, showing the disease in an active state in the last organ, and in a passive state in the liver and stomach. There also appeared to be a swelling along the right side of the spine, extending from the 9th dorsal to the 5th lumbar vertebræ, which had a puffy or elastic feel, and on comparing this with the left side of the spine, this swelling and puffiness was very conspicuous. Diagnosis: Tubercula of the liver, stomach, right kidney, and spine.

The disease, he informed me, commenced in the liver about three years before, and that it was about a year since it commenced in his stomach, and three weeks since it extended to his kindey, and gave him the most serious alarm for his safety. He has, as usual in such cases, consulted and employed a number of physcians in this case, and rigidly followed their prescriptions, and yet the disease in the liver continued to grow worse—was extended to the stomach, and has now extended to the right kidney, and right side of the spine.

These symptoms point to the disease in every other part of the system that may be tuberculated, in the most arbitrary manner; as in these cases without any regard to the classifi-

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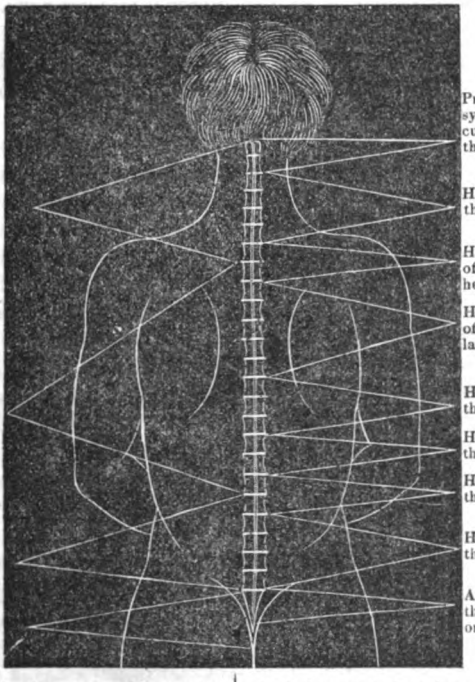
cation of nosologists, or the pedantic theories of the schools.

They are the natural and scientific symptoms of the disease in its active and passive state in the organs—they are produced by natural causes, and are very plain, *invariable*, and easily understood.

When the disease has commenced in one organ or limb, it is frequently propagated from that to another organ or limb, as in the case of Mrs. J. P—cases in which it is propagated from the tonsils and uvula to the lungs, and from the stomach, to the lungs, and from the liver to the stomach, and from the uterus to the ankles, legs, and stomach, are very common

In examining patients with chronic diseases, it should not be forgotten that the disease is sometimes in an active, but *most commonly* in a passive state. If the disease were constantly in an active state, patients would die with it in a few weeks, like those with acute diseases, instead of living as they do months, and sometimes years. We can always tell, in an instant, whether it is in an active or passive state, in the organs, by pressure in the proper places on the spine. If the disease is active, the pain produced by the pressure will dart into the diseased organ with a violence proportioned to the intensity of the disease, but if it is in a passive state, pressure produces pain in the spine only



In distinguishing the disease, and in tracing it in the different organs and limbs, we commenced and pursued the examinations as detailed in the cases appended to this work as we commonly do, without any previous knowledge of them. Any person of common education and capacity may easily distinguish the disease in the same way, in any of the organs or limbs.

which does not dart into the diseased organ as in its active state, but is more or less severe in proportion to the progress of the disease.

In many cases of the disease affecting the different organs, pain more or less severe is felt along the vertebræ, when none is felt in the diseased organ. We frequently find the same phenomenon in disease of the hip

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joint, where the pain is in the knee instead of the hip.

Patients consequently refer the disease to the place where the pain is felt, and some physcians who have no more knowledge than they, agree with them, and apply their remedies to the same place. Large blisters have been applied to the knee, and cupping, blistering, setons, issues and the moxa to the spine in such cases without mercy during many months, and an enormous amount of suffering has been frequently inflicted in this way with little or no benefit to the patient.

These symptoms are magnetic, for when we press on the ganglions of spinal nerves, in the active state of the disease, and the pain produced by pressure darts into the diseased organ, a *force* passes into the organs, and consequently produces pain in it, and that force is magnetic.

ARTICLE III.

Recent European discoveries in Tubercular Disease.

In the preceding article, the editor has presented three cases out of many thousands that have occurred in his own practice during the last thirty years, to illustrate the symptoms of tubercular disease, upon which his peculiar mode of treatment has been founded. If those symptoms and that treatment have remained, for so long a period, comparatively unknown to, and unacknowledged by the profession in general, it is to their prejudices and their attachment to the old visionary theories and practice of the schools, that the consequences must be charged; for he has published more than fifteen thousand copies of several works which he has written upon the subject, and transmitted them far and near.

It is due, however, to some of the members of the profession, to state, that their intelligence and candor have already, within a few years past, cleared away much of the dense mass of bigotry and hostility which surrounded them, and opened a fertile field of extensive usefulness. To those enlightened and liberal coadjutors, scarcely less than to the editor himself, it must afford a high and cheering satisfaction, to see exhibited, to the whole medical world, so triumphant a confirmation of the truth of their theory and practice, as is obtained from the recent discoveries of several of the most distinguished physicians and anatomists of Europe. And first for the direct connection which we have claimed between the posterior spinal nerves and the organs, we extract the following notice from a late number of the London Lancet

[ANATOMY OF THE GANGLIONIC NERVES.]

The researches of Volkmann and Bidder have confirmed—what, indeed, the march of science had previously caused to be little doubted by physiologists—that the ganglionic or sympatheticis not a mere offset from the cerebro-spinal nervous system, but an independent system of itself. The above anatomists have, by the aid of the microscope, verified a great difference in the arrangement of the nervous fibrillæ in the two systems. The fibrillæ of the sympathetic nerves are distinguished from those of the spinal cord, by being paler, thinner, and containing less granular matter. Collected in bundles they have a greyish-yellow tinge. Where they communicate with the spinal nerves, the fibrils of each system of nerves may be distinctly traced by the aid of the microscope. Those of the sympathetic system are seen not only to penetrate to the centre of the spinal nerves, but to spread themselves around the circumference of the latter, where, by a careful measurement, the greater number are found to be distributed. If the sympathetic nerves originated from those of the spinal cord, say Volkmann and Bidder, we ought to find fibrils belonging to them in the roots of the spinal nerves. Now, if these roots be examined, scarcely one *sympathetic* among fifty medulary fibrils will be found; though they ought in such a case to be met with there in greatest number. *The sympathetic nerves in reality originate in the ganglia;* but not only in the ganglia of the sympathetic cord, but those also on the *posterior branches of the spinal nerves.* These latter ganglia especially give origin to the sympathetic filaments destined to unite with the posterior ramifications of the spinal nerves, a fact which gives probability to the hypothesis of Weber respecting the use of the spinal ganglia.—*Froriep's Notizen*, xxxi., 20.

Now, we many years since discovered, with the magnetic symptoms, (by which tubercular disease is distinguished in little children, with the same certainty as in adults,) a direct connection between the posterior spinal nerves, and the ganglionic or sympathetic system of nerves, connected with the organs, which connection, has been constantly denied by the advocates of the ridiculous notion of

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referring tubercular disease of the organs, to "spinal disease," "spinal irritation" "nervous affections of the spine," "spinal neuralgia," &c., with all their horribly torturing appliances. We also traced this connection with *clairvoyants*, and Volkmann and Bidder have now traced it with the microscope, and as this connection is now confirmed by foreign authority, it will be taught in our medical colleges, in connection with the magnetic symptoms, as soon as the conceited professors of these schools can be replaced by men who have talents and industry to keep pace with the improvements in our profession. The quackery which these professors have practised and disseminated in their lectures, and the amount of suffering they have inflicted upon their patients, while they were literally groaning under the weight of their knowledge of "SPINAL DISEASE"—"SPINAL IRRITATION"—"NERVOUS AFFECTIONS OF THE SPINE"—"SPINAL NEURALGIA," &c., which it is now seen were never favored with a real existence, is absolutely appalling; yet they have the vanity to establish rules of practice, and the barefaced effrontery to denounce every physician who varies from them.

In confirmation of the views which we have so long maintained on this continent, of the general prevalence of tubercular disease in the organs and limbs, against the combined influence of the professors of our colleges, we present the following abstract of the second lecture of M. Lugol of Paris, on Scrofula.

Tubercles in particular Organs.—The consideration of this part of the subject belongs rather to Pathological Anatomy. The diagnosis of tubercles in particular organs, *is very difficult* at least in the first period of their existence.

When tubercles exist in the sub-cutaneous regions, the mere local examination of the part at once enables us to convince ourselves of their presence, although, as we have already stated, these morbid productions develope themselves gradually *without pain*, and without swelling of the surrounding parts, in a word without giving rise to any perceptible phenomena.

When, therefore, we consider, that sub-cutaneous tubercles only become manifest during the first stages of their existence, because they are external, we can easily understand how it is, that in the mediastinum and the parenchymatous organs, this source of diagnosis being closed, it should be, always difficult, and *often impossible* to recognize their presence.

Tubercles may exist in parenchymatous organs, may even partly *annihilate them without their existence being revealed by any external symptoms;* or if they are discovered it is at an advanced period of their existence, when they have so far progressed that treatment is no longer of any avail. In such cases it can scarce be said that the malady has been recognized during life; *they* belong in reality to Pathological Anatomy.

Our want of success in the use of the ordinary means of diagnosticating tubercles, proves that those means are inadequate, that we follow an erroneous course in our investigations, and that we must resort to new modes if we wish to be successful.

When pulmonary tubercles are suspected, we resort to auscultation and percussion, but in many cases these fail us, even when numerous tubercles are disseminated through the lungs, and for this reason it is that many physicians, after having greatly exaggerated the value of the stethoscopic signs, now declare them of little value, at least during the first stages of the disease. There is here another mode to which we may resort, induction; for instance, a patient complains for some time of slight pain and uneasiness in the thoracic cavity, we resort to auscultation and percussion, the resonance of the thorax is every where normal, pulmonary expansion free and easy, respiration perfectly natural, and guided by these data the physician declares that there are no tubercles in the lungs. But *he is deceived*, the method of investigation which he has followed has been inefficient. If we consider that the patient is born of tuberculous parents, that he has lost brothers or sisters from phthisis, or that they are suffering from cervical tubercles, white swelling or other scrofulous affections, that his health is delicate, his growth has been deficient, in a word, if we consult with care antecedents and coincidences, we hall acquire the conviction that his lungs contain tubercles, although *auscultation is powerless to demonstrate their presence.*

One of two things happens, either auscultation agrees with the data furnished by induction, then it affords a valuable concurrent testimony, or it disagrees, and then I think we should follow induction as less likely to deceive us. Especially would I rely on the evidence of hereditary taint

Tubercles in the Brain.—Out of four cases, in which tubercles were found in the brain after death, there were two in which symptoms were noted which might be referred to their presence, but in the other two, though the lesions were more serious, no signs revealed the tuberculous disease. In one of these cases, the left hemisphere had nearly disappeared, being replaced by a cyst filled with tuberculous matter. It is remarkable that the brain should undergo such extensive

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alterations *without any external symptoms*, informing us of the gravity of the lesions which had taken place in its substance.

It is equally difficult to ascertain the presence of tubercles in the cerebellum, in most cases indeed their existence is *not even suspected*. M. Lugol has met with several instances in which tubercles as large as a *walnut or a horse chesnut*, have been found in the cerebellum, in subjects who presented during life no indication of encephalic disease. One of the cases he relates in illustration of this fact, is interesting in a physiological point of view. A young girl, though 17 years old, presented no indications of puberty, the breasts and genitals were completely rudimentary. The head was always thrown backward, and it was only by an effort of the will that it could be brought forward.

M. Lugol has seen tubercles in the tuber annulare, (pons varolii, *l*, fig. 4) without any symptoms.

Tubercles in the Lungs.—In the lungs, tubercles are so commonly met with, that M. Lugol believes it to be a rule having very few exceptions, that they always co-exist in that organ with other scrofulous disease, if the patient have attained to the age of puberty. They may appear very early in life, and *obstinate cough in children* sometimes depends on their presence. The period of life at which they are most commonly developed is the few years after puberty. At this period we too often observe in scrofulous patients the terrible array of symptoms which characterize phthisis.

Puberty then is the time at which tubercles in the lungs most commonly appear, and this is a rule so general, that in the only three cases in which M. Lugol recollects having assured himself of the absence of tubercles from the lungs of scrofulous patients of adult age, the organic signs by which puberty is commonly manifested were entirely absent. Scrofulous patients, however, occasionally advance in years, without any manifestations of tubercles in the lungs, and it happens sometimes, though rarely, that at that period the symptoms of scrofula gradually diminish, and finally disappear entirely—but the predisposition still exists and the malady may return sooner or later. Sometimes the invasion of tubercles in the lungs is sudden, and their generation progresses with frightful rapidity. This form of phthisis is rapidly fatal. This may be assimilated to what occurs in the cervical region.

Tubercles in the lungs *follow precisely the same course as elsewhere*. At first disseminated in the tissue of the lung, they gradually converge as they increase in size, and uniting, form *tuberculous masses*. These when they soften and are evacuated, leave behind them *tuberculous caverns*, which are cavities in the substance of the lungs, the walls of which are formed by pulmonary structure or by what remains of the tuberculous matter. When a tuberculous mass empties itself into the bronchius, and is rejected by expectoration it constitutes a *vomica*. It is just possible that one of these caverns may heal, but even if they do, other tubercles remain, or if not, the predisposition to generate tubercle still remains, and in nearly every instance the patient will eventually fall a victim to the disease.—These cavities become the seat of a more or less abundant tuberculous suppuration, this is of course absent till the tubercle has made its way into the bronchius. We shall here only allude to the existence of a trachael, pleural or costal fistula, the history of these does not belong to our present subject.

On examining the lungs of a patient who has died with tubercles we are often tempted to ask ourselves, why did not this patient, in whom so large a portion of the lungs is destroyed, and what remains is so compressed and condensed that it is no longer capable of receiving air, die of asphyxia? It is evident that they cannot be said to breathe by the lungs, for a long period before they die; now in such cases, which of the organs takes the place of the pulmonary tissue? M. Lugol had no facts which authorize him to attempt an answer to this difficult question. The presence of tubercles in the lungs may coincide with an otherwise healthy state of the organs; indeed M. Lugol questions whether the lungs may not be healthy even in the advanced stage.

From all that has been said, it results that pulmonary tubercle is in fact but tuberculous scrofula. This is the position which the disease ought to occupy, and pathologists would *never*, in all probability have attributed phthisis to *inflammation* if they had studied it as *what it is*, a manifestation of scrofula.

Nor would thousands have been hurried into their graves, as they have been every year with rail-road speed, if phthisis or consumption, had not been treated as inflammations, by bleeding, antimonials, cathartics, blisters, &c. &c. Hundreds of these, would have been saved every year, by nature alone, from the change of seasons, who are now mouldering in their graves, the victims of the scientific quackery of the schools.

Tubercles in the Liver, Kidneys, Ovaria, and Testes—The liver is often found to have undergone the fatty degeneration in scrofulous patients, but it is not often the seat of tubercles. They are rare in the biliary ducts, though M. Lugol has seen one the size of a large walnut in the cystic duct. They are more common in the spleen than in the liver, and when they co-exist in these two organs, those in the spleen are most advanced. M. Lugol has never seen tubercle in the pancreas. In the kidneys tubercle is common, it invades both the cortical and the tubular portions, and sometimes acquires the size of a walnut. There are seldom more than three

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or four. M. Lugol has seen *tubercle* in the *ureters.* He has only once seen it in the ovaries, when it co-existed with tubercle of the folds of the mesentery, the cerebellum and the lungs. Tubercles in the testes are not uncommon.

Tubercles in the Muscles, Bones, and Blood Vessels.—Tubercles may be generated in the muscular as in other tissues. M. Lugol has however only seen it in the psoas, in that case, the tubercle was in the midst of the muscle. There was no lesion of the bones in the neighborhood, the tuberculous matter had evidently been generated there.

More than twelve years ago, M. Lugol satisfactorily demonstrated the existence of tubercles in the bones, developed in the osseous tissue and increasing as tubercle does elsewhere at the expense of the tissue in which it is developed. They have been found in the centre of bones surrounded by healthy osseous structure. Tubercles are often developed around large blood vessels, but that dropsical effusions so common in scrofulous diseases, depended on the pressure of these tumors upon the vessels, M. Lugol has not been able to convince himself. He has never known one of these tuberculous tumors penetrate the coats of the vessel around which it was developed.

Tubercles in the Blood.—M. Lugol has found tubercles swimming in the blood of the iliac veins at the origin of the vena cava. It was impossible to admit that the tubercles had originated externally to the vessel. They were of an ovoid form, ten in number.

Having now studied tubercle in the different organs, we pass to the consideration of

The Formation of Tubercles.—Pathologists are by no means agreed upon this subject, some believe tubercles the product of inflammation, others a product or an alteration of secretion, others again a degeneration of the normal tissues. M. Lugol regards tubercles as *parasitical organs* generated in the economy with an organization which enables them to increase by intusseption, so that their progressive developement is explained by their anatomical structure. Tubercles are not the normal tissue degenerated, else during their first stage we should be able to recognize the tissue which is undergoing the morbid change, but this is not so, wherever generated, tubercle is in every thing but form, the same; the organ in which it is developed never modifies its nature.

M. Lugol, however, I may say with great deference to his opinion, is mistaken in the true character of tubercles. They are, as I have found them by numerous dissections, diseased lymphatic glands, and the new symptoms I have introduced to distinguish this disease, and which depend entirely on the motive power of the system, demonstrate this fact in the clearest manner.

As to the doctrine which attributes tubercles to inflammation, it deserves a more detailed notice.

Inflammation is a peculiar and complex state, having some symptoms which are inherent in its nature and essential, and others which vary according to its particular location. Now the products of inflammation differ in different organs and tissues. The liver does not suppurate as the lungs do, nor the serous as the mucous tissues. Tubercles on the contrary, are as we have said *always identical, never varying*, whatever organ they may attack. The generation of tubercles has been most studied in the lungs, let us examine it there in reference to inflammation as its cause. Pneumonia is a common disease, so common that did there really exist any connexion between it as a cause, and the generation of tubercles as an effect, that connexion would assuredly be discovered. But this is not the case. Nay more, the labors of Bayle and other pathologists prove that pneumonia has no connexion whatever with the generation of tubercles. Bayle examined the bodies of numerous patients dying with pneumonia; he found the lungs hepaticised, carnified, but never tuberculous. Again, epidemic pneumonias are by no means uncommon, and where they have prevailed, a great mass of the population ought to be affected with tubercles, yet this has never been noted as a consequence of epidemic pneumonias by any of the authors who have left us descriptions of them.

M. Lugol hesitates to allow pneumonia any influence even in augmenting the secretion of tubercle, his facts however, do not authorize him in pronouncing a positive opinion. He thinks that many pathologists have attributed pulmonary tubercle to inflammation, who never would have thought of adopting such an etiology, for any other form of tubercle, as tubercle in the liver, the spleen, the mesentery, &c.—*Med. Gaz.*

The following are extracts from M. Lugol's fourth lecture on the formation of tubercles in internal organs:

"The numerous checks and *repeated deceptions* to which physicians are daily exposed in the DIAGNOSIS and TREATMENT of tuberculous diseases, do they not prove that it is necessary to leave the beaten track of inquiry and pursue some other which is less fallible? You all know that auscultation and percussion are useless in the diagnosis of pulmonary tubercles.—Both alike insufficient to announce the commencement of the mischief, they are superfluous at the very time that they become capable of indicating the presence of tubercles; for then these are discoverable by other means, and alas! are too far advanced in their development to warrant our hopes of arresting their progress—at least in the generality of cases. I will even go a step farther, and say that the unlimited confidence placed by the greater number of practitioners of the

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present day in auscultation and percussion, has had the effect of too often inspiring a *fatal* security in many tuberculous diseases, which are thereby allowed to advance in their progress, until this is revealed by physical phenomena at a period when remedial measures have but little chance of effecting any good.

But what are the means, you will say to me, that are to be substituted in the room of auscultation and percussion? I answer, gentlemen, induction. Examine by these boasted methods this patient, and tell me what results you obtain. Negative results you will reply. And yet I maintain that he is tuberculous; for his father, his mother, and his brothers, have all died of tuberculous disease; and he himself is affected with it in his chest at the present moment. Believe me, this plan is much less deceptive than the other one. I tell you, the inductive method cannot mislead you; for nature is invariable in its causes as in its effects; and the external signs of tuberculous scrofula must give you assurance that similar morbid productions exist in internal organs, especially in the lungs.

M. Lugol is mistaken in regard to the certainty of this method; for nothing is more common than to find all the external signs of tuberculous disease, without tuberculization of the lungs, and this fact is disclosed by the absence of the magnetic symptoms, while their presence gives the first notice of the commencement of the disease in the lungs even before the cough commences.

"It is by viewing the question from this elevated point of view, by studying it in all its *ensemble*, that you will be best enabled to comprehend it in its details; and these cannot be understood by the special methods of examination which have been so much recommended of late years.

The tuberculization of internal organs exhibits in its development the same phenomena as tubercles which are outwardly situated—there is no pain and nothing of mechanical derangements.

The existence of tubercles in the lungs is so frequent, that I must admit that they are present in all scrofulous persons. You know that all, or almost all patients, who have pulmonary tubercles, are, or have been at some time, affected with tubercles in the neck; the majority have had during infancy this external sign of scrofula; while others have had it at a later period of life. I believe that pulmonary tubercles frequently exist in early youth, but it is frequently about the age of puberty that they are apt to be developed. Puberty in truth seems to have a fatal specific influence in promoting their development; and in our wards at the present moment there is a case which seems to confirm this opinion. A scrofulous patient, who, although 22 years of age, exhibited none of the usual characters of marriageableness, has just died, and in him no tubercles were found in the lungs.

To the *Royal Medical and Chirurgical Society, Jan.* 25 1842. Dr. WILLIAMS, President, in the Chair, the following facts concerning Tubercles of the Brain in children, with a Tabular View of 30 cases of the affection, was communicated by Dr. T. H BURGESS.

An analysis of 30 cases of tubercle of the brain is laid before the society by the author, preparatory to a more extended communication on this subject, which he promises to afford.

After noticing the importance of extended post-mortem researches, with a view to the pathology of the brain, so as to comprehend lesions of the medulla oblongata, he concludes with some general remarks on his Tabular View. In his 30 cases, the ages he observes, varied between 19 months and 12 years.

With respect to sex, 14 were boys, 16 girls.

In *four* cases, no cerebral symptoms existed during life; in two, only periodical head-ache: in two, deafness and purulent discharge from the ear. In the remaining cases, head-ache, vomiting, amaurosis, convulsions, weakening of intellect, were observable; the duration of this chronic state varying from *one* month to *three* years.

Nine died with acute hydrocephalic symptoms, a few with symptoms of softening, the rest of consumption, small-pox, &c.

The number, volume, and site of the tuberculous masses, varied considerably in different cases.

A discussion took place, relating chiefly to the degree in which the pathology of tubercles in the brain was known in England; Dr. Addison, particularly, stating that he believed the disease was so familiar to practitioners, that in many obscure chronic affections of the brain it was almost confidently expected that tubercles would be found either in the substance of the brain or in its membranes.

These are all cases of children. The disease in the brain is besides very common in adults, as we always have cases of it on hand, which yield to the influence of the magnetic remedies, as it does when affecting other organs. Very little, however, is known of the pathology of tubercles in the brain in this country. There are even professors of the theory and practice of physic in our Medical Colleges, who have often exposed their ignorance by denying the existence of tubercular disease of the brain, "except in *extremely* rare cases."

ARTICLE IV.

The Sequel of Homœopathy.

PROFESSOR HAHNEMANN divested himself of the shackles which bound him to the old visionary theories and routine practice of the schools, and undertook to effect a most important object by the most extraordinary

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means. His object was a revolution in the theory and practice of physic. This he avowed; and he supported its necessity and importance with great ability; but the means by which he intended to effect it, like the general who contemplates storming an enemy's camp, he kept a profound secret. His enemies in the distance, as well as his most obsequious proselytes, were equally in the dark, and while the first were amused, the latter were astonished at the novelty and profundity of his pretended expedients to demolish "the old allœopathy castles in the air." He had too much good sense to think for a moment, of attacking these ærial fortresses with "gross inanimate matter," after he had seen in the clairvoyant or somnicient state, the astonishing effects of the "spiritual, self-moved, vital dynamic power, which moves our systems, and preserves them in harmonious order."

Besides this knowledge of the moving power of the human system, that of the identity of the magnetic or spiritual forces of nature with the powers of medicine, was one of those discoveries which he considered too far in advance of the intelligence and candor of the age to be entrusted to the rude resistance of established prejudices; and, therefore, in imitation of the wise examples of antiquity, he cautiously veiled it, under the specious garb of the magical effects of infinitesimal doses of medicines, for the purpose of preserving its advantages through this, to a more enlightened and liberal period.

The following are the corollaries on which he founds his theory, and practice; his other corollaries being chiefly intended to veil his discovery in its application to practice, by the gratification of the marvellous propensities of his readers; and while he depends entirely on the action of the magnetic or spiritual forces, which he condenses in his homœopathic doses, for the success of his system.

Prelude.

"To presume that disease (non chirugical) is a peculiar and distinct *something*, residing in man, is a conceit, which has rendered allœopathy so pernicious."

Corollaries.

1. "During health, the system is animated by a *spiritual, self-moved, vital power*, which preserves it in harmonious order." That is, it is magnetized, with the forces in equal proportion.

2. "Without this *vital dynamic power*, the organism is dead." Or, it is unmagnetized.

3. "In disease, the *vital power* only is primarily disturbed, and *expresses its sufferings* (internal changes) by abnormal alterations in the *sensations* and *actions* of the system." Or one of the forces predominates.

4. "By the extinction of the totality of the symptoms in the process of cure, the *suffering* of the *vital power*, that is the entire morbid affection, inwardly and outwardly, is removed."

5. "The *sufferings* of the *deranged vital power*, and the morbid symptoms produced thereby, as an indivisible whole, are one and the same."

6. "It is only by means of the *spiritual* influence of the morbific agent, that our *spiritual vital power*, can be diseased, and in like manner, only by the *spiritual* (dynamic) operation of medicine that health can be restored."—ORGANON OF MEDICINE, xviii.

The following extracts from his "Organon," will bear conclusive evidence of the fact, that he does not depend on the natural quantity of the spiritual or magnetic forces in their medicines to cure diseases.

1. "It is only by the use of the *minutest* homœopathic doses, that the reaction of vital power shows itself, simply by restoring the equilibrium of health. p. xx.

2. "But the signs of amendment furnished by the mind and temper of the patient, are never visible (shortly after he has taken the remedy,) but where the dose *has been attenuated to the proper degree*—that is to say, as much as *possible*. A dose stronger than necessary (even of the most homœopathic remedy) acts with too great violence, and plunges the moral and intellectual faculties into such disorder that it is impossible to discover quickly any amendment that takes place. p. 193.

3. "A judicious physician will confine himself to an internal application of the remedy which he has selected as homœopathically as *possible*, and will leave the use of ptisans, little bags filled with medicine herbs, fomentations of vegetable decoctions, washes, and frictions with different species of ointments, injections, &c., to those who practice according to routine." p. 202.

4. "The best mode of administration is to make use of small globules of sugar, the size of mustard seed; one of these globules having imbibed the medicine, and being introduced into the vehicle, forms a dose containing about the three-hundredth part of a drop, for three hundred such globules will imbibe one drop of alcohol; by placing one of those on the tongue, and not drinking any thing after it, the dose is considerably diminished. But if the patient is very sensitive, and it is necessary to employ the smallest dose possible

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and attain at the same time the most speedy results, it will be sufficient to *smell* once."—p. 207.

It would be easy to add a great many repetitions of the same declarations in different forms, but these must be abundantly sufficient to satisfy even the greatest skeptic; for it is impossible in the very nature of things, that such minute doses of medicine should produce such effects, or any effect whatever, and this fact was well known to Hahnemann. He indeed says so in the above extracts, in the strongest language he could use, without expressing it in so many words, and thereby expose the object he wished to veil.

Let us now see if we can ascertain by what means it was he communicated to his homœopathic medicines a power which, it is conceded, sometimes, at least, produces the magical effects he describes, and which are claimed for it by homœopathists; and for this purpose it will only be necessary to select and place before the reader a few extracts from the same work above quoted.

"The homœopathic healing art developes for its purpose the IMMATERIAL [DYNAMIC] VIRTUES OF MEDICINAL SUBSTANCES, and to a degree previously unheard of, by means of a *peculiar* and HITHERTO UNTRIED PROCESS. By this process it is that they become penetrating, operative, and remedial, even those that, in a *natural or crude state*, betrayed not the *least medicinal power* upon the human system."—p. 199.

This, it will be conceded, is a very modest announcement for such an important discovery as that of magnetizing even inert substances, so as to give them a high and important remedial power; and from my knowledge of the subject, I cannot avoid entertaining a strong suspicion, that Hahnemann obtained his knowledge of this art, as well as that of the magnetism of the human system from some distinguished clairvoyant. But let us hear how he performs these operations.

"If *two* drops of a mixture of equal parts of alcohol and the recent juice of any medicinal plant be diluted with *ninety-eight* drops of alcohol in a vial capable of containing *one hundred and thirty* drops, and the whole *twice* shaken together, the medicine becomes exalted in energy to the *first* development of power, or, as it may be denominated the *first* potence. The process is to be continued through *twenty-nine* additional vials, each of equal capacity with the first, and each containing *ninety-nine* drops of spirits of wine; so that every successive vial, after the *first*, being furnished with *one* drop from the vial of dilution immedfately preceding (which had just been *twice shaken*,) is, in its *turn* to be *shaken twice*, remembering to *number* the dilution of *each* vial upon the cork as the operation proceeds. The MANIPULATIONS(!) are to be conducted thus through all the vials, from the first up to the *thirtieth* or *decollionth* development of power, which is the one in most general use."

"All other medicinal substances, excepting sulphur, which, of later years, has been employed only in the highly diluted tincture (X), such, for example, as the metals, either pure, or oxydized, or in the form of sulphurets, and other minerals, petroleum, phosphorus, the parts or juices of plants, obtainable only in their dry or inspisated state, animal substances, neutral salts, &c.,—one and all were, in the first place, exalted in energy by attenuation in the form of a powder, by means of *three hours* trituration in a mortar, to the *millionth* degree. Of this *one* grain was then dissolved and brought through twenty-seven vials, by a process similar to that employed in the case of the vegetable juices, up to the *thirtieth* development of power." p. 200.

Hahnemann, it will now be seen, imparts power to, or magnetizes his medicines, as magnetists magnetize their patients; or, by a regular order of manipulations, which increase the power or potency of the medicines, directly as the number of their dilutions; the minimum increase being that of 1 to 100. It is difficult to conceive the minuteness of these doses in the thirtieth or decollionth degree "*in the most common use*" without the greatest exertion of the imagination, even when expressed in figures, thus:

1,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000.

We find nothing more that is peculiar in Hahnemann's art of manipulation in the manufacture of his medicine, except that which is seen in the following paragraph.

"When I make use of the word *intimately*, I mean to say that by *shaking* a drop of medicinal liquid with ninety-nine drops of alcohol *once*—that is to say, by taking the vial in the hand which contains the whole, and imparting to it a *rapid motion*, by a *single* powerful stroke of the arm *descending*.* I shall then obtain an exact mixture of them; but that two, three,

* We see clairvoyants in the somniscient state, magnetize water by the passes descending.

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or ten such movements would render the mixture much closer—that is to say, they would develope the medicinal virtues still further, making them, as it were, more potent, and *their action on the nerves* much more penetrating. In proceeding therefore to the dilution of medicinal substances, it is *wrong* to give the twenty or thirty successive attenuating glasses *more than two shakes*, where it is merely intended to develope the power of the medicine in a moderate degree. It would also be well in the attenuation of powders not to rub them down too much in the mortar; thus, for example, when it is requisite to mix *one grain* of a medicinal substance in its entire state with *ninety-nine* grains of sugar of milk, it ought to be rubbed down with *force* during *one hour only*, and the same space of time should not be exceeded in the subsequent triturations, in order that the power of the medicine may not be carried to too great an extent." p. 207.

The common dose of the solution of the thirtieth or decollionth development of power is one drop, and in the dry state one globule; and these doses are generally repeated in from one to seven days. The action of these medicines is thus described by Hahnemann.

"The action of medicines in a liquid form upon the body, is so penetrating, it propagates itself with so much rapidity, and in a manner so general, from the irritable and sensitive part which has undergone the first impression of the medicinal substance to all the other parts of the body, that we might almost call it a *spiritual* (dynamic or virtual) effect.

"Every part of the body that is sensible to the touch, is equally susceptible of receiving the impression of medicines, and of conveying it to all other parts. Homœopathic remedies operate with the most certainty and energy by *smelling* or inhaling the medicinal *aura constantly emanating* from a saccharine globule that has been impregnated with the higher dilution of a medicine, and in a dry state, enclosed in a small vial. *One globule* (of which 10, 20 to 100 weigh a grain) moistened with the thirtieth dilution and then dried, provided it be preserved from *heat* and the *light* of the *sun*, retains its virtues undiminished, at least for *eighteen or twenty years*, (so far my experience extends,) although the vial that contained it had during that time been opened a thousand times. Should the nostrils be closed by coryza or polypus, the patient may inhale through his mouth, holding the mouth of the vial between his lips. It may be applied to the nostrils of *small children while they are asleep*, with the certainty of success. During these inhalations, the medicinal *aura* comes in contact with the *nerves*, which are spread over the parieties of the ample cavities through which it freely passes, and thus influences the *vital power* in the mildest yet most powerful and beneficial manner. All that is *curable by homœopathy* may with the most certainty and safety be cured by this mode of receiving the medicine. Of late I have become convinced of the fact, (which I would not have previously believed,) that *smelling* imparts a medicinal influence, as energetically and as long continued as when the medicine is taken in substance by the mouth, and at the same time that its operation is thus more gentle than when administered by the latter mode. It is therefore requisite that the intervals for repeating the smelling should not be shorter than those prescribed for taking the medicine in a more substantial form." p. 208.

Caution to Practitioners.

"The smallest homœopathic dose, when properly applied, effects wonders. It not unfrequently occurs, that patients are overwhelmed, by incompetent homœpathists, with a rapid succession of remedies, which though well selected and of the highest potence, yet produce such a state of excessive irritability, that the life of the patient is placed in jeopardy, and another dose, however mild, may prove fatal. Under such circumstances, *the hand of the* MESMERISER *gently sliding down*, and frequently *touching the part affected*, produces an *uniform* distribution of the *vital power* through the system, and *rest*, *sleep* and *health* are restored." p. 211.

How beautiful the description! how charming! and how astonishing the effects! not of infinitesimal doses of medicine, but of the hand of the mesmeriser, when the immaterial (dynamic) or spiritual virtues of his medicines fail! What art! What a magician! Hahnemann "frequently touches" his readers organs of marvelousness, and then "gently sliding them along" to the end of his work, when behold, poor puss is at last exposed to the glaring light of the sun. Hahnemann deserves, and fate has decreed to him, immortal honors, for his success in introducing, in a most adroit manner, against the indomitable prejudices of the age, so simple and so important an agent for often palliating and sometimes curing diseases in a safe and satisfactory manner.

Fundamental Errors in the Homœopathic System.

The following propositions are those on which Hahnemann's apparent or popular theory and practice is founded:

1. "Every curable disease is made known to the physician by its symptoms." (*The old ever-varying symptoms.*)

2. "The *morbid* symptoms which medicines produce in healthy persons, are the sole indi-

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cation of their curative virtues in disease." (*similia similibus*, or, in vulgar phraseology, "the hair of the same dog.")

3. "The *totality* of the symptoms is the sole indication in the choice of the remedy."

These propositions, however simple and plausible they may at first appear, are nevertheless, in their application to practice, the most complicated, and most deceptive, that were ever, perhaps, presented to the human mind; and having disposed of Hahnemann's homœopathic doses of medicine, we propose to devote a few moments to the investigation of the pretensions of these propositions.

There never were propositions more apparently true in the abstract, and yet more positively fallacious in the practice; and no man was more aware of this fact than Hahnemann; for the number of the common symptoms of diseases is infinite, as well as the number of morbid symptoms medicine produces in healthy persons, and both are *infinitely varied* in different cases, and in the same persons at different times, as every physician knows; and hence the number of Hahnemann's pretended remedies are infinite, presenting in the whole, an infinitely varied and complicated system, and therefore an unnatural and erroneous one. He however, had no confidence in it, or in his "spiritual" or magnetic remedy for *all* diseases, and consequently wisely provided a cause for the disappointments of his proselytes, from the frequent failures of their homœopathic medicines, *in their own errors* in selecting the proper ones, for the *totality* of the symptoms.

The truth is, there are very few causes of disease, and the chief of those are atmospherical, uncleanliness, and intemperance; and very few symptoms (pathognomonic) which physicians should regard, and consequently they should prescribe very few remedies. These facts are now so well understood by men of sense and observation, as to induce them to regard physicians, and the latter one another, in an inverse ratio to the number of medicines they prescribe. And the soundness of these views is demonstrated in the clearest manner, in the unity of the true pathognomonic symptoms, and simple specific remedies in truly acute, and in a very large class of chronic diseases.

Hahnemann confounds the true symptoms of acute diseases with the sympathies they produce, and knew nothing of those of chronic diseases, which are truly magnetic and pathognomonic; nor of the great natural divisions of positive and negative matter; nor of the important therapeutical relations of the "spiritual" or magnetic forces with these great divisions of matter; nor of the natural laws of these forces which govern the human system. His theories, like those which have preceded them, are consequently founded on a medley of facts and fictions, and his practice empirical, like the old allœopathic practice of the schools. He has, however, shown that a great variety of different kinds of matter can be magnetized, and their natural distinctive qualities thereby greatly increased, and that therefore there may be truly "magnetic remedies." He has also shown the existence of intimate and important relations between magnetized remedies and the magnetism of the human system, and has consequently added much to our *knowledge*, as well as to the mortification of those who are constitutionally, as well as from motives of interest, opposed to such innovations.

There have been many explanations given of the action of Hahnemann's minute doses of medicine, by a number of Homœopathists at different periods, to all of which, many objections have been raised. The following from Professor Doppler, seems to have given the greatest satisfaction to these physicians.

Professor Doppler's Explanation of the action of Homœopathic Remedies.

The main points are briefly the following:—"The active strength of a medicine is not to be judged of according to its weight, but according to the size of its effective surface. The physical surface is to be distinguished from the mathematical one; the general physical surface increases by trituration of the medicine with another body (sugar of milk) in a greater proportion, than the diameter of the individual particle diminishes itself. Now, if we only consent to the hundred-fold diminution of an atom by each trituration, calculation will show, that the physical surface, after the third trituration, amounts to about two square

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miles, and that the small point of a knife full of the thirtieth trituration, offers a surface of many thousand square miles. If, therefore, the power of action is measured by the extent of surface, the apparent minuteness rises to a real and truly astonishing magnitude. The cause of the action of surfaces rests on the argument, that with the division of a body, electricity is developed, and that the quantity of free electricity increases in an equal ratio with the increased surface."

Jahr, the great and prolific champion of homœopathy, adopts this explanation or theory of the action of these medicines, which is, in fact, nothing more than another medley of facts and fictions. The active strength of a medicine should not be judged by its weight, nor by the extent of its atomic surface, but by the quantity of its distinctive properties in a given space, the action of which is increased by magnetizing the dormant forces in the atoms of the medicine in which they are condensed, as we do those of iron or steel, which is conformable to theory and observation. The amount of these innate and all pervading forces in iron and steel, is very great; yet their effect upon the magnetic needle, like the unmagnetized homœopathic doses upon the human system, is inappreciable until their power is developed by magnetizing, when it becomes very great, or is increased and expanded in direct proportion to the amount of the forces, in a given space, in the body magnetized.

In assuming this explanation to be, as it really is, mathematically correct, the veiled novice may be overwhelmed with astonishment, upon the first announcement of the fact that medicine, from the mineral, vegetable and animal kingdoms, as well as man, can be magnetized; yet there is nothing more certain; and these, with a great many other corresponding facts, establish the existence of a magnetic medium by which we are surrounded, and by which we are thus connected with the earth and even with the sun.

Sir H. Davy says, "Electricity (or magnetism) seems to be an inlet into the internal structures of bodies, on which all their sensible properties depend; in pursuing therefore, this new light, the bounds of natural science may possibly be extended beyond what we can now form any idea of; new worlds may be opened to our view, and the glory of the great Newton himself, may be eclipsed by a new set of philosophers, in quite a new field of observation." Sir H. supposed the heat of the animal frame to be engendered by electricity; taking it furthermore, to be identical with the nervous fluid.

Dr. Griffith has lately made some researches on the nature of molecular motions in substances impalpably divided. With respect to those occurring among particles of insoluble bodies in water, he denies that they are to be attributed, as has been supposed, to the evaporation of the fluid, inasmuch as they continued, when this process was cut off, by inclosing the fluids and particles between two pieces of glass, evaporation at the edges also being prevented by a rim of olive or almond oil, or lamp-black mixed with gold-size. He says :—(Med. Gaz.)

"I have examined a large number of inorganic substances powdered in a mortar to the finest powder, and have found no difficulty in detecting the *peculiar* motion in any substance save semi-fluid bodies, or solids which cannot be reduced to a sufficiently fine powder. The motion is quite destroyed by immersion in oil, thick gum, or syrup; here the viscidity of the liquids seems to prevent its taking place. It has appeared to me to ensue most readily in water, less so in spirit and least of all in either. The movement is *totally different* from that of particles which are moved by currents excited by evaporation. These latter hurl a number of molecules in vortices with great rapidity; in the true molecular movement the molecular *oscillate* or *vibrate*, moving but very slowly from place to place; in some cases we can clearly perceive a single molecule quite distinct from others and enjoying its own *spherical* movements." True molecular motion is due, 1st, to an extreme subdivision of the matter: 2dly, to a relation between the specific gravity of the molecule and the medium that shall admit its free suspension; 3dly to absence of all viscidity in the liquid. Under these circumstances any kind of matter, organic or inorganic, will exhibit this motion. The *cause* of the motion is yet *unknown*, it has not appeared, in the hands of Dr. Griffith, to be influenced by electricity.—*London Lancet*, *July* 8 1843.

The pecular oscillating or vibrating motions in these molecules or atoms, uninfluenced by currents, is conclusive in regard to the cause of the motion; there is no longer any room to doubt that it is magnetic—that these molecules are magnetized in the process of re-

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duction to the atomic state; for besides the corresponding oscillating motions, the power of the innate unmagnetised forces in matter, is well known to be too weak to overcome the resistance of the magnetic medium which surrounds them, and produce such results.

Effects of Galvanism known to the Ancients.

(*From the London Lancet, Saturday, July* 29, 1843.)

In calling attention, as we last week promised to some of the "OLD FRIENDS WITH NEW FACES," to whom we then referred, we shall for obvious reasons, not follow any exact order of presentation, but shall introduce them in chronological succession, or in the sequence that is best suited to the illustrations that we have proposed; or else in an insulated form, just as they may occur to us. Following the last named method,—or what must, perhaps, rather be regarded as a deviation from method,—we shall on the present occasion, direct attention to the medicinal applications of *galvanism*, as adverted to by the Greek and Roman writers on medicine.

"Galvanism applied to medicine by the Greeks and Romans! Why, the existence of any such principle was not known until the year 1790!" Very true. Yet that galvanism was, virtually, applied by the ancients to the treatment of disease, we now propose to demonstrate, citing, with that view, certain passages from Greek and Roman writers, and translating them for the benefit of all Fellows of the London College of Physcians and other unlearned persons who need English versions thereof.

There is a certain living voltaic battery called a *torpedo*. The ancients were acquainted with that fish, and were in the habit of employing the shock which it communicates as a remedial agent. The following passage of GALEN is in several respects remarkable:—

"Some persons think that certain bodies can affect others in their vicinity by contact only, in consequence of the mere force of their virtue, and that this is plainly shown in the case of the marine torpedo, the power of which is so great that when it is transmitted to the hand of the fisherman through his spear, it suddenly renders the whole hand torpid. From these conjectures it is easily understood that certain things of small bulk induce, by contact alone, the greatest alterations; as may be seen, also, in the Heraclean stone, which is called the magnet; for iron which it has touched adheres to it without any fastening; then if another piece of iron touch that which was first touched, it will adhere to it as the first did to the magnet; a third piece of iron will, in like manner, adhere to the second, so as to make it evident that most intense powers reside in certain substances."—(GALEN, "De Locis Affectis," lib. vi., c. 5. Edit. Basil, Græce, 1538.)

We have here three things worthy of notice; first, a recognition of the power that has since been known as animal electricity; secondly, a knowledge of the fact that this power is capable of transmission through a conducting medium; and, thirdly, a conjecture of its affinity to the magnetic power. In another place the same author says,

"But some persons write that a whole torpedo (I speak of the marine animal) will cure headache when applied to the part, and will cause a prolapsed anus to return. But I, having tried it in both cases, found the assertion true in neither. Bethinking me, however, that the fish should be applied to the aching head alive, and that it might have an anodyne power, and allay pain like other things which obtund the sense, I found such to be the case."—("De Simpl. Madic. Facult.," lib. xi. Ed. cit., tom. ii. p. 150.)

ÆTIUS writes to the same effect:—

"The torpedo, applied alive, cures chronic headache, and causes the prolapsed anus to return. When dead, it produces these effects either not at all, or only in a small degree." ("Lib. Medicinal," lib. ii.. c. 185, Ed. Ald.)

SCRIBONIUS LARGUS, a miserable Latin writer, of the age of CLAUDIAN, recommends the application of torpedos, both in headache and in gout:—

"A headache, however inveterate and intolerable, is immediately removed, and permanently cured, by placing a live black torpedo on the painful part till the pain cease and the part become benumbed. As soon as these effects have taken place, the remedy should be removed lest the sensibility of the part be destroyed. Several torpedos of this kind should be procured, because sometimes the cure scarcely responds to the action of two or three, that is, the torpor which is the sign of the cure."—("Compositiones Medicæ," c. i. Apud Medicæ Artis Principes, 1567.)

"In both species of gout (the hot and the cold, to wit) a live black torpedo should be placed under the feet, the patient standing, not on a dry shore, but one washed by the sea, till the whole foot and leg is benumbed, up to the knees. This both removes the pain at the time, and prevents its future return."—(Op. cit. c. 41.)

MARCELLUS EMPIRICUS, who, unless there has been some confusion of manuscripts, is the most impudent of plagiarists, has copied whole passages from SCRIBONIUS, without acknowledgement; among others, the two just quoted, the former *verbatim*, the latter, nearly so.

So much for torpedos. It is not to this apparently whimsical remedy, that we now request attention, but to the facts that the activity of galvanism on the human system, and its applicability to medicine, were known to the experience of the ancients, although the principle of galvanism was unknown to their philosophy. Might not the intelligent perusal of the first passage that we have quoted from GALEN, have led to the discovery of the galvanic power before the latter end of the eighteenth century?

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Is not a germ of electro-magnetism also to be found in the same passage? It may, however, be asked on the other hand,—If galvanism had been discovered and applied to medicine sooner than it was, would the latter science have been any great gainer thereby? Do the trials that have hitherto been made of electricity, as a threapeutic agent, justify us in reposing much confidence in its powers? We answer that it has not yet received a fair trial, having, in a majority of instances, been unscientifically and inefficiently applied. Some of the results that have been obtained have, nevertheless, been sufficiently striking. It is probable, that a very moderate galvanic influence, sustained for a length of time, will be found of more extensive utility than the more intense but transitory application of the same agent in the way of shocks; but we cannot persuade ourselves that an agent which so powerfully affects the nervous system, as well as the coagulability and other properties of blood, would not, if we knew how to handle it properly, admit of very important applications to the treatment of disease.

These views of the Editor of the London Lancet, corresponds with those we long since formed, and which we have practised upon, through a long series of years, with great success, and as he has advanced so far upon this important and interesting subject, we may now venture to say a word to him on the subject of magnetic remedies in chronic diseases, by which a very moderate galvanic influence is "sustained for a length of time, and the nervous system, as well as the coagulability and other properties of the blood, are effected in the most sanative and beneficial manner. It will not do to say a word to him about magnetised gold pills, in the present state of his knowledge, for with them there would be associated in his mind the idea of "pill monger," and perhaps "animal magnetism" either of which would be fatal to his further progress in favor of "galvanic influence."

We may however say, that the magnetised steel rings, (which may be gilded by the electro-magnetic process,) when worn on the fingers, maintain a moderate magnetic influence in some persons, and a strong one in others, who are very susceptible. They, with the influence of the magnetised gold pills, removed a large tubercle of the size of a small hen's egg, from the side of a person's neck, the last summer in six weeks, which had maintained its position there during five years. They have alone removed tubercles from the necks of more than twenty children, during the last six months; in about the same time, which had remained there from three months to two years, and rendering them liable by a propagation of the disease, to attacks of white swellings of the limbs, and disease of the hip-joint, &c. Scrofulous ulcers heal faster under their influence, and they apparently affect very favorably persons affected with tubercular disease of the organs and limbs.

In what manner do they produce such effects, is a question which is frequently asked, but in the present state of our knowledge is very difficult to answer in a satisfactory manner. We may however, be assisted in forming an opinion on the subject, by the statement of certain facts connected with it, among which are the following:

The rings are magnetised with two poles, which are connected by a magnetic axis, and have a magnetic equator at right angles with the axis, both of which pass through the finger at right angles—they consequently pass through the blood vessels and nerves; and besides the magnetism in the surface of the ring, is connected with the numerous nerves in the surface of the skin. The nerves are good conductors of the magnetic forces, or as the editor of the Lancet will have it, the galvanic influence, and connect the forces in the ring or rings of one hand, with those of the rings of the other. Now the poles, and the forces in the rings, are negative and positive, and negative and positive forces attract each other; and as the tubercles in the neck are necessarily formed and sustained under the influence of the repulsive force which expands, there is a well grounded suspicion that the forces in the rings, attract the repulsive forces in the tubercles, and thereby enable their attractive forces to contract, and reduce them to their natural glandular state.

May not the use of these magnetised rings banish hereditary tubercular disease or scrofula from the face of the earth? The number of cases of this disease is increasing rapidly in Europe and in this country. They

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have increased fifty per cent. in the last hundred years from the abuse of mercury alone, by physicians, and by the quacks, disguised in their panaceas and syrups of sarsaparilla, yet we should never despair in our efforts to effect an object so important, as that of reducing the very germs of hereditary disease in infancy and adult age.

The physicians of Europe are aroused from their slumber on this subject which is now discussed in some of the medical journals in a very elaborate manner.

Besides the passage of laws to prevent the increase of hereditary disease, Dr. Prater, of London, suggests the following,

Plans for Preventing the Transmission of Hereditary Diseases from Parent to Child.

1. Let those on whose side the taint exists, adopt for some years, (or at all events, for a year) previous to marriage a diet and plan of life, which has been found by general experience most conducive to the palliation of the disease under which they are laboring.

2. As a part of the same system, let them, if their circumstances permit, even remove to a climate where the affection which they wish to subdue is rare, or unknown; and if they cannot continue there during life, let them, at all events, remain there for a period of six or eight years.

3. After marriage, if the hereditary taint be on the male side, the mother may suckle her children herself, living, as we are now supposing, with them, in a climate very unfavorable to the growth of the disease; or, at all events, bring them up by a system of diet and regimen (aided by medicine if proper) calculated to subdue it.

4. If the disease be on the mother's side, she is, of course, for some years previous to marriage, to live in a manner, the best calculated to eradicate it; and if, indeed, this be impracticable, she ought particularly to do so during the whole time of pregnancy. In case of issue, the child as soon as possible is to be separated from her, as *far as nourishment, &c., is concerned*, and to be brought up either by the hand or a wet nurse (of which the former is preferable), that it may not derive a further disposition to disease from her milk; for this, although not possessing a direct power of communicating the disease, still, as a nutritive fluid, has, in all probability, that defect in composition or structure, (for milk is *globular* common to the solids, on which hereditary diseases seem mainly to depend.—Since, moreover, the other secretions of the mother may partake of the same diseased disposition as the milk, it should be a general rule that the child, although, of course, it may be allowed to remain in her house or apartment, should not be kept for any long period in very intimate contact with her.—*London Lancet.*

We can here hardly resist the temptation to show the great superiority of the influence of the magnetised rings, over the influences suggested by Dr. Prater, in preventing the transmission of hereditary disease, but must defer it until we have demonstrated, as we propose to do in the next number, the magnetic organization of the human system.

ARTICLE V.

LUNAR INFLUENCE.

Being a Fourth Contribution to Proleptics.*

By T. Laycock, M. D.
Physician to the Dispensary, York.

The opinions hitherto held by scientific men on the validity of the doctrine of lunar influence have been remarkably discordant. The skeptical have always been unphilosophical in their skepticism, and the believers up to the time of Mead were credulous in their belief; both agreed, however, in admitting or rejecting the doctrine without much examination. As it has had, and may have, an important bearing on proleptical science, I propose to review the subject in a spirit of impartiality.

The phases of the moon have measured time from a very early period. Mr. Cullimore traces evidence of a lunar division of time on the bricks of Nineveh and Babylon, and Sir G. Wilkinson is of opinion that the circumstance of the god Lunus being the dispenser of time, and represented as noting off years upon the palm-branch, leads to the idea that in former years the Egyptians calculated by lunar instead of solar years. The hieroglyphic of a month, which is a lunar crescent, shows also, that their months were originally lunar. The derivation of the word *month* in our language, and of *monat* and *Men* in the German and Greek, sufficiently proves that the moon was likewise the measurer of the months at a very early period in the history of European nations.

This connection of the moon with the measure of time seems to have brought that planet into relation with the religious rites of ancient nations, as the Egyptians and Jews; and also to have given origin (in part) to the *mythological* idea so extensively prevalent of a lunar influence on marriage and child-bearing. Even the barbarous Greenlanders, as Egede informs us, believe in this superstitious notion. They imagine that the moon visits

* See Lancet, Vol. I., 1842-3.

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their wives now and then; that staring long at the full moon will make a maid pregnant, &c. Among the ancient nations the general idea was, that the lunar influence varied according to the age of the moon. Bombastes, the Egyptian Diana, was not equally favorable to puturient females and their offspring in her different phases. Among the Jews the full moon was believed to be lucky, and the two other disastrous. "The full moon," says the Rabbi Abravanel, "is propitious to newborn children, but if the child be born in the increase or wane, the horns of that planet cause death; or, if it survive, it is generally guilty of some enormous crime."* The Greeks and Romans entertained a similar idea respecting the lunar phases. The general opinion seems to have been that the moon was propitious in proportion as its luminous face was on the increase.† The ancient Greeks considered the day of the full moon to be the best day for marriage. Euripdes makes Agamemnon answer, when asked on what day he intends to be married,

"When the blessed season of full moon is come.—*Iphig.*, act v., 717.

Hesiod asserted that the fourth day of the moon was propitious, but the eighteenth was bad, especially to the female. The Lacedæmonians thought it unlucky to march to war before the full of the moon, or to make commanders at any other time than the new moon.‡ But illustrations of this kind might be multiplied to a great extent. Those who are curious in the matter will do well to refer to Dr. Prichard's work already quoted, to "The Doctor," vol. iii., p. 186, to Dr. Milligan's "Curiosities of Medical Experience," vol. i., p. 113, and (if they can get it) to "Astrologia Restaurata, by William Ramsey, Gent., Student in Astrology, Physick," &c., folio, Lond., 1653. This Ramsey was probably the son of Davy Ramsay, celebrated by Scott, in the "Fortunes of Nigel," and who says of the nativity of the Duke of Buckingham,—

"Full moon and high sea,
Great man shalt thou be;
Red dawning, stormy sky,
Bloody death shalt thou die."—Chap. vi.

The influence of the moon was acknowledged in magic and alchemy, as well as in mythology and astrology. Trallian directs a magical ring for the colic to be prepared on the seventeenth or twenty-first day of the moon.§ In Ben Jonson's "Alchemist," a play which, from the known accuracy of its author, may be considered as representing the swindlers in that line who were his contemporaries, TRIBULATION says,—

"But how long time,
Sir, must the saints expect?
"SUBTLE.—Let me see,
How's the moon now? Eight, nine, ten days hence,
He will be silver potate; then three days
Before he citronise,—some fifteen days."
Act iii., scene 1.

Medical science could not escape being involved in these notions. Indeed, the idea of a physiological and pathological influence is directly connected with the mythological; but this idea was conjoined with the doctrine of septenaries, and necessarily so, because the observed vital period of seven days was conterminous with the lunar period of seven days, or one week. In the second century we find Galen discussing this connection between the moon's influence and critical days, *in extenso*, and with great ingenuity, and his doctrines revived, but not improved, by Actuarius in the twelfth. That these doctrines influenced medical language and practice to a great extent might be proved by various historical facts. For example, in Matth. xviii., verse 13, of a person described as falling oft into the fire and oft into the water, it is said that he (*seleniazetai*) is affected by the moon. Trallian, using the same word, terms *epileptics*, *seleniakoi*.* Apuleius, a Latin author, also terms epileptics *lunatici*. In Mr. Wright's "Biographia Literaria" it is stated, that one day John of Beverley entered the nunnery of Wetadun (supposed to be Wetton, in Yorkshire), where the abbess called him to visit a sister in whom the operation of bleeding had been followed by dangerous symptoms. When he was informed that she had been bled on the fourth day of the moon, he blamed the abbess severely for her ignorance; "for," said he, "I remember that Archbishop Theodore, of blessed memory, said, that bleeding was very dangerous at the time when both the light of the moon and the flood of the ocean were on the increase." This notion influenced medical practice to the time of Van Swieten.

Mead was the first of modern writers who considered the doctrine of lunar influence in a truly philosophical spirit. His work on the subject is still worthy of perusal.† He anticipated the doctrine of atmospheric tides. He declared that the moon's influence would be found to be greatest at apogee and perigee.—He showed, from various calculations, that the atmospheric pressure on the body might vary in consequence of the moon's influence on the atmosphere, to the extent of three thousand and sixty-two pounds, forcibly adding, "Fieri

* Basnages, Histoire des Juifs, IV. chap. xi.
† Prichard, Analysis of the Egyptian Mythology, 8vo., Lond., 1819, p. 72.
‡ Archæol. Atticæ, by Z. Bogan, 5th ed., 4to., Oxford 1658, p. 327.
§ Lib. x., cap. i.

* Lib. i. cap. xv.
† "De Imperio Solis ac Lunæ in Corpora Humana, et Morbis inde Oriundis." Ed. Altera, 8vo., Lond., 1748.

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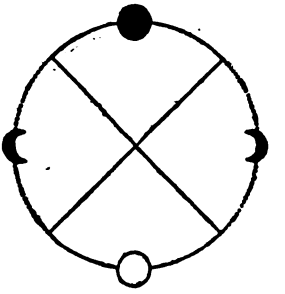
tamen nequit quin magnum sæpe momentum habeat tam insignis variatio."—P. 28. In short, Mead brought the subject before the profession as completely as the state of science at the time would permit. The last century has been more prolific in correct and extended observations on the subject than the preceeding ten. These I shall attempt to collate and arrange.

Influence of the Moon on Fevers and on the Spread and Duration of Epidemics.

Testa quotes Gillespie, or Symmons, as having communicated to the "London Medical Journal," for 1785, cases in which ulcers showed an evident connection with the moon's changes, and also refers to remarks to the effect that the knowledge of lunar influence may be used proleptically in the treatment of intermittents. Balfour republished his tract, at about the same time, at Edinburgh, by the special recommendation of Cullen. It is worthy of remark that Balfour also refers to the proleptical use of the knowledge of lunar influence. His views are as follows:—1. That in Bengal, fevers of every denomination are, in a remarkable manner, connected with and affected by the revolutions of the moon. 3. That in Bengal, a constant and particular attention to the revolution of the moon is of the greatest importance in the cure and prevention of fevers. 3. That the influence of the moon in fevers prevails in a similar manner in every inhabited part of the globe. 4. That the whole doctrine of the crisis of fevers may be readily explained from the premises established respecting the influence of the moon in these disorders at the full and change.* The fever which came under Balfour's observation in Bengal was a bilious intermittent, appearing most commonly as a tertian or quotidian. The moon's influence was exhibited at full and change by the greater number of attacks and relapses which took place in the three days preceeding and the three days following each of these periods. The first and second propositions are alone substantiated by his observations. In considering his fourth proposition he was quite unconscious of the general law I have before demonstrated. Ambrose Pare observed that people were more liable to be attacked by the plague at the full moon. Diemerbroeck (as quoted by Mead) also relates that in the plague of 1636, two or three days before and after the new and full moon, the disease was more violent, and that more persons were seized at those times than at any other, and in a more fatal manner. Ramazzini asserts that the influence of the new and full moon, but particularly of the former, was matter of general observations during the prevalence of an epidemic fever at Modena. Balfour quoted Dr. Lind, as entertaining views similar to his own, and he has since been supported by several physicians and surgeons of the Indian armies. Dr. Scot asserted that the influence of the moon on the human body in India was well known to every medical practitioner. It was universally acknowledged by the doctors of all colors, of all castes, and of all countries. Dr. Farquhar corroborated these assertions. Mr. Pearson, an Indian surgeon, declares "that a careful observation of disease in that climate will corroborate the inferences of Dr. Balfour that the attacks and fatal terminations of febrile disease and of dysentery, retention in the intestinal canal, aggravations of spasmodic and nervous affections, take place most frequently during the lunar periods, *i. e.*, in fifty hours before and after the new and full moon."* Dr. Kennedy, in his work on the Epidemic Cholera, also declares, "The constitution here [India], both of native and denizen is assuredly under lunar influence, or, what is the same thing, under the influence of the changes of weather, which as invariably accompany the changes of the planet as the ocean." (chap. vi.) No recent writer has entered so fully into this part of the subject as Mr. Orton.† Individual cases which came under his own observations are related in support of the doctrine, and establish it apparently beyond controversy. One gentleman, for example, had a paroxysm of intermittent fever every lunar month, at the new moon, for two years and eight months. For two successive years he had one paroxysm only in the month, and that was *invariably* at the new moon (p. 204, also 394). Mr. Orton constructs the following diagram in support of Balfour's views:—



The black lines are the unhealthy periods; the dotted lines the more favourable periods. Each period extends for three days and three-

* A Treatise on the Influence of the Moon in Fevers. By Francis Balfour, M.D., 8vo. Edinburgh, 1786.

* On the Diseases of Warm Climates. London Medical and Physical Journal, vol. xi., p. 204.

† On the Epidemic Cholera of India, 2nd ed., 1831.

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quarters before and after the full and new moon, or the quarters. Mr. Orton then enters into a number of details as to the day of the moon on which the cholera appeared at various places in India, and presents the result of forty-six instances in the following table :—

	Days before and after full or change.						
Appearances of the cholera.	1	2	3	4	5	6	7 and 7 1-2 (the quarter.) No instance.
	16	15	5	5	2	3	

The first column contains the instances in which the cholera appeared on the day of the *syzigee*, as well as that before or after. The attacks which commenced on the plenilunar, or light half, of the moon, were twenty-eight; on the novi-lunar, or dark half, eight. Mr. Orton consequently infers, "that the moon's syzigees have a very marked influence in producing the disease, and the quarters in removing it." The progress of the cholera in York, Glasgow, and Manchester, did not exactly corroborate Mr. Orton's views, as the following tables show :—

Progress of cholera in *York* from June 2d to August 13th, 1832,—

	New Cases per diem.	Deaths per diem.
At quadratures, including the day preceding and following.	5.40	1.93
On other days - -	5.63	1.72
On three days at new and full moon, - -	5.46	2.00
On three days at quarters,	5.33	1.96

In *Glasgow*, from Feb. 13th to May 24th, 1832,—

	New Cases per diem.	Deaths per diem.
On three days at quadratures. - - -	9.52	5.69
On other days, - - -	11.42	5.80
On three days at new and full moons, - -	8.09	4.30
At quarters, - - -	11.90	6.76

In *Manchester*, from 1st to 23d August,—

On three days at quadratures 17.77 new cases per diem.
On other days 20.71 new cases per diem.

The difference in the results between these tables and Mr. Orton's may, indeed, be attributable to the difference of climate, for we have seen how more regularly the atmospheric tides recur within the tropics than the temperate zones. Besides, we can scarcely set off *negative* results against the numerous *positive* observations detailed by various individuals, and all leading to the same result. And, in fact, these observers are borne out by what is noticed in other tropical countries. "Him fever," says the Negro in the West Indies, "shall go when the water come low. Him always come hot when the tide high."* "Major Moore says that near the tropics, especially in situations where the tide of the sea has a great rise and fall, scarcely any person, and certainly no one affected with feverish or nervous symptoms, is exempted from extraordinary sensations at the period of the spring tides."* The arriero, or muleteer of Peru takes care not to unsaddle his mules in the *creciente* or increase of the moon, until they have cooled, otherwise they would be disabled by abscesses, which would rapidly form on the shoulders or loins.†

Lunar Influence in Affections of the Nervous System.

It is yet a popular opinion that epilepsy, insanity and asthma, recur at intervals regulated by the moon. Mead mentions a case of convulsions in a young female, the paroxysms of which corresponded in their cessation with the flow of the tide, and in their accession with the ebb. Brookes, a popular writer in his day, recommends the remedies for epilepsy to be given a day or two before the new and full moon, as the disease returns at the periods of the moon, especially the new and full. He mentions another convulsive disease in which the accessions of the fits keep exact pace with the phases of the moon.‡ A very minutely detailed case of periodic asthma was communicated to the royal academy at Madrid, by Dr. Franzieri, physician to the court.§ The history extends over a period of twenty one years; but it is enough to state here, that for four years the days of intermission counted from the very day of the new moon, to that preceding the eve of the full moon, and from the day of the full moon to the day before the eve of the new one. In a case of hysteralgia, detailed by Dr. Rutter, he says, "the pain was also greatly increased at the new and full moon. She first directed my attention to this circumstance, and I observed it for many years afterwards to recur with a degree of regularity which leaves no room to doubt the fact, to whatever cause it may be ascribed."‖ Dr. Ebers, of Breslau, has lately published an interesting example of somnambulism in a boy, aged eleven years, and which he watched himself closely. The paroxysms came on regularly every full moon.¶

* The Doctor, vol. iii. p. 179.

* The Doctor, vol. iii. p. 179.
† Peru as it is; by Dr. Smith.
‡ Gen. Pract. of Physic, vol. i. p. 279, 6th ed.
§ See Lond. Med. and Phy. Journal, vol. iii., p. 401.
‖ Edin. Medical and Surgical Journal, vol. iv., p. 170.
¶ Casper's Wochenschrift, numbers, 46, 47, (1838.)

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Influence of the Moon on Insanity.

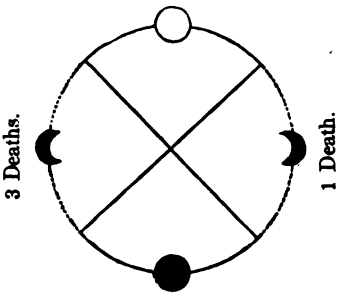
The evidence on this point is conflicting. Dr. Arnold says that he could never clearly and certainly perceive any such lunar influence.* In the annual report of the State Lunatic Asylum, Worcester, Massachusetts, a table of fifty cases of periodical excitement is given, and their relations to the moon. There occurred on the average,—

At the new moon,	20
middle of ditto,	13
At the first quarter,	15
middle of ditto,	11
At full moon,	12
middle of ditto,	11
At last quarter,	13
middle of ditto,	18

The periods however, in one half were not exoteric, but esoteric, in their origin; for in twenty-five the paroxysms occurred at very nearly regular intervals of four, six, eight, and twelve weeks. In one the intervals were tertian. These cases should have been separated from the others. M. Daguin, physician to the Lunatic Hospital at Chambery (Savoy,) made numerous observations and was decidedly of opinion that the moon exercises a constant and real influence on insane people. Dr. Michael Allen strenuously advocates the doctrine.† He divides the phases of the moon into four periods of increased and diminished excitement; the former commence two days before new and full moon, and continue for four days after; the latter commence three days before the quarters and continue for four days after. In fact, the division of the lunation corresponds almost exactly with Mr. Orton's; his unfavorable periods answering to Dr. Allen's periods of increased excitement, as the following diagram shows:

Diagram of Dr. Allen's Observations.

15 Deaths.



11 Deaths.

The latter author appeals to a table of deaths which occurred in his establishment, the result is as follows:—At full moon, 11 died; new moon, 15; first quarter, 1; last quarter, 3 died. But even this table is nullified by the experience of the Retreat.

Mr. Thurnam kindly furnished me with details.

Deaths at the Retreat for forty-four years, arranged on Dr. Allen's hypothesis:—At full moon, 33; new moon, 40; first quarter, 34; last quarter, 32.

The plus negatives the minus. I may add here that MM. Leuret and Metivie made observations on the frequency and irritability of the pulse of insane people at the moon's phases during August and September. The patients at the Salpetriere and Maison de Sante d'Ivry were examined:—*

	Last quarter.	New moon.	First quarter.	Full moon.
Frequency of the pulse at	85.67	81.62	80.55	79.80
Per cent. in whom it was quickened at	57.12	34.72	34.72	23.52

I have had asthmatic and epileptic patients who complained of lunar influence, but I could never satisfactorily ascertain that it was exerted. The paroxysms certainly occurred at intervals of a lunar month, and *about* the time of a lunation; but this might be simply a coincidence of the esoteric cycle with the lunar, and nothing more. A medical friend informs me of a case in which the patient is much more easily excited by alcoholic drinks at the full moon than at any other time. Chatterton, like Milton, imagined his intellect was more vigorous at the full moon.‡

Other Diseases and Functions under Lunar Influence.

The very ancient doctrine that the periodical change in the sex is under lunar influence has still its advocates. Dr. Flachs, a German critic, in a review of Dr. Davis' work on Midwifery, controverts an opinion of that writer to the contrary. He says that the fact is well ascertained, and that the full moon is most influential. Mead quotes cases to prove that leucorrhœal discharges are under lunar influence. "It is a fact worthy of remark," says Mr. Lambert,† "that the new and full moon are the periods at which the Kookies generally

* Observations on Lunacy, &c., vol. i., p. 324.
† Cases of Insanity, 8vo., 1831.
‡ Works edited by Southey, 1803, vol. i., p. 34.

* London Medical and Surgical Journal, vol. iv., p. 688.
† Account of the Bos Frontalis, or Gyall. Linn. Trans. vol. viii., p. 305.

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commence their operation of catching the wild gyalls, from having observed that at these changes the two sexes are most inclined to associate. The same observation has often been made to me by our elephant catchers." In the earlier volumes of the "Philosophical Transactions" are histories of *hæmorrhages* which broke out at lunar periods. Mead relates a curious instance of this kind. Dr. Pitcairne was seized at a country seat near Edinburgh, with a bleeding from the nose and faintness, at the exact hour of the new moon, namely, nine o'clock, a. m. On returning to Edinburgh, he was informed that Mr. Cockburn, professor of philosophy, had died, suddenly, at the same hour, from hæmorrhage from the lungs, and also that five or six of his patients had been seized with hæmorrhages. The barometer was lower at that hour than either he or his friend Dr. Gregory had ever observed it. *The births and deaths* of mankind generally have been supposed to be under lunar influence. It was formerly supposed in the Netherlands that fat people died at the flood, and thin spare people at the ebb. Among the wonders of the isle and city of Cadiz, one is, that the sick never die there while the tide is rising, but always during the ebb. Dr. Mosely made out a list of persons who had died aged from one hundred and thirteen to one hundred and sixty-nine years, to prove that very old people die at the new or full moon. He also infers from the times of death of forty illustrious persons, that the same rule holds good with mankind in general. Three or four years ago, Mr. Proctor (now resident medical officer at the York County Hospital) made me out a list of the births, with their dates, which had occurred in the practice of Mr. James Allen of this city, during the five years from 1831 to 1835, inclusive. On arranging these according to the changes of the moon, the result was as follows:—Number of births at new moon, 151; first quarter, 129; full moon, 131; last quarter, 154. The day before and the day after the day of change were included in the estimate. The whole number of births were 1403; of lunations, 247; of days included in the lunations, 741, or 247×3.

It is remarkable that the ancient doctrine of lunar influence on vegetation is still practically applied in some tropical countries. "Herbs set in the wane of the moon," says William Ramsay, quoting this doctrine, "do not thrive well; vines, to check their growth, should be pruned in the wane; timber cut to keep well," &c. Dr. Robertson asserts that in the West Indies all sorts of vegetables are fuller of sap at the new and full moon; the colonists, therefore, abstain from cutting wood at these periods, but sugar-canes are cut and castor-oil nuts are gathered at these seasons, the latter being supposed to yield one fifth more oil at those times than at any other. This influence of the moon is still acknowledged, at least in Cuba, as Mr. Backhouse informs us, in the account of his travels lately published. The moon also guides the agricultural operations in Peru. "The maize crops," says Dr. Smith, in his work before quoted, "the farmers always harvest in the '*menguante*,' or decrease of the moon; for it is a fact, known to every husbandman, that if they collect the crop in the '*creciente*,' or increase of the moon, it will not keep free of moths for three months, even though allowed the advantage of being left in the husk." Around Lima the farmer takes care not to sow in the *creciente*, or the wood-cutter to cut timber, especially willow and elder, or it soon decays, as Dr. Smith found out by his own experience.

It has been supposed that the moon exercises an attractive power on the fluids of living structures, like that exhibited on the great masses of water on the globe. I think this hypothesis need not be discussed or noticed further. It has also been supposed that the *light* of the moon has a direct influence on vital function. The sun's rays may certainly be so altered by impinging on the moon, that when reflected from the latter they may have a chemical and physiological action very different from those proceeding directly from the former. Testa discusses the question at considerable length* Supposing it to be proved that the moon's light have an injurious influence I think it scarcely belongs to my subject. Shutters or an awning will at any time effectually neutralize it, so far as man is concerned. Be this as it may, there are no observations extant worthy notice.

In accordance with my previous plan I shall next proceed to compare physiological and pathological observations with meteorological phenomena and consider whether there be any changes in the density, electric tension, or hygrometric condition of the air at the lunar phases, whether there be changes in the direction of its currents, and whether these changes have any connection with the observed changes in vital function, and how it takes place. This will form the subject of another communication.

* Bermerkungen über die periodischen Veränderungen und Erscheinungen im kranken und gesundem Zustande des menschlichen Körpers, Leipzig, 1790, p. 337, seq. This is a translation from the Latin of Testa. Testa's Book, I may observe, contains more rational facts and arguments on the subject of vital periodicity than any work of the time that I am acquainted with. He took it up where Mead left it.

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The Law of Seven.

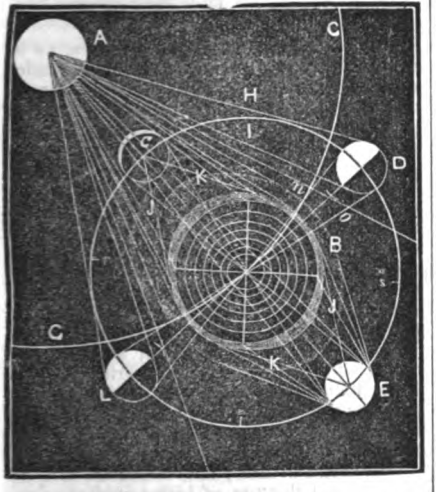
To the Editor.—Sir: In your widely-read Journal the periodic law of seven, in health and disease has been illustrated, both physiologically and pathologically by Dr. Laycock; by Dr. Robert Williams, on Consumption; and by "Chirurgus" on Menstruation and Delivery (LANCET, 11th March, 1843,) and I some time ago, observed what may be considered to be another illustration of it, in a paper (by Dr. Stratton) in the "Edinburgh Medical and Surgical Journal" for, Jan., 1843, page 112, where the result of several series of observations is to the effect that in health the human pulse is more frequent in the morning than in the evening for six days out of seven, and that on the seventh day it is slower. Verily it seems as if the days of mathematical medicine were about to return. I am, sir, your constant reader and faithful servant,

PITCAIRN SECUNDUS.

Kingston, Upper Canada, May 21, 1843,

Hemorrhage from the Lungs.

NEARLY all the cases of hemorrhage from the lungs occur within four days of the new moon or of the full moon, and the natural and regular *periods* of hemorrhage from the uterus occur within the same time. These facts



were well known to the ancients, and a knowledge of them is a matter of great importance to both sexes who are predisposed to hermorrhage from the lungs, to enable them to avoid any exciting causes of hemorrhage at these periods, and particularly to females, for obvious reasons.

A solution of this lunar influence is found in the more rarified state of the atmosphere, from its expansion at K J and J K; at the new moon, c, and full moon, E, from the combined action of the sun and moon upon it, at these periods, in the direction seen in the figure, and in consequence of which the pressure of the atmosphere on every square inch of the body, and of the cavities exposed to its influence, is greatly reduced.

The diminution of pressure commences three days and a half before the new and full moon, and gradually increases until it arrives at its maximum, at the time of the new and full moon; when it begins to decrease, and goes on decreasing to the end of three days and a half, when it is minimum, or 0, and so continues through the intermediate periods.*

When the moon is in its syzygees, c E, its forces are extended to the atmosphere of the earth, B, by the action of the forces from the sun, A; but when the moon is in its quadratures, D L, the extension of its forces beyond the) parenthesis (is interrupted by the forces from the sun, and the density of the atmosphere is then at its maximum.

The periods of *excitement* and *repose* in chronic diseases are generally very regular, the first occurring in the periods of the new and full moon, and the latter in the intermediate periods.

When hermorrhage commences from the lungs, the arms above the elbows and the legs above the knees, should be bound with handkerchiefs, moderately tight, until the hemorrhage ceases, for the purpose of checking temporarily the accumulation of blood in the heart and lungs. The patient should at the same time drink freely of alum water, or salt water. The violence of the hemorrhage soon ceases under this treatment; the use of these drinks should, however, be continued until the bloody expectoration has ceased, when these safe and efficient remedies will finish their work by exciting the action of the intestines. Drawing blood from the arm in large quantities under such

* Consumptive persons of the vallies are frequently attacked with hemorrhage from the lungs in passing over the mountains in the intermediate periods.

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circumstances, as is commonly practised, is not only positively injurious in a great majority of cases, but it is often fatal; and such patients are never in greater danger than when they are in the hands of a physician whose knowledge is bounded by inflammations. When the quantity of blood raised, exceeds a wine glass, a blister should be applied between the shoulders, and rest and quietness, with a light diet, strictly observed, until the system has recovered from the exhaustion produced by the hemorrhage.

The acetate of lead (sugar of lead,) if at hand, may be also used in these cases, 3 or 4 grains, or a quantity that will lay on a sixpenny piece, made into 3 or 4 pills, with moist bread, may be taken at once, or at invals that may be determined by the urgency of the symptoms.

The few cases of hemorrhage from the lungs, which occur when the moon is in its quadratures, or when it is moving from the octant; r, to that at m, and from the octant at s, to that at I, are those that occur in chronic bronchitis, or chronic disease of the mucous membrane that lines the inside of the bronchial or air tubes, which rarely amounts to more than a wine glass, and is in general a matter of little consequence, requiring only the exercise of common prudence at those periods to prevent its recurrence.

Hemorrhage from the serous substance of the lungs, or from its serous membranes, occur in the rarified state of the atmosphere, at the periods when the moon is in syzygees or apogee and perigree; while hemorrhage from the mucous substance, or the mucous membranes of the lungs, occur in the dense state of the atmosphere, at the periods when the moon is in its quadratures, as we have ascertained in the most satisfactory manner, by a long series of observations.

Diagnosis by the Pulse. Hemorrhage from the Lungs.

TO THE EDITOR OF THE LANCET.

SIR—The number of the pulse in one minute is generally a multiple of twelve; I believe that this fact has not hitherto been noticed; yet will it be found not less useful and important than curious. In extensive practice, when advice gratis necessitates rapid conclusions, it is easy to determine, in a few seconds, to which number the pulse may be referred, and in many cases the nature and intensity of a disease may be suspected from the number of the pulse alone. In accordance with this law of numbers we meet with pulses of 60, 72, 84, 96, 108, 120, 144, 168. I have recently prescribed for a lady who has twice suffered from excessive nervous irritability; her pulse I clearly ascertained to be 240, twenty times twelve, nor was there any difficulty, as some have asserted there must be, in accurately counting it.

A pulse of 144 and 168 is often met with in pneumonia in children; it is remarkable that a pulse characteristic of a special disease will be the same in number in individuals of widely different ages. The pulse in rising and falling from accidental and temporary excitement, rises and falls through a series of duodecimal degrees; when within the first few minutes of an interview the pulse of a patient rapidly subsides from 120 to 108, 96, 84, a knowledge is at once afforded of the highly excitable and therefore susceptible constitution of the patient: beware of treating such subjects during periods of excitement, as for acute or serious disease, by violent measures; many such individuals are destroyed by continual cupping and bleeding, and mercurialising, for alleged determination of blood to the head; inflammation of the spinal marrow; inflammation of the lungs; pleurisy; disease of the heart, &c., when a recovery is often easily effected by merely allaying nervous irritability.

The pulse in many chronic diseases, as in consumption, is generally 108, and, under moderate excitement, 120, but not unfrequently only 96; a pulse not slower than 96 in an adult should always excite suspicion.—It sometimes happens that in bulky, leucophlegmatic, or hydroæmic, phthisical subjects, having, too, a finely-developed chset, that the pulse does not rise above 72 or 84; the practitioner, misled by first appearances, is apt to cheer the patient with an assurance of certain recovery, but from the continuance of the cough, after one or two visits, is induced, almost carelessly, to auscultate the chest, and is dismayed at discovering a considerable excavation in the lungs. In such subjects, not very frequently met with, recoveries do sometimes indubitably occur; the treatment consisting of an almost entire restriction to the most stimulating animal diet; of salt largely administered at every meal; of quinine and preparations of iron; and of lotions of spirit of wine and tincture of iodine applied to the surface of the chest. To such subjects sea-air is especially beneficial. I have known the audible evidences of consumption to disappear and reappear in individuals visiting the East Indies, the disease at last proving fatal, as in one instance very lately, apparently in consequence of the individual having prolonged his stay in England longer than usual: in such subjects I have known a well-marked excava-

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tion continue for many years, apparently stationary. The rapid progress of consumption in more irritable subjects, in whom the pulse is 100 or 120, is in many instances, I have reason to believe, as much attributable to the highly absurd and reprehensible practice of bleeding to arrest hæmoptysis, as to the unresisted progress of tubercular disease; chronic disease invades the system when the vital powers are depressed, and always acquires growth and rapidity from exhaustion of the vital and opposing force: bleeding for hæmoptysis in subjects suffering from tuberculous cachexia, may be denominated fashionable homicide. I am at present acquainted with many delicate individuals who have been expectorating blood, at intervals, for several years; I am convinced that every one of them would be destroyed by even a moderately large bleeding; why should such panic be excited by ordinary hæmoptysis as to confound all common sense and sober judgment? The hæmoptysis may doubtless be arrested by bleeding, but though the triumph of arresting it be great, the patient is merely placed upon his legs to stagger to the grave. In nineteen cases out of twenty the hemorrhage will cease by judicious treatment, without the adoption of the desperate expedient of bleeding, which, though it continue for days or weeks, a natural hemorrhage is far more easily borne than detraction of blood by the lancet; calmly and judiciously advise and administer, and seldom will danger or difficulty result from the mere hæmoptysis, though the patient may ultimately die from the natural progress of the disease. With every sentiment of respect, I am, sir, &c. ANTHROPOS.

April 6, 1843—LANCET.

SPINAL MENINGITIS.

A new name for tubercular disease of the organs and muscles. The old names, such as spinal disease, spinal irritation, spinal neuralgia, and nervous affection of the spine, are becoming rather stale and unpopular, and hence the policy of giving a new name to these maladies of the imagination, which were never favored with a real existence.

Treatment of Spinal Meningitis.

TO THE EDITOR OF THE LANCET.

Sir: In looking over the Lancet for May 27th last, my attention has been arrested by the case of spinal meningitis related by Mr. Tyte (p. 267.) The length of time required to accomplish the cure, by the treatment employed, notwithstanding its severity, will furnish a speedy excuse for the suggestion of a more speedy, certain, and, at the same time, less painful method. Had Mr. Tyte applied eight or twelve leeches over the tender part of the back, repeated them on the next day, if much tenderness on pressure remained, and afterwards used friction with croton oil until a copious crop of pustules was produced, instead of six weeks elapsing before the patient became *decidedly better*, the same happy result would probably have occurred within as many days. The functional derangement of the liver, stomach, or kidneys, which is generally present, would, of course, require to be treated at the same time (by means of decoction of aloes, carbonate of potass, &c., as the particular case might require).

I have treated about a dozen cases of this disease during the present year, and in only one have required to use calomel and opium. The patient was a man of very weak constitution; for a week the disease was supposed to be enteritis, all the symptoms of which were present. He was bled, and calomel and opium were administered, but the disease not yielding, I had a consultation with another practitioner, when great tenderness was discovered over one of the lumbar vertebræ.—The patient was cupped over this part, counter-irritation was afterwards applied, the mercurial action maintained for a few days longer, and he was discharged, cured, in five weeks from the commencement of the attack. I usually find about ten days sufficient to accomplish the cure, but occasionally more is required, and sometimes recovery proceeds more rapidly.

I believe that a great proportion of these cases is not recognised by the medical attendants; and also that many cases exist, supposed to be obstinate dyspepsia, which are owing to that subacute form of the disease which is termed spinal irritation. A case of this sort occurred to me lately. The patient presented the usual symptoms of functional derangement of the liver and stomach, and during the last five months, *these symptoms* had been treated by four medical men. On placing himself under my care it was only by *very careful* examination that I discovered tenderness over one part of the lumbar spine. I cupped him, used croton-oil friction, ordered a powder composed of calomel, one grain, aloes, one grain, and calumba, eight grains, to be taken every night and morning, and within three weeks the patient was cured.

I am, sir, yours truly,

June 26, 1843. C.

☞ The writer has authenticated his statements privately, by forwarding his real name and address to the editor.

These cases including that of Mr. Tyte referred to, were all cases of tubercular disease of the organs, and not that of meningitis, nor of functional disease of the organs; for there is never magnetic symptoms of tubercular disease, as in these cases, in mere functional derangement of the stomach, liver, or any other organ, and Dr. Tyte had the candor to acknowledge that the symptoms of meningitis in his case was not well marked, although it was much more so than any of

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those described by Dr. C. But the sequel of these cases like thousands of the same kind, is not yet told, and I hope the gentlemen will pardon me for saying that neither of their cases are cured—that they have only passed through a temporary period of excitement, to a temporary period of repose. We have seen a great many thousand such cures of the same disease, and in the same or a very similar manner, during the last ten years; but these cures were very temporary; for these patients would not "stay cured," and in fact, nothing was effected by the common remedies in any of these cases, but a temporary palliation of the urgent symptoms, while the patients were passing through the periods of excitement to that of repose.

Tubercular Consumption.

Dr. Hastings, of London, has recently commenced treating this disease with naptha, and apparently with success, so far; and other physicians in that metropolis are now engaged in testing its effects in this disease.

There are a number of different articles in commerce, which are sold under the name of naptha. The naptha used by Dr. Hastings is obtained by the destructive distillation of an ascetate, as the ascetate of lead, or of lime. This product has been called by chemists, pyroacetic spirit, mesilic alcohol, or ascetone, and is missible in all proportions with water, without producing milkiness. The dose is from 10 to 20 drops, three times a day. We are now testing its effects in a great variety of cases in this city, both alone and in conjunction with the compound chloride of gold, an article which we have been long in the habit of using with uniform success, in the first stage of tubercular disease of the lungs.

Dr. Hasse, of Koningsberg, cauterises the parts affected in laryngeal phthisis with a strong solution of nitrate of silver, consisting of one part of the nitrate to four, and afterwards two parts of water.—LONDON LANCET.

Vomiting, a Cure for Phthisis.

It is stated that 176 patients under consumption, 47 in the incipient, and 129 in the advanced stage, admitted during a period of four years into the military hospital at Capua were ultimately discharged, perfectly cured, their treatment having consisted in the administration of a tablespoonful night and morning of the following mixture:—Tartarised antimony, three grains; syrup of cloves, an ounce; decoction of marsh mallows, six ounces; mix. The dose was to be repeated until vomiting ensued.—ANNALI UNIV. DI MEDICINE.

Statistics of Cancer.

The following are results of researches on the prevalence of this disease throughout France, which have been made with much care and accuracy on the part of M. Le Roy d'Etoilles:

Of 3781 cases occurring in the practice of 174 surgeons, 1227 happened in individuals above forty, and 1061 to others above sixty years of age. The cases of cancer of the uterus were about thirty per cent.; of the breast twenty-four per cent. Cancer of the mouth was in women only as one to one-and-a-half per cent., while in men (probably from the use of the tobacco-pipe) it was as much as twenty-six per cent. Cancers supposed to have been of hereditary transmission figured only as 1 in 278 [?]: while those induced by scrofula were as 1 in 10; and by syphilis as 1 in 5.

The most useful part of the inquiry is that that which is brought to bear upon the utility or otherwise of operating on cancers. Out of 1172 patients not operated on, 18 lived for more than thirty years after the first appearance of the disease; while out of 801 operated on by excision or caustic, the existence of only 4 was prolonged for a similar lapse of time; 14 patients operated on, and 34 not operated on, lived for a period of from twenty to thirty years; and 88 in the first category, and 228 in the second, lived from six to twenty years after the first appearance of the disease. The ordinary duration of life after this period among persons not operated on, is said to be five years for men and five and a half for women; while among those operated on, it is no more than five years and two months for men, and six years for women.

From these results the natural conclusion is that the ablation of cancer (leaving out of account the risks attending the operation itself) does little, even when successful, to prolong life and is therefore (in France, at least) of very questionable utility. Results like these, startling as they may seem, and however they may demand subsequent corroborations, are, at least indications of the light which statistical science is enabled to throw upon the actual and relative value of many of the aids in medicine and surgery of which we at present avail ourselves.—*London Lancet.*

Case of Enlargement, Scrofulous Abscess, and removal of the Testis.

BY GEO. LANGSTAFF, ESQ., SURGEON, LONDON LANCET.

This was a common case of tubercular disease of the testis on the right side, in which an ulcer was formed, and discharged

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its matter through an opening upon the surface, during the use of the common remedies, including iodine, when it was removed in the usual manner. I have noticed this case for the purpose of saying that I have cured cases of this disease of the testis with the magnetic remedies for it, where they were enormously enlarged and discharging scrofulous matter from one to seven abscesses.

Suppression of Pus.

The discharge from a child's ear, or a gleet in a man, is suddenly suppressed. Pain and danger ensue, and are ascribed to the suppression; but they ought to be attributed to the *increase of inflammation* to an extent which is inconsistent with the secretion of purulent matter. Leeching and fomentation are obvious. In wounds and ulcers the secretion must be re-established by wine, bark, and stimulating fomentation.—SIR CHARLES BELL.

Derangement of the Brain by a sudden Shock, and its Recovery by similar means.

(*Similia Similibus*)

By S. PATTERSON EVANS, M. D., Edin., Newmarket-on-Fergus.

A laboring man brought to me his son, nineteen years old, for my advice. Having attended him for a cut leg two months previously, I was much struck now with his altered appearance. When coming to me before, I thought him remarkably acute and intelligent; he now had become *idiotic* in countenance and manner. He did not know my name, his own or his father's; continually talked to himself indistinctly; sang; made grimaces; laughed with a foolish look; would leap about, and otherwise behave ridiculously. His answers were peculiarly short and snappish, nor could he keep steady a moment, but was altogether restless and irritable. At home he attempted to injure his sisters with a knife. Appetite good; sleeps pretty well, but often starts with a scream in his sleep, as if frightened. When asked a question he did not appear to comprehend its meaning until repeated. When questioned as to pain, he put his hand to his head, but did not reply; and from frequently applying his hand all over that region, it appeared to be the seat of some general pain or uneasiness. The head, generally, felt hot, and especially the forehead; the temporal and carotid arteries pulsated rather strongly; the pupils were contracted, and the sclerotic vessels more minutely injected than I had ever seen those vessels before; no vomiting, nor any lesion of the muscular system. Upon my asking his father whether he could account for this alarming state, he gave me the following singular history:—

Up to the 22nd of Nov., 1842, he was perfectly well and able to work. On that day he happened to kill a hen belonging to a woman, who complained of him to his mother, who told his father of what he had done. The boy, knowing that his father would punish him, did not come in to go to bed until he supposed his father was asleep. However, the old man, who was very apt to be guided by King Solomon, and not "spare the rod and spoil the child," stole to the bed when the boy lay asleep, and, catching him by the hair, gave him a few smart strokes of a small sally rod. He then left him, going out to his work. That day his mother remarked that the boy looked rather silly, and talked incoherently, and then daily got worse.

I therefore ordered the head to be shaved, cold applied, leeches to the occiput and neck, colycynth and calomel. He was ordered to be kept quiet, in a dark room, and on low diet. Owing, however, to his father's being constantly out at work, and he being the only person who could manage him, my directions were not followed up, with the exception of giving him the purgative, and throwing cold water over his head every morning. After some days I saw him again, but he appeared no better. The bowels were particularly obstinate. (Prescribed accordingly.)

Five or six days after this I saw him again, and was surprised with the change in his manner, as well as his altered appearance. He now knew me; answered questions rationally; talked quietly; had lost the restless manner; and, in fine, he was quite another boy. His pulse soft; tongue pale and moist; head cool; eyes natural, intelligent, and uninjected; but, upon inquiry, I found that though he had taken all my last medicines regularly, he was not indebted to them for his recovery, for up to the day previous he was as bad, if not worse, than before; but his father gave me the following singular account of his recovery, which I consider inexplicable upon any other principles than those advanced by Hahnemann in his axiom, *similia similibus curantur:*

The day before that upon which I saw him last, he was on the road-side amusing himself; a carman was going by; the boy flung a stone at the man, who caught the boy, and *gave him a good beating with his whip.* The boy ran home crying told his mother what had happened, and from that day, as if a devil had been cast out of him, became quiet and rational, and he is now perfectly well, though not as steady, sharp, or intelligent, altogether, as he was before the accident.

How much we have yet to learn, how little we really know, of the nature and rational treatment, not only of the diseases of the cerebro-spinal system, but of diseases in general. Assuredly, the uncertain and most unsatisfactory art that we call medical science is no science at all, but a jumble of inconsistent opinions; of conclusions hastily drawn; of facts badly arranged; of observations made with carelessness; of comparisons instituted

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which are not analogical; of hypotheses which are foolish; and of theories which, if not useless, are dangerous. This is the reason why we have our homœopathists, and our hydropathists; our mesmerists and our celestialists!

I will offer no comments upon the foregoing case. My experience in diseases of the mind has been too limited, and my observations would perhaps only destroy the impression which the case is calculated to make. At the same time, I cannot conclude without directing the attention of parents, and those who have the charge of children, to the lamentable results which may follow the infliction of corporeal punishment upon young children, of tender age and delicate constitutions. It enfeebles their minds; it undermines their attention and memory; it breaks down the finest of their moral feelings. But especially is it followed by terrible results when unexpected or sudden. Indeed, at any time taking the nervous system by surprise, with violence, may be followed by consequences equally awful.—*Abridged from Dub. Jour.*, Jan. 4th.

This was a case of derangement of the magnetic organization of the brain, called functional derangement of the brain, we long since traced the magnetic organization of the brain by the direction of its fibres, and this organization is constantly confirmed by clairvoyants.

Making believe to Administer Arnica.*

TO THE EDITOR OF THE LANCET.

SIR:—It is just two years since I drew the attention of the medical profession, through the medium of your journal, to the invaluable benefits to be derived from the use of arnica montana in bruises, incisions, sprains, and other affections more particularly regarded as belonging to surgery. Since that time the numerous additional cases illustrative of the value of arnica, have increased so fast, that I have given up recording them particularly. My attention has, however, been arrested to a case so strikingly illustrative of these benefits, that I have thought it to be my duty to forward it to your Journal.

To the Royal Jennerian London Vaccine Institution, last Thursday, a mother brought her child to receive the certificate of protection. After receiving it she exclamed, "You sir, saved this child's life," and a fine little fellow he was. I had quite forgotton the circumstance. I asked the name, and on reaching home, examined my book of cases, and found the following:—Alfred Wyatt, June 20. aged three months and a fortnight; child apparently dying. A little girl that nursed the child had let him fall, and he, in falling, fell upon *his head*. The mother had obtained somewhere a powder, but the child became worse. He had been in a severe fever ever since the accident. His eyes were half closed, and the peculiar cast of countenance indicative of affection of head was present; in fact, I feared the child would die before he reached home. I told the mother to let me know the state of the child on the following day, my belief being that I should hear of his death. I ordered three globules* of aconite in two ounces of water, a fourth part immediately, and four hours after the first dose of aconite a dose of arnica, three globules, in two ounces of water, a fourth part as a dose, and to repeat the aconite and the arnica alternately, every four hours.

21 [i. e. the next day.] The mother came to me, and said, weeping with joy, "He is laughing to-day." Her gratitude was great; she said she thought that before she should reach home yesterday, he should have died. I ordered another aconite mixture and another arnica mixture, a dose of each once a day, and the result was *then* health, and on Thursday last the agreeable notice, "You, sir, saved this child's life."

Arnica is now used most extensively by allopathic practitioners, so much so that the following notice has been deemed necessary;—"The great and increasing demand for tincture of *arnica* has led many drug merchants to vend a root which is not that of the arnica montana."—BRITISH JOURNAL OF HOMŒOPATHY.

Yours Sincerely,

JOHN EPPS, M. D.

May 27, 1843.

We have frequently prescribed arnica and aconite, and find them very useful medicines. In regard to the minuteness of the homœopathic doses, as in this case, it is in general a matter of little consequence if they are well magnetised, according to the directions of Hahnemann and Jahr; when they will magnetise the water in which they are diluted, and impart to it the distinctive qualities of the medicine, with a power fully equal to the common doses prescribed by physicians of the old school, or allœopathists, for the amount of magnetism in the doses increases with each dilution an hundred fold, until the distinctive quality of the medicine is exhausted.

* Our worthy correspondent has entitled his letter "Arnica and its Uses," but an examination of his prescription in the note, induces us to prefix a more correct heading.—ED. L.

* The child did not use arnica externally, and the globules of aconite were impregnated with aconite tincture at the *octillionth* dilution, and the globules of arnica tincture at the *billionth* dilution.

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Determination to the Skin.

A correspondent (*Anthropos*) writes as follows:—The iodine of potassium possesses the remarkable property of causing determination of diseased action to the skin. In cases of what may be termed "suppressed measles" and "scarlatina," it will frequently induce a healthful reaction under the most desperate circumstances. *One* or *two* grains, according to the age of the patient, under twelve years, may be dissolved in a quantity of *sugared water*, and administered, *repeatedly*, as an ordinary drink, the whole quantity being given in *twenty-four hours*, for three or four days. In measles, a small plaster to the chest assists the peculiar action of the iodine. In scarlatina, the compound tincture of iodine, diluted with three or four parts of water, may be frequently applied by means of a camel hair brush, to the front and sides of the throat and neck. Milk is injurious during the first two or three days, in cases either of measles or scarlatina. I have not had an opportunity of giving iodine to individuals suffering from small pox, but think it might prove serviceable especially after the appearance of the eruption, as anticipatory of secondary fever. Let those readers of THE LANCET who doubt the sufficiency or efficacy of so small a quantity of the iodine test it by their practice. Those to whom experience has demonstrated the utter insufficiency of other measures in malignant cases cannot reasonably object.—LANCET.

Clinical Lectures on Cases of Diseases of the Nervous System, delivered at King's College Hospital.

BY R. B. TODD, M. D. F. R. S.

We have waded through these lectures and those of Dr. Marshall Hall on the same subject, with all the patience of Job, without being able to find any thing in them, of any value to the physician or his patients. When these distinguished physicians have practised the magnetic symptoms of tubercular disease among their patients through the different seasons of a year, and have compared them with the old astrological symptoms with which they are so familiar, they will begin to have some knowledge of the subject on which they have been delivering these lectures to the students of medicine.

Beobachtungen über den Nutzen und Gebrauch des Keilschen Magnet Electrischen Rotation-Apparatus in Krankheiten, &c. Von J. E. WETZLER, &c. &c. &c.

Observations on the Utility and Mode of applying the Magnetic, Electric, and Rotatory Apparatus of Keil.

We may give one or two cases to illustrate the efficacy of this agent.

The first we select is detailed at pp. 14, 15, and is as follows:—

"The Rev. M——, a little above 40 years of age, of a robust frame, had suffered for six years from pain in his head and face. He was in other respects well. The pains began at the forehead, and extended over the temples to the cheeks and upper-jaw, where they were so violent as to compel the patient to lie down in bed, and keep perfectly still. At one time, they were worst on the right, at another, on the left side; but generally worst on the left. His exposure to wet, wind, and cold, in the discharge of his duties, generally brought on an attack. I magnetised him twice, and he left his place of sojourn (Kessingen) perfectly free from pain. I inquired at the expiry of a year, whether he had remained free from pain, and received for answer, that for three months he enjoyed perfect immunity; but that after that, the pain returned. Eight days, indeed, was altogether too short a time to effect a radical cure. In his case, the second branch of the fifth pair of nerves was chiefly affected. Over this nerve he could not bear the weakest power of the apparatus, but I was obliged to transmit the current through my finger; and when I placed the point of the finger on the spot, he felt as severe a pain as during an attack. Whenever I removed the finger, the pain instantly subsided. Here we have an example of the homœopathic *simile simili*."

At page 20 we find this curious case:—

"Madam E——, from Eisenach, suffered three years from gout, and then from typhus fever, which confined her to bed six months. Her recovery was slow. The previous summer she had employed the Ems baths. Her right arm was lame from rheumatism. She gradually recovered her strength, and the use of her arm likewise. The two last phalanges of the fore and middle fingers, however, still remained stiff, and bent inwards; and when she tried to move them in laying hold of any thing, the attempt made her whole hand shake. I was able to magnetise her only seven times. But even in this time there was considerable improvement—the trembling of the hand, was almost gone, and the finger more flexible. On the following summer she returned to Kessingen, and shewed me with joy her finger, now straight and flexible—telling me, that after her return home, her finger gradually recovered its flexibility, and the shaking of the hand entirely disappeared. So prolonged an effect I had, indeed, not expected!"

At page 34—

"Mr. R., a book-keeper, a middle-aged man, became affected, two years and a half ago, with trembling of the right hand, and cramp of the middle finger and thumb, so that he got ill on with his writing. The arm felt heavy as lead, was colder than the other, and the trembling and cramp were so severe that he could not write his name distinctly. The trembling was worse in the morning, and after any exertion. When he wrote, the middle finger, as well as the thumb, were affected with

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cramp. After the first operation, he wrote more easily; after the fourth, tolerably well, and improvement followed all the subsequent operations. For fourteen days he was magnetised daily, and then dismissed, as the sense of weight, and coldness of the arm, as well as the trembling and cramp were all gone, so that the patient could write as well as when in perfect health. After the fourth day the patient took some exercise, to see whether it would recall the pain, but it had no such effect."

Again, at page 44—

"Madame St. ——— (whose mother was deaf), thirty-four years of age, small in stature, and slight in frame, very sensitive to change of weather, for eight years married, but childless, began, fifteen years ago, to have difficulty in hearing. The consulted physician applied caustic behind the ears, and the ulcer thus produced continued to discharge for three months without any benefit. Two years afterwards she was affected with chlorosis. Venesection proved very injurious to her. For several years she suffered from dyspepsia to such an extent, that she could not bear the slightest aliment. She was cured of this by a homœopathic physician, so that she was enabled to eat even the heaviest food, such as roasted goose, without any inconvenience. Deafness and painful noise in the ears, always worst at the menstrual period, and after exposure to cold were her chief complaints. She also suffered from weakness of the eye, so that she could not read by candle-light. The deafness was not, indeed, very bad, but annoying, as it prevented her mixing in society, as she could not understand what was said. I began to magnetise her on the 18th of October, once every day. On the first day after the operation she heard somewhat better. By the 8th of November the ringing in the ears was gone; the menses occurred on the 10th of November, and with them aggravation, after that amelioration. Again, once or twice, after unusual exposure to cold, aggravation. In this state she remained, having lost all hope of further magnetising doing her good. The weakness of sight was so far improved, that she could again read by candle-light. A scaly eruption (psoriasis) on the neck, about the size of a shilling, disappeared, after she had been magnetised three times."

In all these forms of disease the magnetic electricity effected rapid improvement (with few exceptions, as in the case of deafness), and, in a comparatively short time, perfect cure. According to the experience of Dr. Wetzler no good is to be expected from it, if no trace of benefit be derived after the 3d or 4th application. Its operation being so speedy, and its application so free of danger, the surgeon should always try its effect in cases of squinting, stuttering, and contraction of the limbs before he proceeds to use the knife.—For, if unsuccessful, nothing but a little time, which in these cases is of no value, is lost; if successful, a painful, dangerous and uncertain operation may be avoided. "How then," our author asks, "does it operate? On what principle?" Observation shews that it is equally useful in preternatural excitability as in paralytic torpor of the motory nerves, in weakness and stiffness of the limbs, in swellings, ptyalism (of a particular kind,) and various other diseases. If the conductor be moved slowly along the skin of a person in health, a tingling (knistern) and slight pain are produced; if the conductor be allowed to remain for a little time upon one spot, when a high power of the apparatus is employed, the most violent pain is produced, as intolerable as the most agonizing neuralgia, and the muscles underneath are excited into convulsive movements or spasms. The moment the conductor is removed the pain and spasms cease. If a conductor be held in each hand, the most violent contractions of the joints of the hand are produced, and, on the removal of the apparatus, a sense of torpor, which is soon followed by unusual lightness. Even the momentary action of the magnetic electric apparatus upon the brow, leaves a sense of tension or uncomfortable sensation, that remains some time after its removal: and by its application to the tongue, an increased secretion of saliva is excited, which sometimes attends its application to the face. The allopathic school will here recognize a stilling and exciting energy, a calmatine, stimulant, and irritant, combined with the power of at once increasing deposition and absorption; the homœopathic school, on the other hand, will explain its curative influence, in the principle "*Simile simili.*" The homœopathic smallness of dose, however, does not hold here universally good. It is true that neuralgias require and bear only the feeblest power of the instrument; but in spasms and paralysis the highest power is required. Pain is felt only at the point of contact with the conductor; it does not spread either up or down the nerve; in this respect it is unlike the galvanic action on the motatory nerves. For, if placed over one of these, it produces movement of the muscular fibres along the whole course of the ramifications of the nerve. The effect of the negative pole is the same in kind in my opinion, as that of the positive—different in degree. I have healed affections of the nerves of motion and sensation, swellings, stiffness, &c., as well with the positive as the negative pole applied to the part. But the negative is much stronger, 30 or 40 per cent., perhaps, than the positive.

"The magnetised part becomes warmer and redder; and at the spot whereon the cylinder was held, turgescence and a red spot appear; the pain is burning like fire, and a blister would be produced, if the person had resolution to endure the action. On the other hand, redness, heat, swelling, as in neuralgia of the face, acute rheumatism, sprains, &c., are removed by it. (On this the homœopathists lay much stress.)

"I have never observed any effect on the

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pulse from the magnetic electricity, even in cases where I have exerted the highest power of the instrument for half an hour. Farther, in upwards of two hundred cases in which I have applied the apparatus, I have never in any (with the exception of two) observed a general effect to be produced upon the nervous centres—the brain and spinal cord. The exceptions were as follows:—A young woman—tight-laced—came to me to be magnetised on account of migrim. I employed the feeblest power of the instrument, and transmitted the current through my finger. In two minutes she fainted, but soon recovered, when some cold water was sprinkled on her face. The second was that of a gentleman of about fifty years of age, of a nervous-sanguineous temperament, who had suffered from hemorrhoids and rheumatism. Two days before he was to leave Kissengen, he was attacked with rheumatism in the neck. I first magnetised him very gently, and then as he said, he felt nothing. I increased the power. Suddenly he fell into a faint, and on coming to himself, told me, that he always fainted at the sight of blood. He was cured of the rheumatism, however. Magnetic electricity is only available against local diseases, as its operation is confined to the place of its application; and a main point to be attended to is, that the application should be made as near the affected part as possible. If, for example, the muscle of the arm is affected with rheumatism, it is not to be cured by exciting violent contraction of the whole limb by laying the conductor on the bend of the arm, but by passing the conductor gently over the affected muscle, and holding it fast there. Of course, in the cure of neuralgia, paralysis, &c., these must arise from no incurable disorganization, if any but transient benefit is to be derived from the application of the galvanism."

We are repeating these experiments with a rotary magnetic machine, in a variety of cases, and shall be able to give some of the results in the next number, when we propose to try the effect of this powerful machine upon the *seat* of knowledge of some of the professors of our medical colleges, as the forces emanating from magnetic machines remove opacity of the organs with great facility as will be seen in the following article on the

Effects of Galvanism in certain organic diseases of the Eye.

The following experiments were made by Dr. Lerche in St. Petersburgh, with the assistance of Dr. Crusell, the discoverer of this method of applying galvanism.

1st. A complete leucoma of the cornea, as being a disease which has hitherto baffled all attempts to cure, was chosen for the first subject of experiment. The patient, a boatman, 68 years old, had entered the Institution on account of an inflammation of the other eye. The apparatus used was a simple chain, consisting of a zinc and copper plate, immersed in diluted sulphuric acid. The wire in connection with the copper plate was brought in contact with the leucoma, while the wire from the zinc plate was placed upon the tongue of the patient, and the stream of galvanism was kept up for two minutes. As the patient did not suffer in the least from the operation, and no bad consequences ensued; on the contrary, the white opacity on the edge of the cornea appeared thinner and clearer, the operation was repeated after three days. A distinct change for the better was gradually visible in the consistence of the leucoma, and the patient affirmed upon his part, that his perception of light had increased.

Dr. Lerche now determined to apply galvanism to the cure of internal opacities of the eye, such as those of the crystalline lens; and the results which Dr. Crusell had obtained in his experiments on the eyes of animals, confirmed him in his resolution. The first experiment was made on a pig. A fine cataract needle, fastened to the zinc pole, was pushed through the cornea into the crystalline lens of the right eye, and the wire in connection with the copper plate was put upon the external ear. After the eye had been galvanised for four minutes, the pupil began to look opaque, and the operation was concluded. Similar experiments were made upon the left eye. After a few days, *a perfectly developed lenticular cataract* was observed on both eyes, and the animal had become blind. "According to the theory," observes the operator, "the opposite pole of the galvanic battery should dispel the artificially formed cataract."(!!) In the course of ten days the operation was performed. After the eye had been exposed to the operation of the galvanic stream for three minutes, the process of resolution appeared to commence with the evolution of gas vesicles upon the pupil, and the operation was straightway concluded. The pupil appeared rough, and less opaque. In the course of four days it had recovered almost entirely its former clearness; and the vision so far as could be learnt from the behavior of the animal, was restored. On the cornea alone, at the circumference of the puncture of the needle, a dim spot remained.

2d. A coppersmith, aged 40, was recently successfully operated on for cataract of the left eye. In compliance with his desire to do something for the right eye also, which was affected with a capsular cataract firmly adherent to the iris, depression and other means were tried, but without permanent benefit. The very large cataract lay immediately behind the somewhat irregular and perfectly immoveable pupil; the patient, however, had perception of light. Galvanism was applied. It was most astonishing to see how, after the very fine cataract needle in connection with the copper pole had been run into the centre of the lens, while the zinc pole was laid on the patient's tongue, almost before a minute had

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elapsed, the cataract appeared to expand, increased in volume, and pressed against the cornea; then suddenly burst into three parts, one of which entered inwards and above, the other towards the temple of that side, and the third projected downwards into the anterior chamber; and yet the triangular fissure appeared perfectly clear and black. From the novelty of the thing (it was the first attempt of this kind upon a living man,) it was deemed advisable to desist, and the patient immediately saw and recognised a finger held before him, while the left eye was covered, and likewise the faces of persons before him. He had experienced no pain during the operation, which did not last a full minute, nor did inflammation or any other bad consequences ensue.

3d. The third case was that of a peasant aged 40, of a feeble constitution. The patient suffered from considerable amaurotic amblyopia of the right eye, while the left was affected with capsular lenticular cataract, and synochia. The breaking down of the cataract was attempted, but was of no use. On the 17th November galvanism was applied (and this time by means of a Becher-apparatus.) After half a minute, the adherent part toward the internal canthus gave way, and an excavation formed around the puncture, while the cataract expanded and protruded. The patient complained of headache; and so the operation, which had lasted about two minutes, was concluded. Towards evening considerable inflammatory action occurred, attended with great intolerance of light, and constant severe pain, deep in the eye and head. For a considerable time great sensitiveness to light remained, yet the patient was able to recognise small objects when the eye was turned away from the light, the pupil remaining very much contracted. The operation was repeated on the 1st of December, but this time only with the weak apparatus of two plates, such as was used in the first trial, and the negative pole remained only one minute in contact with the eye. Even after this inflammatory reaction followed, but in less degree, and of shorter duration. The vision improved to a certain point, only there remained fragments of the cataract still in the pupil. After this had been expanded by belladonna, a few lymph filaments were discerned connecting the fragments of the cataract with the edge of the iris, which were easily and entirely removed by the needle. No unpleasant consequences followed the last operation, and the patient was dismissed on the 6th of April, with perfectly restored vision.

4th. The third was the case of a woman, aged 56 years, who had lost the sight of her left eye under severe headache. The capsular lens, which had the appearance of the mother of pearl, adhered in its whole circumference to the pupil, the eye was tremulous, and the conjunctiva injected. On the 15th of November 1840, a cataract needle connected with the negative pole-wire of a pair of plates, was passed through the cornea into the upper segment of the lens, the positive conductor being put into the patient's mouth, and the galvanic current continued for a minute and a half. The upper part of the cataract disengaged itself from the iris, and the pupil contracted. Upon the same day also slight inflammatory reaction occurred, requiring for some weeks severe antiphlogistic treatment. On the 18th of December, the patient became affected with erysipelatous catarrhal opthalmia of both eyes, and in consequence, the palpebral conjunctiva appeared hypertrophied, and covered with large granulations. This condition, combined with great intolerance of light, was extremely obstinate. In the meantime, however, the vision improved, and the absorption of the cataract continued. After the inflammation had partially subsided, belladonna was dropped into the eye; and then it could be observed that the lens was absorbed, but vision prevented by the remains of the opaque capsule, which were easily removed by means of a needle. The pupil appeared a beautiful black, and the vision was perfect.—(Lerche in Berlin Med. Vereinstg. 1841, No. 35; Beilage, s. 171, 172; also Hygæa, xv. Band. v. Heft.)

The Agent in Animal Magnetism.

A writer in the Rochester Daily Advertiser, who signs himself T. J. Smith, states that he has succeeded in producing the various effects of what is called Mesmerism, by means of common electrical machines, and infers from this fact that electricity is the magnetic agent. He says:

"In the commencement of my examination of animal magnetism the impression was forced upon my mind, that its agent was the same, or near akin to electricity.

"This led me to test, by actual experiment. their similarity. I have used a small, common electric machine, and with it, by repeated trials, succeeded in producing all the effects usually produced by the will and passes of an operator. I have put a subject in the magnetic state by the machine, and awakened the subject without its aid, by the usual passes.

"Again: I have put a subject into the magnetic state by the will and passes, and aroused the subject to all his powers with the machine only.

"These experiments repeated several times, go to prove that electricity is the agent that produces all the marvelous results of animal magnetism.

"The machine, in the first instance, put the subject into the magnetic state, and the passes restored again to the natural state. In the second instance, the will and passes produced the same unnatural state, and the machine restored the subject.

"I have succeeded in putting a person in communion with the subject, by connecting him with the machine during the operations, and the person thus in communion, had control alone over the subject; could excite the organs,

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paralyze the limbs, &c., and awaken the subject in the same manner as when put to sleep in the usual way.

"Others have repeated the experiments with like success; and all who have witnessed them, were satisfied that electricity is the agent in all the mysterious effects of Mesmerism."

Some persons who are very susceptible to magnetic influence, cannot wear magnetised steel rings on their fingers, in consequence of their constant liability to fall into the magnetic sleep. Some pass into that state in one minute, while others of this class, feel no other inconvenience but that of slight shocks, which soon cease. The rings are magnetised with two poles—having a magnetic axis which passes through the finger, and a magnetic equator at right angles to it.

Remarkable Case of Magnetism.

Communication to the Editor of the Phrenological Magazine.

BY THE REV. DR. BEECHER.

In October, 1842, on my way to the Synod of Genesee, I spent the night at the house of Mr. Hall, at Byron. In the evening I called on Rev. Mr. Childs. On entering the room, I found his son, an intelligent boy, aged ten years, then in a cataleptic fit, sitting in his father's arms, and his feet in warm water.

In a few moments he recovered. He frequently had from three to six fits a day. Had received the best medical attendance in the region. Was no better—daily worse. He lost entirely the power of speech for several days. Great fears were felt that he would never recover. There was a sore place on the back part of his head and on the spine, occasioned by a fall some months previous. When the fits passed off he became hungry, and not at all drowsy; and during the interval appeared preternaturally bright; and engaged in sports as usual.

After I had conversed a few moments, I said, 'I would have him magnetised;' to which his father replied, 'I don't believe in it at all,' and the mother added, 'if you'll put me to sleep I'll believe, and not without.' I replied, 'I would try it—it may do good, and can do no harm.' During this conversation I made a few passes in front of the child, chiefly with one hand, and without any particular concentration of the mind or will, and mostly with my face toward the mother. In less than a minute the father said, 'he is in another fit!' 'No he is'nt I declare; I believe he is asleep.' Much surprised, (for I had never magnetised one,) I said, 'It surely cannot be what I have done, but if so I can awaken him;' then with a few reversed passes he awoke. 'Well, this is strange,' said I, 'but I can put him to sleep again if it is *real*.' I then seriously repeated the passes with both hands for one or two minutes, and placed him in the perfect mesmeric sleep. I then fixed my eyes on a lady on the opposite side of the room, the boy not yet having spoken for three days, and said 'Henry, what do you see?' He gave a name unknown to me; I looked to his father, who replied, 'it is her *maiden name*.' I then took vinegar into my mouth, and said, 'what do you taste?' '*vinegar*' speaking with great tartness, and at the same time making many contortions of the face. The mother now whispered to one of the children, who left her seat, and I said, 'Henry, what is she going for?' 'Sugar, and I love it.' She went to the closet and brought the sugar. I put some in my mouth, which seemed to give him the same pleasure as if I had put it into his own. I then said, 'What kind of sugar is it?' 'Muscovado.' 'What is its color?' 'Well, sir, a kind of light brown.' A small glass jar with a large cork was now placed in my hand, when immediately I observed the olfactory nerves affected, and the muscles about the nose contracted at the same moment. I said to the girl, 'What is it?' To which the boy answered, 'Hartshorn.' 'How do you know.' 'I smell it.' I myself neither knew nor smelt it. I then took out the cork and applied it to my nose, when he instantly placed his fingers on the part of his nose next to the forehead, and said, 'I feel it here,' just where I myself experienced the burning sensation.

During all these experiments he sat on his father's knee, with his head down on his breast, and reclining against his father.

I now asked him 'what is the matter with you?' 'My brain is sore.' 'Where?' 'At the bottom of it.' 'Where it joins the spinal marrow?' 'Yes,' 'What occasioned it?' 'I fell from the great beam in the barn.' His mother here asked him, 'why did'nt you tell us before?' 'I feared you would not let me play there.' 'Can Dr. A. cure you?' 'No.' 'Why not?' 'He don't know any thing about it,' (very decidedly). 'Can Dr. C.?' 'No.' 'Why?' 'He don't understand it.' 'Will the medicine you now use do you good?' 'No.' 'Of what is it composed?' 'There is turpentine in it.' 'Does the Doctor give it to you for tape worm?' 'Yes.' 'Have you any?' 'No.' 'Would you like to walk?' 'Yes.' 'Well, walk.' He arose promptly, stepped between the chairs, and said, well, sir, where shall I go,?' 'From the wall to the door and back.' This he

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did, avoiding every obstruction, and, at my direction, returned and sat again with his father. I now, without notice to any one, placed my fingers on the organ of benevolence, thinking at the moment it performed the office of Veneration, and said, 'Would you like to pray?' With some lightness, he said, 'No.' Some questions were asked by his mother and myself, about the bible, &c., but no veneration appeared. I then recollected the true office of the organ, and said, 'Have you any thing in your pocket?' He took out a knife. 'Give it to me for my little boy,' which he did promptly. I removed my hand. 'Have you any thing else?' 'I have a pencil.' 'Will you give me that for my other boy?' 'It has no head.' 'Never mind, give it, won't you?' 'I should not like to.' 'Well, but you will.' 'I couldn't come it,' (with peculiar emphasis.) Azubah said, ask him where the head of the pencil is. 'Where is it, Henry?' 'Well, sir, in the parlor.' 'Where?' 'On the window.' Azubah: 'Why, I picked it up and put it there to-day.' (He certainly did not know this.) I then said, 'Henry, can you get it?' He arose and went into the parlor in the dark, and took the pencil case head from the window, to the great surprise of us all. Indeed, we were all so astonished that it seemed a dream, during these and subsequent proceedings. He spoke with a promptness, boldness, and propriety, in advance of his years, and beyond himself in his natural state; and so perfectly evident was it that he was in a somnambulic state, that no skeptic, I verily believe *could* have doubted.

At my request, he returned to his seat. I touched benevolence, and instantly he handed me the pencil case. 'For my boy?' 'Yes, sir.' I then silently, and without any 'willing,' and with a feeling of curiosity to see and test the matter, touched reverence. His countenance at once assumed a softened and solemn aspect. 'Henry, would you like to pray?' 'Yes, sir.' 'You may.' He commenced praying inaudibly. 'You may pray aloud.' He then prayed in a low audible voice. On touching tune, he sung a tune, though not in the habit of singing. On touching combativeness and destructiveness, he raised his clenched fist to strike me. He was ignorant of phrenology, and also of my intention to touch any particular organ; nor did I in any case will the activity of the organ. I now took out my watch, and holding the dial towards myself, and above the line of his vision, his eyes being closed and his head bowed forward, and my hand also between him and the watch. 'Henry, what time is it?' 'Eight o'clock, sir'—which was exactly the time by the watch, though by the clock in the room it was fifteen minutes faster. 'Henry, how long ought you to sleep?' 'Well, sir, I must sleep two hours and five minutes.' 'Will you then awake?' 'Yes, sir.' 'Very well.' This I did for the purpose of testing his knowledge of time, as stated by Townsend, an English clergyman, whose work on this subject I had read.

I then said, 'Will you go with me to Mr. Hall's?' 'Yes.' 'Well, now we are there; now we are in the parlor; who are here?' 'Mr. and Mrs. Hall, Mr. and Mrs. Bardwell.' 'Who else?' He did not give their names, but intimated that they were strangers. He described the room and the position of things, all of which I found correct on going to the house shortly after. These persons were not in the habit of being there in the evening, but company having come in, they were all together at that moment. As this was in his own town, I did not deem it proof, and so said, 'Will you go to Batavia?' 'Yes' 'Now we are there—now we are at my house—now we will go into my room—what do you see?' 'I see a large table covered with black cloth, and with books and papers scattered over it.' 'How large is it?' It is about five feet long.' 'How many book cases?' 'Three, sir.' 'What sort of a stove?' He could not describe this, for it was so queer a thing as not to be easily described. Nor did I press him, for all his answers had been correct, and I was sufficiently astonished, for he had never seen my study, and no other minister, I am sure, has such a table (5 feet by 3 1-2) or left it in such confusion as mine was at that moment.

I may here say, that during the whole period of his sleep, he could hear the questions of others put to him, and would answer them, if I were willing; but if I willed otherwise, or forbade him to speak, as I often did, he then would answer no one but myself, not even father or mother; nor could he hear their conversation with me, nor with each other.

I now left him for an hour, and went back to Mr. Hall's, giving him leave to converse only with his father. On my return I found him in the same state. He utterly refused to speak to any one but his father, and told him he should not have another fit till the following Sabbath, (this was Monday evening,) which proved true; but when that day came he had several.

At nine o'clock and three minutes, holding my watch as before, and standing eight or nine feet from him, I asked the time. He gave nine o'clock and five minutes. 'Look sharp,' said I. 'O! three minutes,' said he.

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We were now curious to see if he would awake himself at the two hours and five minutes; and as the clock in the room reached that time he did not awake, I said, 'Henry, did you mean by my watch or by the clock?' 'By your watch, sir.' 'Very well.' At the exact moment, he opened his eyes and looked around, and that without any act or willing of mine; and what was very affecting and convincing, he could no longer speak at all, and was unconscious of all that he had said or done.

I have said that he had no return of fits till the next Sabbath. One day after that Sabbath, he came in to his mother much agitated, and apparently going into a fit, and making the passes, he solicited his mother to do it, who, merely to pacify him, passed her fingers over him, and soon he fell into a mesmeric sleep, and escaped the fit. After this he was so highly charged by his sister, that when she was in the next room in the closet, he would instantly taste any thing she tasted, eat what she eat, &c.

In ten days I returned and magnetised him again, and went through several of the above experiments. He always, while in the mesmeric state, declared that it benefitted him, relieved *all pain*, and would cure him.

After I left, at my suggestion, he was daily *magnetised*: his fits left him, his voice returned, the sore spots on his head and back were removed, and he recovered rapidly till the family could no longer mesmerise him. A man in the village was found who could, and daily did, till he appeared entirely well. On omitting it he had a fit or two, and it was resumed; and when I last saw the father, he informed me that they considered the child cured.

I may add, I have since cured toothache, greatly relieved tic doloreaux, and removed other pains and swellings, as well as headache. I am not, however, a full believer in all which is affirmed of clairvoyance—what I *see* and *know*, I believe. In respect to many well authenticated facts, I neither affirm nor deny. That there are many cases of gross deception and imposition I fully believe. On such a subject it can hardly be otherwise. This, however, is a reason why men of character and intelligence should investigate it, rather than otherwise. 'But it is deception.' 'Well, then, let us expose it by a fair trial.' 'But it is the work of the devil.' How do you know? What is the evidence? What harm has it done? 'Oh, bad men have used it for bad ends!' And what is there in the world that has not been so used? If it is the work of the devil, then we need not be ignorant of his devices, and should make the examination for ourself, for ignorant aud bad men will not expose his devices. From experiment and observation, I have no doubt, that, as a remedial agent, mesmerism is yet to accomplish much good, and no harm can result from it, except like all other blessings, it be abused.

W. H. BEECHER.

Boston, June 28, 1843.

Observations on Spermatorrhœa,
Or the involuntary discharges of the Seminal Fluid.

BY W. H. RANKING, M. D. CANTAB.,
Physician to the Suffolk General Hospital.

That important and most afflicting class of affections of the sexual organs, which is characterised by the frequent involuntary discharge of the seminal fluid, although sufficiently familiar to the majority of practitioners engaged in the large towns of this and other countries, has not met with such public notice on their part as it would seem to demand. For this reason, and to the great detriment of society, the treatment of the effects of sexual abuse or excess, exclusive of syphiltic and blennorrhagic affections, is too generally confined to a section of that horde of unprincipled pretenders, which the government of this country, to its shame, by tolerating, continues to patronise, and from whose obscene advertisements it condescends to derive a portion of its revenues. It thus happens that a subject fraught with the deepest interest, both as regards the individual and society at large, is rarely, in all its extensive details, submitted to honest and scientific investigation. It is to be hoped, however, that as the eye, the ear, the teeth, have one by one been rescued from the unclean grasp of quackery, so in its turn, this most wretched of all the curses which man's imprudence entails upon him, may be thought worthy the attention of the educated practitioner.

If a person after the age of puberty, and more especially if he have indulged in regular sexual intercourse, be from any cause induced to lead a life of perfect continence, he will experience involuntary emissions during sleep in greater or less frequency. The secretion of semen being continuous, and not, as is by some believed, accidental, upon erotic excitement, nature adopts this mode of disembarrassing the system of a product which ought, in correspondence with her laws, to be expended in the wholesome sexual employment of the organs. Emissions, therefore, occurring under such circumstances in robust individuals, so far from being injurious, must be regarded as a salutary provision. But, although beneficial, or at

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least, harmless, at first, these nocturnal discharges may, if the continence be prolonged, be, by an acquired habitude of the parts concerned, repeated to an extent which becomes positively injurious, and, as in the case of other habitual discharges, then produce inconveniences proportionate to their frequency, and the original constitution of the individual.

But the cases in which spermatorrhœa is consequent upon unnatural continence, *per se* are comparatively rare. The involuntary emissions which occur in such abundance as to constitute a really morbid phenomenon, are usually to be traced to one or other of the causes hereafter to be mentioned.

Symptoms.

From the almost insurmountable objection to speak of their ailments which is generally observed in the unhappy subjects of this complaint, it is difficult to procure a complete account of its origin. The history of a case of seminal emissions, however, will usually be found to be somewhat as follows.—After a greater or less amount of abuse of the genital organs, either natural or unnatural, the individual makes the discovery that he has become infested with seminal emissions during sleep. The emissions are at first accompanied by erection, but soon occur with diminished rigidity of the penis. If he at this time indulge in sexual intercourse he experiences more than usual difficulty in consummating the act; he is frequently disappointed altogether, or, if not, the erection is incomplete, and ejaculation more than ordinarily precipitate, and in some cases painful. As the disease advances the nocturnal emissions increase in frequency and abundance, at length occurring without either erection or pleasurable sensation; in fact, the patient is often only made conscious of them by the sense of feebleness on waking, and by the marks upon his linen. In sexual intercourse ejaculation becomes more and more hurried, till at length mere contact with or even sight of the female will induce it, and complete impotence is thus established. The pernicious effects of these discharges upon the general economy is soon evinced. The mind becomes enfeebled and incapable of protracted attention, the memory fallacious and uncertain, and the patient feels that he is no longer fitted for his usual avocations. His disposition undergoes an equal change, he becomes morose and suspicious, fond of solitude, lachrymose upon trivial occasions, and exhibits those apparently causeless contrarieties of temper, which are commonly received as evidences of hypochondriasis or eccentricity. Cerebral and thoracic symptoms, as giddiness, noises in the ear, palpitation, and cough, present themselves in greater or less intensity. The body gradually emaciates, especially about the lower extremities. The aspect becomes dejected, the patient seldom raises his eyes to the person he addresses as if conscious that the expression of his countenance would reveal his wretched condition. Digestion is impaired and accompanied by pain and flatulence. The bowels are invariably costive; indeed, I know scarcely any disease short of mechanical obstruction, in which they so obstinately resist the powerful cathartics. That this state of bowels is intimately connected with the emissions is shown by the fact, that upon the suspension of these the bowels at once resume their normal action. A case has lately come under my care in whicb the bowels resisted two-minim doses of croton oil, but acted spontaneously and regularly after the cure of the emissions by cauterisation of the urethra.—The urine is passed frequently, three or four times perhaps during the night. The aspect of the genitals is generally though not always enfeebled.

I have seen the most complete impotence co-exist with sexual organs of large size and vigorous appearance, but usually the penis is flaccid and without elasticity, the scrotum pendulous, and the testicles soft and tender to the touch. After the lapse of a certain time if the disease makes progress, the nocturnal emissions cease, and the patient is buoyed up with the hope that his ailments are removed; but his increasing feebleness soon proves that his hopes are without foundation. If at this time, the patient's attention be directed to it, it will be found that an alteration has taken place in the character of the urine, it has become turbid and nauseous to the smell. The turbidity is not, as in chronic affections of the bladder, persistent throughout the entire act of micturition, but appears chiefly towards the end, the urine being clear at the commencement. In other cases the seminal fluid, is not emitted till the bladder is emptied, when a glutinous fluid is observed to accompany the last few drops of urine. The evacuation of the bowels is accompanied by the same discharge, so that, in fact, there is a daily draining away of seminal secretion.

The case is now complete, and in that condition which, until Lallemand directed our attention to it, was utterly misunderstood.—The medical attendant being misled by the fact of the absence of nocturnal pollution, was invariably in such instances occupied by the more prominent features of the case, which was considered as cerebral, cardiac, or gastric disease, accordingly as one or other organ happened to take the lead in the symptoma-

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tology. This is doubtless the description of an extreme case; the majority present themselves while the emissions are nocturnal,—before, in fact, the disease has assumed its worst aspect; but it is of importance to be aware that the seminal fluid may pass away with the urine, and that it is not to be concluded, in a suspicious case, that spermatorrhœa does not exist, because a nocturnal emission has not occurred for a long time. The tendency of every case of morbid nocturnal emissions, if unchecked, is to become diurnal. The nocturnal discharges cease for the plain reason that the semen is removed continuously in the evacuations of the bladder and rectum.

Causes.

It has been the custom with most writers, from the time of Hippocrates downwards, to attribute seminal pollutions in all cases to previous abuse of the sexual powers. More recent investigations have determined that, although such indulgence is the more common cause, there are other circumstances capable of inducing the disease, independently of any blame on the part of the patient.

It is well known that some individuals support with impunity a degree of sexual irregularity which inevitably plunges another into the miserable condition in question.—We must, therefore, admit in the case of spermatorrhœa, as in other diseases, the existence of predisposition.

The application of lunar caustic to the urethra in cases of spermatorrhœa was first the suggestion of Lallemand; for although Sir E. Home had previously cauterised the canal, it was with the object of overcoming a stricture, Lallemand prefers, in all cases, the application of the solid nitrate, but it may likewise be used with benefit in the form of solution. In the hands of the French surgeon the success of this mode of treating involuntary emissions has been most remarkable. Nearly one hundred cases are reported in which it was adopted by him, and in all, with very few exceptions, its effects have been rapid, and, where the patient has been commonly prudent subsequent to the treatment, permanent. The experience of British surgeons, though not so extensive, is as far as it goes, equally satisfactory. In an excellent critique upon Lallemand's works, in the "British and Foreign Medical Review," are collected the written testimony of several English practitioners. One gentleman writes as follows:—"I can recollect eleven cases in which I have found Lallemand's treatment successful, and one in which it did not completely succeed. In seven of the eleven cases a single application of the caustic was sufficient; in four it was necessary to apply it a second time. . . . The effects are immediate; a person in whom the discharge has continued for months will have none for some days after the use of the caustic." Another writes thus: "I have carefully noted twenty-seven cases treated by the nitrate of silver. . . . Of these, thirteen were completely cured, eight so much benefitted that the emissions only recurred occasionally, and produced but little effect upon the system; the remaining five were benefitted, but not to the same extent." A third surgeon states that with regard to Lallemand's method of cauterising the urethra, he has tried it in a dozen cases, and in the majority of them with decidedly good effects. Mr. Phillips, in the paper before alluded to, thus speaks of the caustic bougie:—"In nineteen cases I used the caustic. Of these cases ten were completely relieved by a single application; in three the amelioration was decided, though the complaint was not cured; in six there was no relief. In the nine cases in which the first application was insufficient, the remedy was again used,—in three cases with complete relief." So that "in thirteen cases out of nineteen it succeeded, in six it failed; but in no case was there any aggravation." It appears, then, from these remarks, that of fifty-eight cases, exclusive of those of Lallemand, in which caustic was applied, it failed only in six, was beneficial in fourteen, and completely successful in thirty-seven, or two-thirds of the whole, a result sufficient to establish its character as a remedy of the utmost value.

Physicians of much experience will recognise in this practice an old acquaintance, and will see the fallacy of the great majority of these pretended cures; for they are nearly all cases of tubercular disease of the prostrate gland, involving more or less the organs with which it is connected, and complicated with tubercular disease of the cerebellum, in which the checking of the seminal discharges forms but a small part of the cure. The story of the subsequent suffering and death of many of these patients from disease of these organs, and from tubercular disease propagated from these to other organs, is not yet, and for obvious reasons never will be told. We have seen and treated a great many such cases so well described by the author of the above article, many of which had been nearly quacked to death with Lallemand's and other common remedies. In all

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these cases the magnetic symptoms disclosed tubercular disease of the prostrate gland, and cerebellum, and in many others it had been propagated from these organs to the cerebrum, stomach, intestines, and liver, and in others at last to the lungs.

Besides the moral treatment in these cases of tuberculous habits, in which the natural inclinations are much stronger than they are in other persons, they should be put under the use of the remedies for tubercular disease, and should continue under the use of them until their healths are restored, and it is only in the few cases, in which the urgent symptoms described in the above article, do not readily or gradually yield to their influence, that Lallemand's, or any similar remedy should be used.

The Power of the Human Will.

The following extract on this subject, is from the *New Orleans Crescent.*

Extraordinary Power of the Human Will—A long time ago we recollect hearing of some experiments performed by two ancient graduates of Ecole Polytechnique. A drop of quicksilver hermetically sealed in a small nut-shell covered with wax, and attached to a thread, on being held over a parcel of dimes placed in a straight line will move from one end of the silver to another, and its motion can be stopped by a mere effort of the will! If this ball be held over a gold watch a rotary movement can be obtained, and the motion reversed by the action of the mind! We tried the experiment yesterday, and found it to be perfectly successful.

We have been much pleased with a repetition of this experiment. Another extraordinary example of the power of the human will is that exercised by the magnetiser.—From numerous experiments in mesmerism, about one-seventh of the adult population, and children generally under ten years, are supposed to be very susceptible to its influence, and these it is now ascertained can be easily put into the mesmeric or magnetic state, by the exercise of the will of the magnetiser, without the use of manupulations, under certain favorable circumstances, and these are principally strict attention to the magnetiser or some other object, when he exercises his will upon them. Persons too, who have been once magnetised, although not before very susceptible to its influence, can afterwards be put into the magnetic state by the mere exercise of the will of the magnetiser, and even at great distances from him.

There is besides a still more extraordinary phenomenon in regard to the power of the will, for we find we can bring the true images of different persons from any part of the world into the room before clairvoyants, in an instant of time, even persons we never saw or heard of before, whether dead or alive, when they will see and describe them, with apparently the same accuracy they would if these persons were really before them, in their natural waking state, and solves the mysteries displayed by a travelling magician at Cairo, as described in the following article, as well as those that are practised by the same gentry in this country.

"Lord Prudhoe and Major Felix being at Cairo last autumn, on their return from Abyssynia, where they picked up much of that information which has been worked up so well by Captain Bond Head in his life of Bruce, found the town in a state of extraordinary excitement, in consequence of the recent arrival in those parts of a celebrated magician, from the centre of Africa, somewhere in the vicinity of the Mountains of the Moon It was universally said, and generally believed, that this character possessed and exercised the power of showing to any visitor who chose to comply with his terms, any persons, dead or living, whom the same visitor pleased to name. The English travellers, after abundant inquiries, and some scruples, repaired to his residence, paid their fees, and were admitted to his *sanctum.* They found themselves in the presence of a very handsome young Moor, with a very long black beard, a crimson caftan, a snow white turban, eighteen inches high, blue trowsers and yellow slippers, sitting cross-legged on a Turkey carpet, three feet square, with a cherry stalk in his mouth, a cup of coffee at his left elbow, a diamond hafted dagger in his girdle, and in his right hand a large volume, clasped with brazen clasps. On hearing their errand, he arose and kindled some spices on a sort of small altar in the middle of the room. He then walked round and round the altar for half an hour or so, muttering words to them unintelligible; and having at length drawn three lines of chalk about the altar, and placed himself upright beside the flame, desired them to seek a *seer*, and he was ready to gratify them in all their desires. There were, in the old days, whole schools of magicians here in Europe, who could do nothing in this line without the intervention of a *pure seer*, to wit, a *maiden's*

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eye. This African belongs to the same fraternity—he made them understand that nothing could be done unti' a virgin eye was placed at his disposal. He bade them go out in the streets of Cairo, and fetch up any child they fancied under ten years of age.

They did so; and after walking about for half an hour, selected an Arab boy, not apparently above eight, whom they found playing at marbles. They bribed him with a few halfpence, and took him with them to the studio of the African Roger Bacon. The child was much frightened at the smoke and the smell, and the chatter and the muttering—but by and by he sucked his sugar candy, and recovered his tranquility, and the magician made him seat himself under a window—*the only one that had not been darkened*, and poured about a table-spoonful of *some black liquid into the boy's right hand* and bade him hold the hand steady, and keep his eye fixed upon the surface of the liquid—and then resuming his old station by the brazier, sung out for several minutes on end,—'What do you see? Allah bismillah—what do you see? Illala Resoul Allah! What do you see?' All the while the smoke curled faster and faster. Presently the lad said, *Bismillah!* I see a horse—a horseman—I see two horsemen—I see three—I see four—five—six—I see seven horsemen, and the seventh is a *Sultan.*' 'Has he a flag?' cries the magician?—'He has three,' answered the boy. ''Tis well,' says the other 'now halt!' and with that he laid his stick right across the fire, and standing up addressed the travellers in these words:—'Name your name—be it of those that are upon the earth, or of those that are beneath it; be it Frank, Moor, Turk, or Indian, prince or beggar, living and breathing, or resolved into the dust of Adam, 3000 years ago—speak, and this boy shall behold and describe.'

"The first name was William Shakspeare. The magician made three reverences towards the window, waved his wand nine times, sung out something beyond their interpretation, and, at length called out, 'Boy, what do you behold?'—'The Sultan alone remains,' said the child—'and beside him I see a pale-faced Frank, but not dressed like these Franks—*with large eyes*, a pointed beard, a tall hat, roses on his shoes, and a short mantle! The other asked for *Francis Arouet de Voltaire*, and the boy immediately described a lean, old, yellow faced Frank, with a huge brown wig, a nutmeg grater profile, spindle shanks, buckled shoes, and a gold snuff box?' Lord Prudhoe now named Archdeacon Wrangham, and the Arab boy made answer, and said 'I perceive a tall, gray-haired Frank, with a black silk petticoat, walking in a garden with a little book in his hand. He is reading on the book—his eyes are bright and gleaming—his teeth are white—he is the happiest looking Frank I ever beheld.' Major Felix now named a brother of his, who is in the cavalry of the East India Company, in the presidency of Madras. The magician signed, and the boy again answered. 'I see a red-haired Frank, with a short red jacket, and white trowsers. He is standing by the sea-shore, and behind him there is a black man in a turban, holding a beautiful horse richly caparisoned.' 'God in heaven!' cried Felix. 'Nay,' the boy resumed, 'this is an odd Frank—he has turned round while you are speaking, and, by Allah, he has but one arm!' Upon this the major swooned away. His brother lost his arm in the campaign of Ava!"

Mental Powers of Clairvoyants.

There is apparently, as much difference in the mental powers of clairvoyants, as their is in these individuals in their natural waking state. There is also a great difference in the relative clearness of their visions, and in the same individuals at different times. Some again will see very clearly, and describe very accurately an hour or two, and then become weary or exhausted, when they will make mistakes, and little or no dependence can be placed upon any thing they say. They also sometimes become displeased, and aware of their superior mental powers, give vent to their spleen by attempts to deceive those around them. One of the best examples of their extraordinary mental powers, is that described in the following account of some phrenological experiments in Hartford, Conn., in January, 1842.

"The subject was an interesting married lady, of high intellectual cultivation, most respectably connected, and of unimpeachable integrity.

"An eminent lawyer being introduced to her, she began with him the discussion of some legal question, astonishing us by the clearness of her conceptions, or keeping us in a roar of laughter by the lively sallies of her wit. During this conversation, some one behind her placed his hand near her head, without touching it. She instantly evinced embarrassment, forgot the subject of discussion, and could not go on until the hand was removed. The magnetiser then placed his hand upon her forehead, her recollection was restored and the conversation renewed. The magnetiser then touched the organ of veneration, when she abruptly terminated the discussion, assuming an attitude of devotion, and refused all farther communication with the physical world. Her devotions being ended, she was put in communication with a scientific gentleman, with whom she held a long and interesting conversation on the subject of Animal Magnetism; boldly controverting his arguments and giving her own view of this extraordinary science with great clearness of

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thought and beauty of expression. And here she seemed like an ethereal being—a being of another creation—and in the language of the eminent divine, to whose church she belongs, "she appeared perfectly sublimated." After this she astonished all by determining with wonderful accuracy the phrenological character of various individuals present, and describing with most minute exactness, their several diseases, acute or chronic, incipient or confirmed. A gentleman present was requested to sing and play a German song for her. The first note struck brought her to the piano, when during the prelude she persisted in standing, but the instant he commenced the song, she sat down by him, and with a full, sweet voice, accompanied him in the very words he sung, although in her natural state she has no knowledge of that language. She then accompanied a French gentleman in one of the songs of his country, and afterward began again the German song, which the pianist had been requested to sing once more. During the performance of this she was demagnetised, and of course, discontinued her accompaniment. Being asked by the writer why she stopped, and if she would not still accompany the other voice, she replied that she knew neither the words nor the air."

These feats, in the somniscient state, of understanding and speaking in unknown tongues, or in a language unknown to these persons in the natural state, have been frequently repeated in this city. They were, moreover, practised in the ancient Pagan Temples, and by the apostles of the Christians. See Acts of the Apostles, chapter 2.

"Magnetism appears to have been well understood by the Egyptian hierarchy, not only from some of the effects we find recorded, but in one of the chambers (of the Temple) whose hieroglyphics are devoted to medical subjects, we find a priest in the very act of that mesmerism which is pretended to have been discovered a few years ago. The patient is seated in a chair, while the operator describes the mesmeric passes,* and an attendant waits behind to support the head when it is bowed in the mysterious sleep."—DUBLIN UNIVERSITY MAGAZINE, Oct. 1843.

The higher orders of the Christian priesthood continued to be initiated into the mysteries taught in the temples, long after the Christian era; and this was a matter of great importance, for it was necessary for them to get up shows and theatrical performances, on holidays, in imitation of the Pagans and of the lesser mysteries, to amuse their audiences, and these were continued, even in England, as late as the last part of the sixteenth century.—HONE'S ANCIENT MYSTERIES, &c., LONDON, 1823.

St. Cyril, Bishop of Alexandria, in A. D. 412, in his VIIIth book against Julian, gravely observes: "These mysteries are so profound and so exalted, that they can be comprehended by those only who are enlightened. I shall not therefore attempt to speak of what is most admirable in them, lest by discovering them to the uninitiated, I should offend against the injunction not to give what is holy to the impure, not to cast pearls before such as cannot estimate their worth."

Theodoret, Bishop of Cyzicus, in Syria, A. D. 420, in his dialoge, entitled, "The Immutable" introduces Orthodoxus, speaking thus: "Answer me, if you please, in mystical and obscure terms, for, perhaps, there are persons present who are not initiated in the mysteries."

* "One of his hands is raised above the head of the sick person, and the other is on the breast."

Cases successively treated with Sulphate of Quinine

By C. SEARLE, M. D., M. R. C. S. L., Bath.

Scarlatina.—I was requested by a lady, twenty miles distant, to visit her family as soon as possible, as a son and daughter were dangerously ill with scarlet fever. I reached the place of her abode the same evening, when the son, I found, had died two hours before. The daughter, a delicate girl, aged seventeen, I found delirious in bed, with great difficulty of deglutition, a small irritable pulse at 120, and an excited skin. Leeches were then being applied to the temples, and powders of calomel and antimony being administered every two hours. The leeches I directed to be immediately removed, and sent for the medical attendant, on consultation with whom, on his arrival, as he declined any responsibility in the measures I thought it necessary to pursue, the cure was thrown altogether into my own hands. The patient's skin I now had sponged with tepid water, and the throat gargled, or rather mopped, occasionally with a large hair pencil, dipped in a mixture of strong chilly vinegar and honey, which produced a copious muculent salivation. Soon after this a grain of quinine, in solution, was administered, with a tablespoonful of port wine; and the same was repeated every two hours throughout the night, and two or three spoonfuls of sage and

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wine between each dose. On the following morning the throat was much better, the fever had declined, and she expressed herself as feeling in every respect better. The remedies were continued, and in the evening all danger was at an end. After this she continued the quinine in doses of three or four grains during the day, and was up and well by the end of the week.

Another son and a servant of the same family were attacked the day after my arrival at the house, the disease being of epidemic prevalence in the town and for many miles around. They were both treated by an emetic in the first instance, followed up by a dose of calomel and jalap; and after the operation of this by a tea-spoonful of bark-powder, with two table-spoonfuls of port wine, every two hours, with immediate convalescence; and this treatment becoming now general in the town, was very successfully pursued.

Erysipelas.—An infant, fourteen months old, was attacked with erysipelas on the face, which extended down the neck to the chest, and down the arms to the finger ends, the hands becoming œdematous. Calomel, antimony, and purgatives were freely administered for more than a week without permanent benefit; on the contrary, the disease was extending itself, and the child had become comatose. Under these circumstances half a grain of quinine was given every two hours, and a blister applied to the thigh. The amendment was almost immediate, and the child was two days after convalescent.

I have only to add, in conclusion, that the above are not a few choice cases selected from among many, in support of the opinion I have previously advanced, that quinine is a remedy which of late years has been too much neglected in the treatment of these varieties of fever; but as I am out of practice, these are, although few, the only cases of the kind with the treatment of which I have had anything to do. June 10, 1843.

In Sub-Arachnoid Hæmorrhage.

False membranes never occur, but in the intra-arachnoid hæmorrhage they are always found around the effused clot on the fourth or fifth day. Paralysis of motion rarely accompanies sub-arachnoid hæmorrhage, but commonly intra-arachnoid hæmorrhage; paralysis of sensation is rare in both kinds. Deviation of the mouth does not occur in these cases, but sleep and coma are almost constant symptoms. Delirium and fever accompany intra-arachnoid hæmorrhage alone, but from this disease the patient may recover; while sub-arachnoid hæmorrhage has been found constantly fatal within eighty days.

Treatment in Cholera.

A physician of Freienwalde has it is said, in the "Medic. Zeitung," proved the acetate of lead, with strychnine, to be effectual in causing the immediate cessation of the vomiting in sporadic cholera and in tending to the speedy cure of that disease. The urinary secretion is, however, suspended under its employment, sometimes for as long a time as two days. Dr. Steinbach, of Brandenburg, is an advocate for the acetate in the same disease, but in combination with a solution of pure tannin. This mixture, he says, is specially indicated in the cases in which a softening of the gastro-intestinal mucous membrane is present.

Nervous Headache, &c.

A physician of Marseilles has found headaches of a kind dependent on nervous disturbance, obstinate tic douloureaux, &c., curable by the application of liquor ammonia (*l'ammoniaque depuis le vingt-cinquieme degre jusqu' au trente-deuxieme,*) on a dossil of lint, to the alveolar border of the palate. The solution is to be retained in contact with the mucous membrane immediately within the teeth, until an abundant effusion of tears is excited, when the exacerbation of pain will suddenly cease. This remedy proves more efficient against tic douloureaux attacking the frontal and facial than the occipital nerves; but it has been successful in several authenticated instances in which the latter have been the seat of pain.

Pathology of Tetanus.

At the autopsy of a patient who died in the Hotel Dieu of Paris, with tetanus supervening on fracture of the leg, numerous ecchymoses were found on the fibrous sheath of the spinal cord; and external to that membrane a collection of black and liquid blood occupied the lower part of the vertebral canal to the height of five or six inches. The spinal cord itself was softened throughout its lower two-thirds, and closely adherent to its pia mater; and the ramollissement continued though in a less degree, to the occipital foramen, terminating just below the corpora pyramidalia. Within the carnium the pia mater was observed to be greatly injected, and there was extensive softening of the left anterior and middle lobes of the brain. In the sciatic nerve of the right side the side of the fractures ecchymosis and inflammation were perceptible, but there was neither in the nerve of the opposite side. (It should be stated that the autopsy was not made until fifty hours after death.) Numerous other cases are cited, in which softening of the nervous organs and similar appearances have been observed; but tetanus has occurred without such having been afterwards discoverable.—*Archiv. Gen. de la Med.*, April, 1843.—*London Lancet.*

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The pathology of these cases, confirms what we had formed of the disease in a case of a lady, to whom we were called in consultation about 15 years since. Tetanus came on in consequence of an injury (from a puncture of a nail,) to the fore-finger of the right hand. After suffering a number of days, we found her in a comatose and apparently hopeless state with opisthotonus, from which she could not be aroused, but shaved the top of the head, and cupped her freely and obtained about 12 ounces of blood, when she awoke, and from that time became convalescent, and soon recovered her health.

Tetanus.

To the Editor.—Sir. —In a late number of THE LANCET, I find an account of the post-mortem appearances in a case of tetanus. As the pathology of the disease does not appear to be understood, I would ask whether, *a priori*, we should not suppose it to depend on an irritable and, in some cases, an inflammatory state of the spinal cord? If this inference be correct, what is the treatment indicated?

I. Large bleeding, to subdue irritation and control the spasms.

II. Blistering along the whole spine.

III. Calomel in large doses, combined with opium, continued until its specific action on the system is induced.

I am aware that each of these means has been tried, severally, and with various results, but I have not met with any case of their conjoint use. I am, sir, your obedient servant,

H. WHITWORTH.

St. Agnes, Aug. 22, 1843.—LONDON LANCET.

Paralysis of the Bladder, cured by the Tincture of Cantharides.

A patient was lately admitted into the Hopital de la Pitie with paralysis of the bladder, for the relief of which all ordinary methods of treatment had failed. M. Lisfranc ordered the direct application of tincture of cantharides to the bladder by the following mode: One drop of the tincture was let into the organ through a catheter, and followed by an injection of simple lukewarm water. Next day two drops were similarly instilled, and the like operation was repeated night and morning for several succeeding days, an additional drop of the tincture being added on each successive occasion. By this method of treatment a cure was soon effected. M. Lisfranc found no perceptible irritation to result from the use of the tincture in an undiluted form, while the direct application of the remedy to the organ affected, was clearly preferable, in every respect to its internal administration.—*London Lancet.*

Violent inflammation would have been the result, if this tincture had been applied to a serous surface connected with the nerves of sensation; but in this case it was the moter nerves only in which it came in contact, and hence the importance of the distinction as in this case between the sensibility of the one, and the insensibility of the other.

Pathological Researches into the Local Causes of Deafness

Based on One Hundred and Twenty Dissections of the Human Ear By JOSEPH TOYNBEE, F. R. S., Surgeon to St. George's and St. James's Dispensary.

The researches of which this is a summary view, are in continuation of a previous paper contained in the 24th volume of the Society's "Transactions." The principal practical conclusions to which they lead is, that the most common cause of deafness is chronic inflammation of the mucous membrane which lines the tympanic cavity; and that by far the greater majority of cases commonly called nervous deafness ought, more properly to be attributed to this cause. The pathological conditions to which inflammation of the mucous membrane gives rise are divided in the papers into three stages.

In the first stage, the membrane retains its natural delicacy of structure though its blood vessels are considerably enlarged and contorted; blood is effused into its substance, or, more frequently, at its attached surface. Blood has also been found between the membrane and the membrane of the fenestra rotunda, and in very acute cases lymph is effused over its free surface.

The second stage is characterized by the following pathological conditions:

First, the membrane is very thick, often pulpy and flocculent. In this state the tympanic plexus of nerves becomes concealed, the base and crura of the stapes are frequently entirely embedded in it, while the fenestra rotunda appears only like a superficial depression on the swollen membrane.

Second, concretions of various kinds are visible on the surface of the thickened membrane. In some cases, these have the consistence of cheese, and are analagous to tuberculous matter; in others they are fibro-calcareous, and exceedingly hard.

Third, by far the most frequent and peculiar characteristic of this second stage of the disease is the formation of the membranous bands between various parts of the tympanic cavity. These bands at times are so numerous as to occupy nearly the entire cavity; sometimes they connect the inner surface of the membrana tympani to the internal wall of the tympanum, to the stapes, and to the incus. They have also been detected between the malleous and the promontory, as well as

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between the incus, the walls of the tympanum, and the sheath of the tensor tympani muscle, as well as between various parts of the circumference of the fenestra rotunda; but the place where the adhesions are most frequently visible is between the crura of the stapes and the adjoining walls of the tympanic cavity; this was the case in twenty-four instances out of a hundred and twenty dissections, being a fifth of the number. These kinds of adhesions sometimes contain blood and scrofulous mater.

In the third state of inflammation of the membrane, it becomes ulcerated, the membrani tympani is destroyed, and the tensor tympani muscle is atrophied. The sosicular auditus are diseased, and ultimately discharged from the ear, and the disease not unfrequently communicates itself to the tympanic walls, affecting also the brain and other important organs.

Changes of Mercurials in the System.

The fact that calomel could be converted into corrosive sublimate in the system, was known many years ago. But the exact circumstances of this transformation were not sufficiently understood. Mialhe, in an elaborate set of experiments on the subject (Ann de Chimie, v. 160,) says, the action occurs when calomel is brought in contact with a solution of an alkaline chloride, that the quantity of sublimate formed is in proportion to the amount of alkaline chloride present, and the action increases in proportion to the concentration of the alkaline chloride. His experiments were made with common salt and sal-ammoniac. The action is much increased by the presence of air and dextrine, but is retarded by fat and gum. By simply boiling calomel in distilled water, sublimate is formed. Mialhe extended his observations to all the compounds of mercury, and obtained similar results. He concludes that it is corrosive sublimate which is the active agent in medicine. If this idea should be confirmed, it should lead to the substitution of this form of mercury for all others. The same chemist recommends the hydrated proto-sulphuret of iron as a complete antidote to corrosive sublimate. To prepare it copperas is to be precipitated with dydrosulphuret of sodium, the precipitate washed and preserved in an air-tight bottle.—*Dr. R. D. Thomson in Proceedings of Glasgow Philosophical Society, No. 4.*

Statistics of Lithotomy.

In the five years, 1836 to 1840 inclusive, twenty-four operations for stone in the bladder took place at the Hotel Dieu in Paris. In six of these, which were cases of lithotrity, all the patients survived. Of the other eighteen cases in which lithotomy was performed, eleven were attended with perfect success, and the recovery of the patient, but the seven remaining terminated in death, in one case two months after the operation; and in the rest only from two to five days. In these seven, two of the patients were upwards of seventy years of age. Of the whole twenty-four individuals operated on, thirteen were from three to twenty-five years, three from twenty-five to fifty years, and eight from fifty to seventy-five years;—a proportion which seems to indicate that calculus is more frequent in youth than in age, and that middle life is nearly exempt from its access. In 1841 six patients were operated on in the same hospital by M. Roux, on four of whom lithotomy, and on two lithotrity was practised. The mortality in this year was greater than in any of the five preceding; five out of the six patients died; and the case of recovery was one in which lithotomy had been employed.—*Gazette Med.*, No 47.

Statistics of Anal Fistula.

During the five years from 1836 to 1840 inclusive, 119 patients were operated on at the Hotel Dieu, Paris for fistula in ano. Of these persons 110 left the hospital cured, and 9 (or 1 in 12) died. The mortality from the operation was progressively less in proportion from the first to the last mentioned year. Of the 119 individuals operated on, 32 were of ages between 15 and 25 (4 only being under 20 years of age,) 55 from 25 to 40, and 32 between 40 and 60 years old (only 3 being more than 51 years old.) Only 12 of the whole 119 were females. Sedentary occupations, and whatever is productive of habitual constipation, have been considered fruitful cases of fistula; but the evidence elicited from the individuals suffering from the disease was by no means corroborative of such statements. The patients included indifferently sawyers, carpenters, masons, bakers, porters, and other persons accustomed to perpetual exercise, as well as tailors, bootmakers, cutlers, cabinet-makers, and others employed in sedentary pursuits. Some connection of fistula with a tuberculous diathesis seemed, however, to be apparent.—*Gazette Medicale de Paris.*

The Hartford Journal says, that Dr. John S. Wolcott, son of the late Governor Wolcott, and the last of the Wolcotts in Litchfield, died suddenly on the 22d instant, from putting arsenic in a tooth to aleviate the toothache.

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Dr. F. Bird, Physician to the Metropolitan Free Hospital, has lately successfully extirpated a dropsied ovarium, on which paracentesis had been performed no less than *ten times*. The incision was made on the right side, a little below the umbilicus, and the tumor, after being discharged of its contents, was withdrawn to the outside of the abdomen, and separated, with the greater part of the Fallopian tube, by the help of silken ligatures placed round its pedicle. The recovery was at first slow and doubtful, but at the end of three weeks, the patient was quite convalescent, and is now in the enjoyment of perfect health. The solid portion of the tumor was little larger than an orange, but when filled it would contain about two gallons of fluid, and weighed upwards of twenty pounds.—*London Lancet.*

These ovarian tumors which terminate in dropsy, are cases of tubercular disease of the ovaria, in which there is more or less pain produced by pressure on the lumber vertebræ, as in the case of tubercular disease of the uterus, of which the ovary are an appendage. Disease of the ovaria may however be distinguished from that of the uterus, by the difference in the size of the breasts—the largest being on the same side of the diseased ovaria, in consequence of atrophia of that on the opposite side. We have found these symptoms to be constant in twenty-six cases of undoubted disease of the ovaria, in which eight had terminated in dropsy.

Spontaneous Cure of Ovarian Dropsy.

The following case is recorded by M. Hay, at Altena, in Prussian Westphalia. A woman, aged forty-eight, who had previously been in perfect health, was the subject for some time of great uneasiness in the hypogastrium, when at length, on the right side of the abdomen, immediately above the ramus of the pubis, there appeared a large tumor, somewhat moveable, and unequally distending the abdominal parietes. The accompanying symptoms were pain in the thighs and the right leg; the lower extremities œdematous, dyspnœa, &c. The clear diagnosis furnished of ovarian dropsy had induced the practitioner to advise the operation of paracentesis, which was on the point of being performed, when a large serous discharge issued from the vagina and lasted about four days, at the close of which time the tumor and all its concomitants disappeared. It should be mentioned that this affection had no influence either in stopping or diminishing the menstrual discharge; only one ovary therefore, appears to have been affected.—*Medicinische Zeitung.*

Muscular Motion.

Numerous experiments on the relative heat and pulsation of animals, under different latitudes have shown that men in this climate, pulsate, on an *average*, 78 times in a minute, while in the Canadas they do not exceed 57. This circumstance affords proof positive of the fact that the transitions from heat to cold, vary the powers of pulsation. The common *watch* is computed to tick 17,154 times in one hour. This is 411,686 times a day, and consequently 150,165,390 in a year, supposing the year to be but 365 days: and as some watches do, by care, preserve their powers of action for 100 years, we have the gross number of 15,016,539,000 times for one time-piece. Now, although the watch is formed of *hard* metal, and therefore, to all appearance, is likely to endure long, yet, man possesses, within him a piece of machinery composed of an extremely soft material, which beats nearly 5,000 times every hour, 120,000 times each day, and 43,000,000 times per year; and consequently 4,380,000,000 times in 100 years—an age frequently attained by healthy persons who lead temperate lives. This piece of machinery is the *Heart*.

New Pessaries.

Mr. Snow laid before the Westminster Society at its last meeting, some pessaries which he had invented, consisting of sponge cut into a globular form and tied up in oiled silk, in such a manner that, when compressed, the air contained in the interstices of the sponge was displaced from the instrument, which was thus reduced in size, but gradually returned to its original dimensions when the pressure was discontinued. He said that, by this capability of being reduced in size, the pessaries were very easy of introduction; he had found them more effectual and create less uneasiness than any other kind which he had used; and as the oiled silk protected the sponge from all extraneous matters, they were calculated to be durable. He had got Mr. Read, Regent-circus, to make them for him.—Lancet.

This new invention, like many others in our father land, is an old invention in this country. It was used here more than 20 years ago, in cases of prolapsus uteri, with ulceration, when the pressure of no other pessary could be borne. Its use here is now mostly confined to these cases. The glass pessary, is, however, on many accounts, much the *neatest* and best for common cases.

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Tuberculous Deposite in the Pia Mater.

The following case is selected from a number of others of a similar kind in a late number of the "Journ. de la Soc. de Med. de Nantes." A young man, twenty-five years of age, had long suffered from disease of the heart; he was seized with inflammation of the left pleura, which became afterwards complicated with pneumonia and pericarditis. His disease proved fatal, and towards the termination of his life he daily had fits of an epileptic character, losing consciousness for some minutes, his face becoming purpled and his arms agitated by involuntary movements. After death, on the middle and posterior portions of the right hemisphere of the brain, many tuberculous deposites, of a grey or bluish color, underneath which parts, the brain was in a softened state. Deposites of the like nature were discovered on the inferior surface of the cerebral lobes, on the upper surface of the cerebellum, and in other parts of the pia mater. In the thorax, the heart was found hypertrophied, and adherent to the pericardium; adherences also existed between the right pleuræ pulmonalis and costalis; the left lung was partially hepatised, and there were numerous tubercles in the bronchial glands, *but none existed in the lungs. It is* singular also that the patient is *not stated to* have ever been delirious during *his* malady.—LANCET.

Tubercular disease of the brain is a common cause of insanity. We have a case of a lady who had been insane about a year, and in whom we detected tubercular disease of the brain by the magnetic symptoms, and who became perfectly sane in *seven* weeks thereafter, under the influence of the *magnetised gold pill*. She has continued sane to this time, now more than six months.

Another Wonder.

We learn from the Bangor Democrat, that a successful surgical operation was performed on a woman in Bangor on Monday, while she was in the magnetic sleep. The lady is the wife of Mr. Ebenezer Davis, of Jarvis Gore, (Penobscot Co.) She was thrown into the mesmeric state, when a tumor was removed from her shoulder by Dr. Rich. While he was performing the operation, Mrs. D. exhibited no other symptoms of suffering than a slight twitching of the muscles and a compression of the lips. When awakened, she was unconscious that any thing unusual had taken place in regard to herself —she did not know that the tumor had been removed until informed by others. The parties are all respectable, says the Democrat.

Physiology of the Spleen.

Our professor of anatomy, Dr. Hargrave, has paid some attention to the subject, and he concludes that its chief use is to receive the blood, as a temporary reservoir, or diverticulum, when any obstruction in the heart, lungs or liver, renders it necessary that they should be relieved from the pressure of that fluid. The absence of valves in the splenic veins permits of regurgitation, and other circumstances render this opinion probable. He always conceives that it performs a similar office for the mucous membrane and the skin. When the blood is driven from those membranes by cold or rigors, it is received into the spleen for the time, and returned to the general circulation as soon as the balance of the circulation is restored in those organs. Certainly the phenomena of intermittent fevers go far to support this opinion.—*Dr. Benson's Lectures; Dub. Med. Press.*

Post Mortem Spleens.

To the Editor.—Sir: The quantity of crude speculations which your readers have lately been presented with on the office of the spleen was brought to a conclusion by your lengthened summary, showing the result to be even more jejune than might have been feared by those who were aware of the inanity of the subject. To sum up your summing up, nothing is yet known of the functions of the spleen. Still these canvassings of opinions, if brief, are agreeable enough. Every one, perhaps, has his peculiar opinions on the use of the spleen. I expect however, that you will never know the truth until you meet with a case of opening in the abdomen opposite the spleen, as there was with regard to the stomach, permitting the changes to be observed as they occur, and then my opinion is that you would see,—what you would see.

But I would beg to know whether the pathology of the spleen be not as defective as its physiology? Whether the cases you have published (*passim*) of spleen disease be not erroneously stated? And I would add an appendix to this spleen dispute, in a few words on the morbid appearances thereof.

I had an opportunity, when assistant to Dr. Hodgkin, of carefully observing the state of the spleen in many hundred inspections, and I noticed the singular variations of character that it presented, particularly the very soft and pulpy state, which was usually ascribed to the effects of inflammation or specific disease. "See how inflamed the spleen is?" Cases have been thus described in your journal. Now, this is only the result of a general atony, or relaxation of fibre, but,

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owing to the peculiar structure of the spleen, most marked or pronounced in that organ. It follows chronic diseases, prostration, typhus in hot weather, gangrene, hæmorrhagic diathesis, purpura, petechiæ, &c. The worst case was where the spleen was quite a pulpy, &c.

Along with the spleen, the kidney, liver, heart, brain, &c., are in a degree softened.—There is cadaveric exudation; the course of the veins conspicuous. Other splenic phenomena are very interesting and important as concerned in fatal accidents. The duties of a coroner will be badly performed by one ignorant on these points. Your obedient servant, H. P.

April 16.

The editor of the London Lancet continues to rail against animal magnetism, to gratify the prejudices of a certain class of his readers—the old ladies in breeches, who imagined they had monopolised all the knowledge in the healing art.

Weak and bigoted men always gratify their vanity in opposing the introduction of additions to our knowledge, which not being taught in the schools in which they were educated, are consequently, above their comprehension. The fury with which such self-sufficient philosophers opposed the introduction of the theory of the Copernican system of astronomy is equalled only by that with which they now oppose the introduction of the theory of the magnetism of the human system. "Do we not see the sun rise in the east,—move through the heavens and set in the west? and must we now believe against the plain evidence of our own senses, that the earth moves around the sun! and does not the Bible say that the sun rises in the east and sets in the west? What sacrilege! Bring the faggots, and we'll consign these new philosophers to the flames!" exclaimed the bigots, and Copernicus barely escaped those flames, by refusing to allow his work to appear until the day of his death!

Medicinal Employment of Iron and Iodine.

Diabetes cured by Iodine of Iron.—B., a man, forty years of age, of a naturally strong constitution, and who had usually enjoyed good health, became subject, without any known cause, to a difficulty of digestion, accompanied by a feeling of tightness in the epigastric region, diminished appetite, insatiable thirst, increase of urine, and, in short, all the other symptoms of diabetes, on which account, a few months since, he went into the Hotel Dieu at Paris. For three weeks previously he had passed daily between three and four gallons of saccharine urine, when he was put on a course of ioduret of iron to the amount of about fifteen grains in the twenty-four hours, in four doses, accompanied with a generous diet, which, however, had been previously employed alone without any salutary effect. Under this treatment the quantity of urine began at once to diminish, and in three days the quantity passed daily was less than three gallons, and the urine contained much less sugar. The thirst also was considerably lessened. Within a short time afterwards the quantity of urine had decreased to a gallon daily. The same treatment was continued which had been pursued throughout, and five days afterwards the patient was discharged cured.

Prurigo.—A solution of iodide of potassium has been found of considerable benefit as an external application in prurigo; and in M. Lisfranc's practice the use of iodine has prevented the extension of cancerous sores, though it has not superseded the use of the knife.—*Gaz. des Hop.*, Oct. 1842.

Hydrocele.—M. Serre also recommends the employment of this remedial agent in solution (one part of tinct. iod., to four parts of water) as an injection into the tunica vaginalis after the operation for hydrocele, in preference to wine, to which he seems to show it is generally superior in every point of view.—*L'Experience.*

Tendinous Re-union.

M. Berard lately exhibited to the French Acad. of Med. a preparation of the tendo-Achillis, which had been divided six months previously, but had become united again by an intermediate substance of a character different from the tendo-Achillis itself, to both cut extremities of which it was, however, closely adherent. M. Berard finds that by dividing this tendon in the case of fracture of the fibula with dislocation of the foot outwards, this accident, otherwise so difficult of remedy, becomes easily repaired—*London Lancet.*

Active Ointment of Mezereon.

Herr Hoffmann, a chemist, of Landau, makes a very active preparation by dissolving a drachm of the alcoholic extract of mezereon in four drachms of alcohol, and mixing the solution with about 4½ lbs (avoird.) of lard. This ointment is said to be a very efficient counter-irritant.—*Lancet.*

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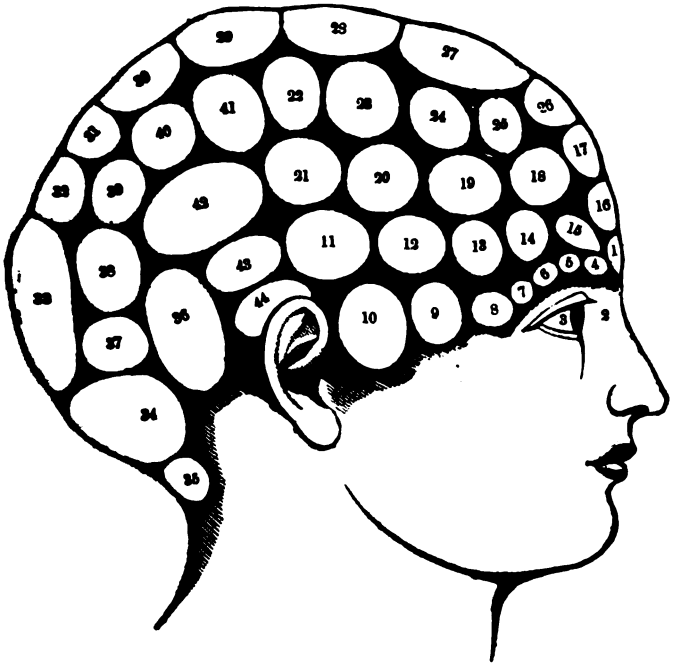

New Phrenological Organs.

On a comparison of the great and fatal disparity in the results, both in the number and situation of the new phrenological organs, obtained in exciting different parts of the brain in the mesmeric state, by Messrs. Fowlers, Sunderland, Buchanan, and King, they are now satisfactorily accounted for, with a very few exceptions, (marked †,)—some by their having excited opposite sides of the same organ, and others by their having excited portions of different organs, at the same time. With such a license with the brain, we can, like an old fiddle, play any tune upon it that may suit the propensities of the marvellous.

There appears, however, to be no doubt but some of these are true organs. The vermiform process in the median line of the cerebellum, is apparently the organ of voluntary motion. This motion is interrupted in chorea, or St. Vitus' dance, which is tubercular disease of this organ, as is disclosed by the magnetic symptoms.* In fifteen skulls of different nations, we found a prominence in thirteen on the under and back part of them, or under the natural situation of that process in the skull. The accuracy of the organs of penetration and thirstiness are also confirmed by our observations, independent of those made by exciting the organs in the mesmeric state.

1. Individuality.
2. Form.
3. Language.
4. Size.
5. Weight.
6. Color.
7. Order.
8. Calculation.
9. Thirstiness.†
10. Alimentiveness.
11. Acquisitiveness.
12. Constructiveness.
13. Tune.
14. Time.
15. Locality.
16. Eventuality.
17. Comparison.
18. Causality.
19. Mirthfulness.
20. Ideality.
21. Sublimity.
22. Hope.
23. Marvellousness.
24. Imitation.
25. Suavity.†
26. Penetration.†
27. Benevolence.
28. Veneration.
29. Firmness.
30. Self Esteem.
31. Concentrativeness.
32. Inhabitiveness.
33. Philoprogenitiveness.
34. Amativeness.
35. Voluntary Motion.†
36. Combativeness.
37. Connubial Love.†
38. Adhesiveness.
39. Ostentation.†
40. Approbativeness.
41. Conscientiousness.
42. Cautiousness.
43. Secretiveness
44. Destructiveness.

*Catalepsy and Epilepsy are cases of tubercular diseases of the cerebellum in which this organ is more or less involved.

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Mr. Burritt, the "learned blacksmith," to the Rev. Le Roy Sunderland.

"A few months ago I received a communication from a gentleman residing in a remote part of the State, to this effect. He had sent a lad, in the *clairvoyant* state to the *moon*, where he made many discoveries with regard to the inhabitants, &c. Having found his way into a building resembling a school-house, he detected a book, which, upon opening, he was unable to read. At the request of the magnetiser, he copied off twenty-eight well-formed characters, as different from each other as the letters of our alphabet. These were forwarded to me to compare with the characters employed in the Oriental languages. A few weeks afterwards I received another letter from the gentleman, containing the results of another tour of discovery to the moon. The lad saw things more definitely this time; and took drawings of a monument and a metallic horn. Upon the monument was an inscription, written in the very characters which the boy found in the book. I have just written to the gentleman, requesting him to begin a new series of experiments upon the moon, simultaneously with Mr. Shepherd, and send the result to me. I would therefore propose that you do the same with your subject, and to publish the result of the three series together, should there be a striking correspondence.—The course I have proposed to Mr. S. and the other gentlemen, was, to take their subjects to the north-east side of the moon, and let them proceed through to the south-west side; then, from the west to the south-east; from north to south; and from east to west; describing what they saw, as would be natural to a traveller journeying through a new country. When each of the three subjects has been through in the above order, it might be of great interest to compare their *notes on the moon*."

We understand that at the meeting of the Royal Society on the 8th instant, a paper by Dr. Martin Barry was read, announcing his discovery of spermatozoa *within the mammiferous ovum*. The ova were those of a rabbit, taken, twenty-four hours *post coitum*, from the Fallopian tube.—LANCET.

Commentaries on some Doctrines of a Dangerous Tendency in Medicine,

And on the General Principles of Safe Practice.

BY SIR ALEX. CRICHTON, M.D., &C.

A work proceeding from an individual of high standing, who has passed the greater part of a long career in the active pursuits of the profession of medicine,—in early life an hospital physician and a teacher in London,—the contemporary of Drs. Reynolds, Warren, (the elder,) and Pitcairn, and numbering amongst his pupils the late Dr. Young—favorably known to the public as the author of "An Inquiry into the Nature and Origin of Mental Derangement;" also holding, for many years, the appointment of physician to the late Emperor Alexander, of Russia,—one who has retired from practice, and from whose bosom is withdrawn (we may presume) in such a production as this, every motive save that of a desire to confer a benefit upon his fellow creatures, being in the 79th year of his age:—a work from such a source demands attention and respect.

There are three commentaries. The greater part of the first is occupied in demonstrating the erroneous notion entertained by Haller and many of his successors, including Dr. W. Philip, of the possession by the arterial tunics of a muscular power, with the fatal tendency of such an error; but the physiological writers in our own Journal having generally held the same opinion as that of the author, we need not dwell upon it now. One or two statements, however, in this part of the book call for notice.

Upon mathematical data, furnished by the late Dr. Young, the conclusion is arrived at, that a quick pulse is indicative of a slow circulation:—

"The pulse may beat 130 times per minute, and yet the progressive motion of the blood from ventricle to auricle may be slower than in health."—P. 9.

The pulse being both quick and weak, its two most frequent concomitant qualities, the above proposition becomes self-evident, the quantity of fluid to be moved being the same, and provided the admission be made that its motion depends mainly on the action of the heart; so that the rate of pulsation, taken alone, is no index whatever of the progressive motion of the blood; and the only case in which a quick pulse corresponds with the increased celerity of the blood, is where the action of the heart is stronger, as well as being more frequent than natural, and accordingly the quantity of blood expelled at each ventricular contraction is either increased, or but little or not at all diminished. In a majority of cases the heart's action being increased in frequency, it is also more feeble, and, as a general rule, it would appear, that the frequency is proportionate to the loss of ventricular power. In these cases it is that a quick (it should rather have been written frequent) pulse becomes indicative of a slow circulation of blood.—LONDON LANCET.

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Operations in disease of the Ovaria, and Spina Bifida.

Quackery.—The following ingenious notice, professedly of a new bi-monthly periodical, which appeared in a New York paper of the 15th inst., is a fair sample of the daily puffing process, by which a certain class of physicians in this city sustain each other—no matter how unimportant or unsuccessful their practice—and is now re-published for the benefit of their brother chips in other cities.

New-York Journal of Medicine and the Collateral Sciences—Edited by Samuel Forrey, M. D.

The second number of this valuable Journal has come to hand. The original department is, as usual, rich and instructive. Dr. Foltz has again contributed largely to its pages. Dr. F. reports one of the most extraordinary surgical operations which has ever been performed in this country. It was a case in which both ovaria had been successfully removed. It seems from the bibliographical account of this operation, that Dr. McDowell, of Kentucky, performed it first, and more successfully than any other man in the world —and that Dr. Alban Goldsmith, of this city, is the second most successful operator in this, the greatest feat of modern surgery. Dr. David L. Rogers, of this city, has likewise performed it once. We notice this particularly, because we take it to be a matter of congratulation, that New-York talent has been able in this, as in many operations, to perform successfully that which has again and again baffled the skill of the best talent in Europe. Some idea may be had of the immensity of this operation, when it is remembered that *it is done by laying* open the abdomen, and *removing from* the midst of the intestines tumors as large as a man's head. This, too, while the patient is *writhing in agony*, and the operator moving his knife through the mass of intestines that protrude from the wound. We notice also, from the note book of that talented and able operator, Dr. John Watson, of this city, an interesting case of *spina bifida*, successfully operated upon by Dr. Stevens.* The *resume* of Dr. Lee's work on *dietaries*, by the able editor, is full of practical interest, so much so that we mean to present a digest. We commend this journal to the support of the profession. And we assure the editor that when he can command for his pages the contributions, of such men as Francis, Mott,† Goldsmith, Stevens, Watson, Foltz, and the like, he can easily outstrip, with our immense hospital facilities, any journal in the country.

The following extracts, from Cooper's Dictionary of Practical Surgery, with notes and additions by D. M. Reese, M. D.—J. & J. Harper, New York, 1830—will give a fair view of the dependence that may be placed upon the statements of the class of physicians before mentioned:—

Ovarian Tumors.

"The first attempt to remove them by an operation was made in 1776, by L. Aumonier, surgeon in chief of the Hospital in Rouen, (France) and is reported as a successful case. See Good's study of Medicine, p. 423."—(This operation was performed many years before Dr. McDowell was born.) "In the London Medical Gazette for 1829, Dr. Hopfer, of Biberback, has reported three cases of extirpation of diseased ovaria, by Carrysman. The first was performed in 1819, and proved fatal in thirty-six hours after the operation. The second in 1820; this case was successful, and the woman has since borne children. The third case occurred in the same year, and the patient never recovered from the shock of the operation." "M. Lizars, in the Edinburgh Journal, for October, 1820, relates an attempt to extirpate an ovarian tumor, but unfortunately, on cutting into the abdomen, he found no tumor to remove.‡

Besides these cases by "the best talent in Europe," Dr. Jefferson, of Ipswich, has performed the operation once, which was successful—Dr. West, Tonbridge, once—and Dr. Clay, of Manchester, twice, and all successful, Dr. Phillips, of London, once, which proved fatal.—See Braithwaite's Retrospect, part 7th, pp. 99–100. "Professor Smith, of Yale College, has given an interesting case of the successful removal of an ovarian dropsy, by an operation. See Am. Med. Rec., 1822. Dr. D. L. Rogers, of this city, removed an ovarian tumor in 1829. The operation was successful. "The tumor was composed of a large sac, which contained a fluid drawn off in different operations for tapping. One third of the tumor was solid, containing a fibro-cartilaginous substance. It weighed three and half pounds." "Dr. McDowell, of Kentucky, has reported three cases in which he operated successfully for tumors in the abdomen, ovarian and hydatid. A doubt exists in regard to these cases; and certainly the mode of describing them is calculated to confirm that doubt."—See Med. Chir. Rev., vol. 5, page 216.

Thus much for the operations in cases of ovarian tumors, and of the notice of the New-York Journal of Medicine, and the collateral sciences, in the New-York paper referred to, which it will now be seen was intended only for the "green horns" in the community and of the profession. But "we notice also from the note book of that talented and able operator, Dr. John Watson, of this city, an interesting case of *spina bifida*, successfully operated upon by Dr. Stevens." Bah! see Cooper's Surgical Dictionary, before quoted; article Spina Bifida, in which it will be seen Sir Astley Cooper fully succeeded in one case, in 1809. See also the New-York Medical Repository for 1813, p. 28, where it will be seen that Dr. H. H. Sherwood, of this city, operated with equal success in one case in 1811.§—*New-York Herald, Sept.* 28, 1843.

* Professor of Surgery in the old Medical College.

† Professor of Surgery in the new Medical College. The other gentlemen mentioned are all either ex-professors, or adjuncts, and professors in expectancy of these Colleges.

‡ See the symptoms I have introduced to distinguish diseases of the ovaria.

§ I have since operated in three cases, the first of which (by ligature) proved fatal in 36 hours—the two last (by excision) like that of 1811, were both successful.—Ed.

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Effectual Reduction of Strangulated Hernia by Ether.

M Vela has been enabled to effect the reduction of strangulated hernia in many cases by the external application of sulphuric ether, accompanied with friction; in which plan of treatment he was successfully followed by other French surgeons. M. Barbon, of Bordeaux, was called to a case inguinal hernia in a woman fifty-seven years of age, forty hours after strangulation had occurred. When all other attempts at reduction had failed, he had recourse to irrigations of ether over the surface of the tumor, which, to his surprise, disappeared in the space of five or six minutes, and was followed by a copious evacuation of the bowels, and the prompt recovery of the patient. The same practitioner reports another case, occurring in a man thirty-six years of age, to which also he was called. The hernia formed a tumor eight inches in length, by an equal breadth, and extending to the base of the scrotum; it was hard, and so painful that the taxis was impracticable. Copious blending, baths, and frictions with belladonna, &c., having proved of no use, the patient was raised by means of a bolster under the hips, so that the tumor would present for the manipulation of the operator its whole surface which was accordingly irrigated with ether gently rubbed over it by the hand.—Three minutes after the commencement of this process the hardness of the tumor began to give way, the hernia diminished in volume, and seven or eight minutes were sufficient to produce its total reduction, followed by the speedy cessation of all the previous alarming symptoms. The ordinary operation for strangulated hernia is sufficiently difficult and doubtful in its result to render any medical agent tending to supersede its necessity a valuable adjunct to surgical science.—*Gazette des Hopitaux*, Sup. Oct.

Nitric Acid in Internal Hemorrhoids.

Dr. Houston, of Dublin, is greatly in favor of the employment of nitric acid in cases of vascular tumors, in preference either to excision or to any other chemical application. The acid, he says, may be applied in the following manner:—

"Let the patient strain as at the night-chair, so as to bring the tumors fully into view; and, while they are so down; let him either lean over the back of a chair, or lie down in the bent posture on the side on which the disease exists, with the buttocks over the edge of the bed. Let a piece of wood, cut into the shape of a dressing-case spatula, be dipped into the acid, and then, with as much of the acid adhering to it as it will carry without dipping, let it be rubbed on the tumor to the extent desired. The due effect of the acid on the part is shown by its changing it to a greyish-white color. If a superficial slough be all that is required, a single application may be enough; if a more deep one, then two or three applications of the wood, dipped in the acid may be made in quick succession, which being finished, let the part be well smeared over with olive oil, provided beforehand for the purpose. The prolapsed parts should then be pushed back within the sphincter, the patient put to bed, and an opiate administered. The pain of the application is sharp and burning at first, but goes off in two or three hours, and does not return again in the same form. A general uneasiness about the anus on motion, together with a slight sense of heat, fulness, and throbbing, are felt for a few days, and there may be some little feverishness; but I have not seen or heard of any more serious effects from the remedy."

"The symptoms following the application of the acid are usually so mild as not absolutely to require confinement to bed more than a few hours, although for many reasons such confinement may often be desirable. On the third or fourth day, a purgative draught should be administered, when the bowels will be found to yield to the medicine, generally without either pain or prolapse of the rectum. The progress after this to healing is rapid, and free from any disagreeable symptoms."—*Dublin Journal of Medical Science*, March, 1843.

Analogy between Diseases of Different periods of Life and Corresponding Periods of the Year.

Some of the French physicians, adopting the notions of the ancients, have lately promulgated the doctrine of an analogy between the diseases occurring at different periods of life, and those which are produced at corresponding periods of the year.. Thus in *spring*, they say, it is the young who suffer most from disease,—the maladies that are chiefly produced in that season, such as inflammatory diseases, and others which are dependent on too copious a general or partial supply of blood, to which persons of early age are more especially subject. The diseases which prevail in *summer* are mostly those attacking persons of middle age, as, for instance, diseases affecting the biliary organs; and the *autumnal* complaints are principally experienced by individuals of more advanced years. The *winter*, they observe, is fertile in rheumatisms, neuralgia, catarrhs, apoplexies and other diseases which infest the aged, who, for the most part, pay the debt of nature at this season.—*Lancet*.

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Ancient Ruins.

A gentleman who has traversed a large portion of the Indian country lying between Santa Fe and the Pacific, informs the editor of the Houston [Texas] Telegraph, that there are vestiges of ancient cities and ruined temples on the Rio Puerco and Colorado of the West. On one of the branches of the Rio Puerco, a few days travel from Sante Fe, there is an immense pile of ruins that appear to belong to an ancient temple. The building occupies nearly an acre of grounnd—portions of the old wall are still standing, consisting of large blocks of lime-stone regularly hewn and lain in cement. The ruins bear resemblance to those of Palenque or Otolun. There are many similar ruins on the Colorado of the West which empties into the Californian sea. Neither the Indians resident in the vicinity, nor the oldest Spanish settlers of the nearest settlements, can give any account of the origin of these buildings.

An antiquarian at my elbow, with no small pretensions, suggests the great probabilites of the antidiluvian origin of these remains of ancient cities, which with the extinct mammoth races of animals of the same period have been buried, one after another in one common ruin.

Amputations in Paris.

Medical statistics receive much attention on the continent. In the hospital of Paris, from 1833 to 1840 inclusive, 852 amputations were reported to have been performed, the general results of most of which were as follow:—of 201 cases of amputation of the thigh 126, or 62 per cent., were followed by death; of 192 amputations of the leg, death ensued in 106 cases, or 55 in 100; in 38 do. of the foot, the subsequent mortality was only 9 cases, or 24 in 100; in 91 of the arm there were 41 deaths, or 45 in 100; in 28 of the fore-arm 8 deaths, or 21 in 100; The mortality after amputations of the toes or fingers was comparatively inconsiderable; 564 of these operations took place on male subjects, of whom 267 died; 165 were on females, 56 of whom succumbed. The autumn appears to have been the season most unfavorable to happy terminations of these cases, and next to it the spring; the summer and winter are the most favorable seasons; the latter premeinently so. Such researches have great practical utility; but in none of our own hospitals are similar attempts at generalising results pursued by the medical establishment.—*Lancet.*

Formula for Rheumatism.

M. Pereyra, of Bordeaux, who has adopted the use of guaiacum for rheumatic affections in preference to any other vaunted remedy, employs the following formula:—Finely powdered resin of guaiacum, a drachm; orange leaves, powdered, half a drachm; acetate of morphine, three-quarters of a grain. These ingredients, are mixed, and divided into sixteen powders, one of which is to be taken every two hours. The acetate of morphia is useful both for enabling the stomach to tolerate the guaiacum and in moderating the stimulant effects of this substance which so often compels its disuse.—Lancet.

Digestion of Alimentary Substances.

An account of experiments, in order to ascertain the elements necessary for digestion in the stomach.—Messrs. Sandras and Bouchardat, the authors of this paper, state that the digestion and absorption of albuminous and feculus substances are performed exclusively by the stomach:—whereas, greasy substances are not there acted upon, but pass into the duodenum in the state of emulsion, by means of alkalies, which are given out by the liver and pancreas. This emulsion is to be found in abundance in the whole of the intestine. The chyle appears to be the same whether the food be albuminous or feculous; but there is a sensible difference where greasy food is taken.—Paris Academy of Sciences.

Prevention of Sore Nipples.

To the Editor.—Sir: I think that sore nipples would seldom occur did mothers pursue this plan which I always advise to my female friends on occasions of suckling, namely, after the child has left the breast, to wipe the nipple very dry, and apply to it a piece of linen cloth. I have had much practice among the ladies for the last twelve years, and never had a case of sore nipple where this plan was adopted. Although it may appear to be a trifling communication, yet trifles are not to be despised, especially in the obstretric department of medicine; they lead to more practical advantage than a great deal of the theoretical nonse se of the present age.

Your obedient Servant,

T. C. Wood, M. R. C. S., L. A. C.

Surgeon to the Reading Dispensary,
London-street, Reading, Lancet.
Nov. 1842.

Rhus Toxicodendron.

Van Heddeghem mentions the case of a Creole in Louisiana, who was so susceptible to the action of Rhus Toxicodendron that he could not drive along the roads where the rhus plant grew, or shake hands with a person who had been exposed to the effluvium of the plant, without being almost immediately attacked with the *rhus erysipelas*, which

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affected his face, neck, hands, arms, chest, and genitals, in particular. He had used very many remedies in vain, in order to deaden his susceptibility, when, finally his physician, Bressa, determined to give him the rhus grandiflora which produces effects very similar to those of the rhus toxicodendron. At first it caused an erysipelatous affection of the eyelids and nose; in course of time, however, it no longer produced any perceptible effect, and he was enabled not only to expose himself to the effluvium of the rhus tree, but could even handle it without suffering the slightest inconvenience.—*Precis analytique des travaux de la Societe Med. de Digon pour l'annee*, 1832. *Dijon*, 1838, p. 48.

Rau (*Nouvel Organe*, p. 55) relates a case also illustrating the action of rhus. A laborer, in the botanical garden at Giessen, a few hours after being employed in expressing the sap from the leaves of the rhus radicans, was attacked with violent vesicular erysipelas of the face and hands attended with a high state of fever.—British Jour. of Hom.

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Arsenic in the Chronic Pleurisy of Sheep.

M. de Gasparin communicated to the Academy of Science (January 2, 1843) the results obtained by M. Cambessedes with arsenious acid in sheep affected with chronic pleurisy. A hundred and twenty of these animals each swallowed thirty-two scruples of this poisonous preparation, mixed with common salt; with the exception of one, all entirely recovered; whilst before the administration of this remedy, the flock was actually decimated by the disease. M. Cambessedes was induced to try it from its being vaunted as a specific by the country people. He considered that it is not a poison to the sheep; but the experiments performed previously by a commission, prove this opinion to be erroneous, and also shew that arsenic is homœopathic to pleurisy in the sheep. In an experiment by MM. Flander and Danger, six grains (trois decigrammes) of arsenious acid were introdued under the skin of the sheep, symptoms very soon manifested themselves, and in five days the animal died. The autopsy shewed pleuropneumony with effusion on the right side. The production of serious effusion into the pleura of animals poisoned by arsenic, has also been observed by M. Chatin. It is difficult to account for the seemingly innocuous effects of the large dose administered by M. Cambessedes.—*Annales d'Hygiene Publique, etc. April*, 1843, p. 469.

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Dr. Gaspari of Berlin, upon the employment of Carbo Animalis in Buboes.

The rapid resolution of Buboes in three instances in which Dr. Gaspari gave Carbo an., not as homœopathic to the buboes, but to the other attendant symptoms, led him to try it in several cases, and with great success. In the Mat. Med. of Hahnemann, buboes are not given as one of the pathogenetic effects of Carbo an.; its therapeutic use can therefore be only established as yet *ex usu in morbis*. The buboes he treated were principally venereal, and though the medicine seemed specific to the bubo it appeared to exercise no effect upon the primary venereal affections; so that after the resolution of the bubo, other remedies had to be given. The treatment lasted three, five, or at the most, eight days. In numerous cases where the bubo appeared as if about to suppurate, still resolution was affected.—*Annales de la Med. Hom.* tome i, p. 11.

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Poisoning by Stramonium (Datura.)

A girl four years old ate a few seed of this plant. Towards evening tennitus aurium and sleeplessness occurred; the child sang and wept, and spoke uninterruptedly confused nonsense. The eye was lively, the pupil dilated and insensitive to the light; she snatched continually in the air as if to seize something; to stand was impossible, for on rising the knees knocked together, and the child on attempting to exert herself, she staggered and fell like one drunk. Vomiting was induced, and she got rid of the poison and recovered. —(Caspen's Wochenscrift 1842, No 25; also Osten. Med. Wochenscrift bim. No. 32, August 6, 1842.)

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Effects of an over dose of Cina; observed by Dr. A. Noack of Leipsic.

Theodore Georgi, aged 2 1-2, of a scrofulous constitution, had been early very delicate, but latterly in good health till three months before; since when, he was subject to diarrhœa, and only lately freed from it. He received from his mother, for ascarides, a heaped tea-spoonful of powdered cinna-seed, with *syrupus communis*, on the 23d November, 1841, about 11 o'clock in the morning. About ten minutes afterwards, violent repeated vomiting of yellow water came on together with watery diarrhœa and general convulsions. After this state had lasted about half an hour, I was called in, and found the child in the lap of its mother, still in convulsions, which, according to the mother's account, had not decreased in violence. They consisted in distortions of the limbs in all directions, from which the fingers and toes alone remained free; head and body were drawn backwards, forwards, sidewards, by turns, whilst the boy beat about with his arms and legs. There were, besides, from

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time to time, violent shocks through the whole body, with stamping of the feet downwards, and pushing with the head upwards and backwards; the shocks were particularly violent in the lower part of the breast, and felt on laying on the hand on the epigastrium. The face, which I was told had been pale at first, and had become by degrees gradually more livid, was now quite blue, the eye-balls were soon after turned upwards convulsively, so that only the white was visible; soon they became fixed straight forward, the pupils considerably dilated, and insensible to light. The tongue was sometimes drawn together in the form of a cylinder, and spasmodically passed through betwixt the lips without efforts of vomiting having taken place. Breathing natural, temperature of the skin low, skin dry, pulse small, contracted, neither frequent nor quick, regular. (Tinct. Ipecac. 1, every quarter of an hour 1 gt. to be taken on sugar.) The child afterwards vomited light yellow water twice, but not again; the cramps abated, passed by degrees into slight twitchings, and after the lapse of half an hour the fits ended with a peaceful sleep, which lasted an hour, with the return of *turgor* of the skin, a breaking out of general perspiration, and rising of the pulse. The little patient awoke lively and well-pleased, and continued so during the following days.—From Hygea, vol. xvi. p. 81.

Cicuta.

A widow, 50 years old, of a slender frame, who had never regularly menstruated, and had suffered much from urinary affections, attended with pain in the renal region, to relieve which numerous warm baths were employed, was attacked, fn September 1838, with frequent vomiting in the course of the day, by which all she eat, and latterly a frothy white fluid, was ejected. When the narrator of the case visited the patient, her countenance was of an earthy hue, the skin was dry, there was great weakness, depression of spirits, little sleep; the pulse was small, but not frequent, the tongue dry. Urgent thirst, the abdomen normal to the touch. Only on the right epigastric region, under the false ribs, there was a painful induration about the size of an orange. This induration seemed to arise from an inflammatory abscess of the liver, the vomiting from excessive irritability of the stomach, or disease of the pylorus. As the vomiting had not continued long, the narrator diagnosced chronic gastritis complicated with hepatitis. From this view of the case he ordered copious leeching, embrocations, with belladonna, and enemata, and purgatives. As this treatment was of no use, after having been pursued for three or four days, pill of saffron, and then opium pills were given—these diminished the pain and procured sleep, but the vomiting and the other symptoms continued. Other two experienced physicians were called in, who gave it, as their opinion, that there was likewise induration of the pylorus present, and ordered opium and blisters on the epigastrium. Neither was this treatment of any use. The patient visibly declined. From the recommendation of Stoerk, pills made of the extract of *cicuta*, and a large blister and an opiate enema were used. By this means the threatening danger was removed, and a steady, though slow convalescence ensued. Cicuta was given, first half a grain daily, then half a grain three times a day. [The reporter of the case, in Oppenheim's Journal, observes, naively enough, it is evident that this wonderful cure was effected by the morphia and blisters, for the dose of cicuta was too small to have done it. Be it observed, that opium and blisters had been diligently employed before *with no benefit, the patient daily getting worse.* Did they acquire a new power when "too small" doses were administered?]—Journal de Sociedade das Sciencias de Lisboa. Tom. ix. 1° Semestre de 1839. Extracted in the Zeitschrift fur die Gesammte Medicin. Von F. W. Oppenheim. No. 11. November, 1842.

The Muriate of Tin in Chorea—By Dr. Person.

A girl 11 years old, after a dreadful fright, became affected with headache, and occasional twitches of the angle of the mouth and extremities of the right side of the body, which gradually increased in frequency, until at length they became constant during her waking hours. As the examination of the spine shewed that there was considerable tenderness between the 2d and 6th cervical vertebræ, twelve leeches were applied, and ungt. merc. rubbed in near the sensitive part, and calomel and zinc powers prescribed. On the 12th, salivation occurred, and the calomel was supplanted by hyosciamus. Leeches were again applied, and afterwards a blister. Notwithstanding these active measures the disease got worse, and the blister seemed to aggravate the excitement. Upon this, Dr. Person determined to try the *murias stanni*, as recommended by Dr. Schlesinger (Hufel. Journ. 1837,) and began with the one-sixteenth of a grain as a dose, morning and evening, gradually increasing the amount until he gave one-fourth of a grain twice a day. After the very first small dose, improvement appeared, which almost hourly advanced. By the tenth day, after the patient

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had taken altogether five grains of the muriate of tin, all the convulsive symptoms were gone, and she was perfectly recovered. This medicine effected the cure without producing any re-action,—it occasioned neither primary aggravation (according to Fischer,) nor dryness of the mouth (according to Schlesinger,) but seemed to operate as a pure sedative, quieting the powerful excitement of the nervous system, to which, perhaps, the previous antiphlogistic treatment might have contributed.—Oester. Med. Wochenschrift, No. viii., 1843, p. 216.

[Had Dr. Person consulted Hahnemann's Materia Medica, he might perhaps have been induced to try the muriate of tin at first, instead of at last; and thus the patient might have been saved the blood letting and the blistering. He would also have found the occasional aggravations, and the other symptoms of the action of the medicine that have been observed, explained.—Editors.]—British Journal of Homœopathy.

Chronic Bronchitis.

Cough and expectoration, but no pain produced by pressure on the intervertebral spaces between the last cervical (7th) and first dorsal vetebræ.

℞. Hard Bal. Copa, and Cubebs ʒiiiss, Ext. Hyos. ʒss. Make 100 pills. Dose 1 pill 3 times a day—after eating.—*Specific.*

—

Cough.—*Troublesome at night.* ℞. Solu. Morphine ʒj. Syr. Bal. Tolu. 2 oz. Mix. Dose a tea-spoon, at night on going to bed.

—

Hawking—*with expectoration.* Tubercular disease of the throat.

—

Hooping Cough.—℞. Cochineal pulv. 10 grs. Cream Tartar 30 grs. Sugar 1 oz. Hot water, half a pint. Mix. Dose—a tea-spoon 3 times a day—*Specific.*

Purpura Hemorrhagica.

℞. Creosote half a minim (drops), alcohol a sufficient quantity to suspend it in an ounce and a half of mucilage, to be taken every six hours.

In cases where the gums are bleeding, the following may be used frequently as a gargle. ℞. Creosote, half a drachm; alcohol, a sufficient quantity to unite it with twelve ounces of water.

Increase of Knowledge.

A Professor of one of the Medical Colleges in this city, in his introductory lecture to the students of medicine, has announced the brilliant discovery of the important fact, that the uniform curative effects of a remedy in any disease, was no evidence of its applicability to the case; from which it would seem to follow by a strict parity of reasoning, that the fatal effects of a prescription are no proof either of its perniciousness or of the ignorance of the physician!—a conclusion, which if not very gratifying to the friends of the patient, cannot fail of being extremely consolatory to the practitioner.

The Magnetic Poles and the Moon.

In 18½ years the magnetic poles of the earth and line of no variation advance from east to west 10°, in which time the moon's *nodes* perform an entire revolution in their *retrogade* motion from east to west. In 3 times 18½ or 55½ years, these poles and line of no-variation advance 30° in which time the nodes perform 3 revolutions. In 3 times 55½ or 166½ years, these poles and line of no-variation advance 90°, in which time the nodes perform 9 revolutions. In 4 times 166½ or 666 years, these poles and line of no-variation perform an entire revolution of 360°, in which time also the nodes perform 36 revolutions. These numbers are all perfectly exact, as expressions of mean or true time and motion, and are applicable to the magnetic clock-work of the whole solar system, which shows that the retrogade motion of the moon's nodes is the consequence of the motion of our magnetic poles, at the same time that these poles are moved around the earth by the magnetic forces from the sun. It will be recollected by some of the readers of this Journal that in our Astro-Magnetic Almanac, for 1843, we demonstrated the annual rate of motion, and time of revolution of these poles and line of no-variation; a work which should have been continued for the present year, but which has been superseded by the claims of this Journal upon our time.

☞ City Hall, New York Jan. 1, 1844. Lon. 74° 01′ 08″ W.—Lat. 40° 42′ 40″.—Variation, 6°33′ 11″ W.

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