

# THE DISSECTOR.

Vol. II.

NEW-YORK, APRIL, 1845.

No. II.

## FALLACIES OF THE FACULTY.

*Lectures Delivered at the Egyptian Hall, Piccadilly,  
London. 1840.*

By S. DIXON, M. D.

## LECTURE V.

MEDICAL DOCTRINES, OLD AND NEW—GOUT

—RHEUMATISM—CUTANEOUS DISEASE—

SMALL POX—PLAGUE—YELLOW FEVER—

DYSENTERY—DROPSY—CHOLERA.

GENTLEMEN,

When a young man has run the usual course of study at a university, he thinks he has learned everything worth knowing. But herein he grievously mistakes; for if we may trust Lord Bacon who had no interest in the matter, rather than the Professors who have, we shall find that "in the UNIVERSITIES all things are found *opposite* to the advancement of the sciences; for the readings and exercises are here so managed, that it cannot easily come into any one's mind to think of things out of the common road; or if here and there one should venture to use a liberty of judging, he can only impose the task upon himself without obtaining assistance from his fellows; and if he could dispense with this, he will still find his industry and resolution a great hindrance to his fortune. For the studies of men in such places are confined and pinned down to the writings of certain authors; from which, if any man happens to differ, he is presently represented as a disturber and innovator."

Gentlemen, in this passage you at once see the reason why Medicine has progressed so little from the time of Hippocrates to the present. Every person who has in any way improved the practice of physic has had to repent it. Harvey lost his business by discovering the circulation of the blood; Lady

Mary Montague suffered in her reputation for introducing the small-pox inoculation; and Jenner for a long period of his life was victimized for the still greater improvement of the Vaccine. His moral character was for years at the mercy of the most venal and corrupt members of the profession. "Such," in the words of Milton, "are the errors, such the fruits of misspending our prime youth at schools and universities, as we do, either in learning mere words, or such things chiefly as were better unlearned." So far as they relate to Medicine, the doctrines of the schools have been a succession of the grossest absurdities. Let us briefly review a few of the most prominent.

For several ages the state of the **BLOOD** was held to be the cause of all disease—no matter how the disorder originated. Had you a shivering fit from exposure to cold or damp, the "Blood" required to be instantly purified,—a fever from a bruise or fall, the only thought was how to sweeten "the Blood;" nay, were you poisoned by hemlock or henbane, "the blood" or its blackness was the cause of all your sufferings—and the chief anxiety was how to get rid of it. It never occurred to the physicians of that day that the blood was an indispensable part of the economy, or that "black blood" was better than no blood at all,—so on they bled and continued to bleed while a drop would flow from the veins. When their patients died, it was all owing to the accursed "black blood" that still remained in the system! How to get the whole out, was the great subject of scholastic disputation, and treatises innumerable were written to prove that it might be done. In progress of time, another doctrine arose, namely, that all diseases first originate in the *Solids*, and many were the partizans that took it up; so that for several centuries the fluidists and solidists divided the schools, and, like Guelph and Ghibelline, ranged themselves under their respective leaders. What medi-

cal man is ignorant of the wars they waged, the ink they shed, and the eloquence they wasted upon the still unsettled point whether the solids or the fluids ought to bear the blame of first imparting disease to the constitution!

But to turn from these to the doctrines of more modern schools. The chief feature in the professional notions of the day, is the assumption that all diseases may be traced to the "inflammation" or other theoretical state of a given portion of the body, one School taking one organ—another, another; but why should I say ORGAN? seeing there are professors who exclusively patronize a given TISSUE, and others a given SECRETION even;—which *One* thing, after they have wrapped it round in mummery and mysticism, they gravely proceed to magnify into the very Daniel O'Connell of every corporeal disturbance! Exposure to cold and heat, the mid-night revel, and the oft-repeated debauch—any, or all of these may have injured your constitution. This, of course, you already know and feel; so you wish to have the sense of your physician upon it. And what does he do? Why, he takes you by the hand, counts, or affects to count, your pulse, looks at your tongue perhaps, and then, with a seriousness becoming the occasion, he tells you, your "*Stomach* is wrong;"—and so far, so true, as your own want of appetite and sensation of nausea abundantly testify. But as if this were not enough, and more than enough, he must proceed to tell you the *cause* of your disease; and what does he say that was? Being a "*stomach* doctor," of course he says, "*the stomach*" again. "*The stomach*," he tells you, is the cause of all;—your headache, tremor, and blue devils, all proceed from "*the stomach*!" But herein, if I mistake not, the doctor falls into the same error as the man who, on seeing a house in ruins, should point to one of the broken bricks, and saddle it with the whole amount of mischief; when, in reality, it was only one of many coincident effects produced by agency from without, such as accident, time, or tempest.

For a considerable space, the Stomach held undisputed sway in the medical schools,—John Hunter having contributed much to bring it into fashion. His pupil Abernethy afterwards coupled the whole alimentary canal with it, under the name of the "*digestive organs*;" and for a time nobody dared to dispute his dictum that derangement of the digestive organs is the cause of all disease. Some other partialist would have it, however, that "*the Liver*" is the great source of all ailments—and a very convenient substitute this organ became, for not

only did it save the physician the trouble of thinking, but the patient, by constantly directing his mind to it, very soon found out that the liver was the only organ of the body worth a moment's cogitation. Oh! "*the liver*" has put a great many fees into the pockets of the faculty, and might continue to do so still, but for Laennec's invention, the stethoscope.—Adieu, then, to the liver, and adieu to the stomach and digestive organs! for, from the moment people heard of this instrument, the *Heart* and *Lungs* eclipsed them all. We have no liver and digestive organs in these days,—we have only "*the heart*" and "*lungs*;" and these, as the world wags, are always in such a state—in such a deplorable condition of disease and danger, that Heaven only knows for what end they were given us, unless it be that our bodies were

—intended

For nothing but to be mended!

—in other words, were expressly created for the benefit of the next-door neighbor the apothecary! Never was there such a catalogue of disease as these organs have entailed upon us;—but the curious thing is, that nobody knew it until Laennec made the discovery by means of the stethoscope. Since then, leech, lancet, cupping-glass, and purge have followed each other with unexampled rapidity; but whether the "*fits*" and "*sudden seizures*," which now-a-days carry off so much mortality, be the effect of these very safe and gentle remedies, or of the "*Heart-disease*," under which the doctors, in their innocence, are pleased to class them, I leave to persons of common sense and common discrimination to decide. One thing is certain, physicians have made a great professional stride since the days of Molière—for whereas in his time the only organ they ever thought or theorized about was the lungs; now, thanks to the stethoscope, they have got the heart, with its valvular and vascular apparatus, to the bargain. So much for organs, Gentlemen;—let us now speak of tissues. To be chronologically correct, we must first take the "*Skin*"—for of skin, and nothing but skin, our bodies at one time would appear to have been entirely constructed. The skin was the medical rage and the doctors were very certain they had made a great discovery, when they turned their attention to it. Derangement of the skin explained every thing in existence, and many other things besides; whatever your sufferings, the answer was always the same, "*The skin, Sir, the skin*!"—The skin solved every possible difficulty, and if patients were pleased, why undeceive them? Sick men do not reason—

you must therefore treat them like children ; and he who can best impose upon their credulity is sure to become the popular physician. The skin, however, had a pretty long run ; but, like its predecessors, it was destined to fall in its turn—to be supplanted by another tissue, “ the *Mucous Membrane*.” —In the hands of Broussais the mucous membrane first rose to eminence. Bustling, active, ready, he first pushed it into notice ; and so skilled was he in all the arts of scholastic juggling, that not only did he parry every blow aimed against his favorite theme by the skin supporters, but he at last obtained for it so great an influence in the sick-room, that no patient of importance could be put to death legitimately till he had first been called in to prescribe something for the “ mucous membrane.” Broussais thus became the French medical dictator, and the “ mucous membrane” the French ruling doctrine. Carried by his numerous partisans and disciples into every commune in France, the “ mucous membrane” at last found its way into England, where it was taken up by the late Dr. Armstrong—and an excellent stepping-stone it proved to him in practice. Every body came to hear what he had to say of the “ mucous membrane.” You could not have an ache in your back, or a cramp in your leg, but the “ mucous membrane” was at fault ; nay, had you a pimple on your nose, or a pain in your great toe, it was still the “ mucous membrane !” Nor is this doctrine even now quite exploded. How many of the various secretions have run this gauntlet of accusation, it would be unprofitable to do more than allude to. The Perspiration was at one time much in vogue, and “ checked perspiration” the reply to every inquiry—our grandmothers use the phrase occasionally still ; though some of them betray a leaning to the system of the Water-doctors, a class of persons who only needed to inspect your urine to find out a cure for your complaint. Many curious stories come to my mind in connection with this ;—but the subject is too grave to be trifled with—let us therefore pass from that to “ the *Bile*”—the mysterious cause of so much offending. How many difficulties has not this secretion mastered ? How many has it not made where none existed before ? You derange every organ and function of your frame by intemperance—“ the bile,” not the wine, is the criminal ! You have headache from hard study, it is still “ the bile ;”—the palpable and obvious agencies going for nothing, while one of many effects produced by a common cause, is absurdly singled out as the father and mother of the whole !

I have still to notice another school of physicians, who ring the same changes upon a word, which having no very definite signification itself, may therefore signify anything they have a mind, without in the least committing them in the opinion of the public. Rheumatism, Gout, Scrofula, Scurvy—what is the meaning of these terms ? They are synonymous simply, having all a common import, fluidity or humor. In Rheumatism, we have merely a derivation from the Greek verb, (*Rheo*, I flow,) and Shakspeare used it in its proper sense when he said,

Trust not these cunning *waters* of his eyes,  
For vilian y is not without such *Rhum*.

Then, as regards Gout, what is it but a corruption of the French word *goutte*, a “ drop.” And this perhaps some of you may think not so bad a name for a class of symptoms which frequently proceed from “ a drop too much”—but that is not what doctors mean by the term. Gout with them is merely a fanciful “ humor.” Scrofula in Latin, and Scurvy in Saxon, have the same signification, namely, a “ dry humor.” Only think of dry humidity, Gentlemen,—and the confusion of tongues during the building of Babel, will readily occur to you as a type of the language in which medicine is even now taught in most of our schools ! Some German physicians of the present day tell us that scrofula has taken the place of scurvy in the European constitution. But this is only one of the many modes in which professors play at “ hide and seek” with words. The Diseases Continental doctors formerly termed Scurvy, they now term Scrofula, and Heaven only knows what the doctors of after times will call the same corporeal variations before the world comes to an end ! So much, Gentlemen, for the “ Humoral school”—a school that impressed upon its disciples a doctrine of purgation scarcely less fatal than the sanguinary practice of the present pathologists. In fact it is the identical system of “ Morrison, the hygeist,” and all those quacks, who, by their determined perseverance in purging away a fancied “ impurity of the blood,” have too often purged away the flesh and the lives of their credulous victims. Do people at this time of day require to be told that you may purge a healthy man to death !—that by any class of purgatives, whether vegetable or mineral, you may so disturb every action of the body—may so alter every corporeal structure and secretion, that no one shall be of natural consistence or appearance ! By the eternal use or rather abuse of any purgative you please, in a previously healthy body, you may so change the alvine secretions, that they shall take the form of any “ impurity”

you fancy—and for this impurity of your own creation you may, day by day, and week by week, purge and purge till you have brought your patient to the state of inanition which constitutes, as I shall in the course of this lecture explain to you, the disease termed “Ship Scurvy.” See, then, the effect of that humoral doctrine! But even this kind of folly appeared too simple to some teachers, and these taxed their invention to make nonsense compound. Who has not heard of Rheumatic Gout?—and who will be so bold as to deny its existence? Yet, what is it but a self evident absurdity! Its literal meaning is “fluid fluidity.” You might as well call an injury from fire, “a ignes-eous burn!” Gentlemen, does such jargon convey to your minds the most distant idea of the true motions which take place in the body in the course of any one disease? How then can you wonder at men of observation laughing at the whole medical profession? It is only a fool or a physician who could be duped for a moment by such puerility; and Lord Stowel was right when he hinted a man might be both at forty.—“When youth made me sanguine,” says Horace Walpole, “I hoped mankind might be set right. Now that I am very old, I sit down with this lazy maxim, that unless one could cure men of being fools, it is to no purpose to cure them of any folly, as it is only making room for some other.” This I believe was said in regard to religious doctrines—but that it applies equally well to medical doctrines, may be seen from a statement of Sir William Temple:—“In the course of my life,” he says, “I have often pleased or entertained myself, with observing the various and fantastical changes generally complained of, and the remedies in common vogue, which were like birds of passage, very much seen or heard of at one season, and disappeared at another, and commonly succeeded by some of a very different kind.—When I was very young, nothing was so much feared or talked of as rickets among children, and consumptions among young people of both sexes. After these the spleen came into play, and grew a formal disease. Then the scurvy, which was the general complaint, and both were thought to appear in many various guises. After these and for a time, nothing was so much talked of as the ferment of the blood, which passed for the cause of all sorts of ailments, that neither physicians nor patients knew well what to make of; and to all these succeeded vapors, which serve the same turn, and furnish occasion of complaint among persons whose bodies or minds ail something but they know not what; and among the

Chinese, would pass for mists of the mind or fumes of the brain, rather than indispositions of any other parts. Yet these employ our physicians more than other diseases, who are fain to humor such patients in their fancies of being ill, and to prescribe some remedies, for fear of losing their practice to others that pretend more skill in finding out the cause of diseases or care in advising remedies, which neither they nor their patients find any effect of, besides some gains to one and amusement to the other. As Diseases have changed vogue, so have Remedies, in my time and observation. I remember at one time the taking of tobacco: at another, the drinking of warm beer, proved universal remedies—then swallowing of pebble stones in imitation of falconers curing hawks. One doctor pretended to help all Heats and Fevers by drinking as much spring water as the patient could bear; [Priessnitz’s plan?] at another time swallowing up a spoonfull of powder of sea biscuit after meals, was infallible for all indigestion, and so preventing diseases. Then coffee and tea began their successive reigns. The infusion of powder of steel has had its turn; and certain drops of several names and compositions. But none that I find have established their authority, either long, or generally, by any constant and sensible successes, but have rather passed like a mode which every one is apt to follow, and finds the most convenient or graceful while it lasts, and begins to dislike in both these respects when it goes out of fashion. Thus men are apt to play with their healths and their lives as they do with their clothes; which may be the better excused, since both are so transitory, so subject to be spoiled with common use, to be torn by accidents, and at last to be so worn out.—Yet the usual practice of physic among us runs still the same course, and turns in a manner wholly upon evacuation either by blood-letting, vomits, or some sorts of purgation; though it be not often agreed among physicians in what cases or what degrees any of these are necessary, nor among other men whether any of these are necessary or no. Montaigne questions whether purging ever be so, and from many ingenious reasons. The Chinese NEVER let Blood.”

Gentlemen, you now see the correctness of a remark of the late Dr. Gregory, that medical doctrines are little better than “Stark staring absurdities.” And God forgive me for saying it, but their authors, for the most part have been very nearly allied to those charlatans and impostors, who

—wrap nonsense round  
In pomp and darkness, till it seems profound;

Play on the hopes, the terrors of Mankind  
 With changeful skill; \* \* \*  
 While Reason, like a grave-faced mummy,  
 stands  
 With her arms swathed in hieroglyphic  
 bands.

MOORE.

As for the Schools, at this very moment, the whole regime of medical teaching is a system of humbug, collusion, and trick—embracing intrigue and fraud of every kind, with the necessary machinery of Periodical Journals, and Reviews, by which the masters are enabled to keep down truth, and mystify and delude the student and country practitioner at their pleasure. In physic, now as formerly, the very clever world

—bows the knee to Baal,  
 And hurling lawful GENIUS from his  
 throne,  
 Erects a shrine and IDOL of its own,—  
 Some leaden Calf—

who by virtue of his puppet position, maintains a reputation and a rule in matters medical, to which neither his merits nor his learning in the very least entitle him;—nevertheless he reigns the Esculapius of the day, and it is only in the next age that,

—the vulgar stare,  
 When the swollen bubble bursts and all is  
 air!

But Gentlemen, what do the faculty of our own time mean by the term

GOUT?

What do they mean by it? You may ask them that indeed. Crabbe, who studied physic, but left the profession in early life to take orders, when describing some of the doctors of his day, among other things, tells us,

One to the Gout contracts *All* human  
 pain,  
 He views it raging on the frantic brain,  
 Finds it in fevers all his efforts mar,  
 And sees it lurking in the cold catarrh.

Gout, then, may be any thing you please; for according to received opinion, this offspring of Nox and Erebus, this vox et preterea nihil, takes shapes as many and Protean as there have been authors to treat of it—This much I may venture to tell you, that nothing will so soon help a man to a chariot as to write a book with Gout for its title—for being supposed to be a disease peculiar to aristocracy, every upstart is fain to affect it.—You cannot please a mushroom squire, or a retired shopkeeper better, than by telling him his disease is “Gout”—“Gout suppressed”—“Gout retrocedent”—“Gout in this place, or “Gout” in that! And what is Gout?—

—Of all our vanities the motliest—  
 The merest word that ever fooled the ear,  
 From out the schoolman's jargon!—

BYRON.

In sober seriousness, is there such a disorder as Gout? Gentlemen, as a “counter to reckon by,” you may use the word; having first so far made yourselves acquainted with its real meaning that nobody shall persuade you that it is in itself anything but a piece of hypothetical gibberish, invented by men who knew as little of Disease and its nature as the tyros they pretend to illuminate. When a Lady or Gentleman of a certain age complains to you of a *painful swelling* in some of the *small joints* of the hand or foot, you may say, if you please, that such patient has got the Gout. If the same kind of swelling should appear in the knee or hip-joint, or take the shape of an enlarged gland or a rubicund nose, you must then change your phrase; and you may easily exhaust a volume in pointing out the differences betwixt them. But as neither this kind of disquisition, nor the baptizing your patient's disease by one name or another, can in the very least help you to cure it, I may just as well explain to you that this swelling, like every other malady incident to man, is not only a development of constitutional disease, but comes on in fits or paroxysms. Now, Gentlemen, you will find this fit in one case perfectly periodic and regular in its recurrence; in another less determinate as to the time of its approach. The result of repeated paroxysms, as in other diseases where great heat and swelling take place, must be a tendency to decomposition, and in this instance, the product for the most part is a deposit of chalky or earthy matter. In that case nobody will dispute the name you have given to the disorder; but should the result of the decomposing action be purulent matter or ichor, instead of chalk or earth,—which neither you nor anybody else can know beforehand,—you must not be astonished if a rival practitioner be called in to give the disease another soubriquet,—to christen it anew by some other phonic combination full as indefinite as the first, and which may thus serve you both to dispute about very prettily from one end of the year to the other, without either of you becoming a whit the wiser! You see, then, that the only difference betwixt what is called “Gout,” and what is called “Inflammation,” is, that the result of the morbid action in the former case, is *earthly* instead of purulent deposit a solid instead of a fluid product. Now, this difference may be accounted for, partly by hereditary predisposition, and partly by the age of the respective subjects of each. Young plants contain

more sap than old ones; the diseases of both must therefore in some points vary; for though in the blood of the old or middle-aged man we find the same elemental principles as that of infancy and youth, from these being in different proportions, the results of decomposition must *mutatis mutandis*, be different. What are the CAUSES of GOUT? One writer says one thing; another, another. Dr. Holland, Physician Extraordinary to the Queen, is among the latest who has written upon the subject, and he says the cause is "a morbid ingredient in the blood;"—nay, he says, "it cannot be denied." Still, not only do I presume to dispute the dictum, but I challenge him to bring forward a title of proof in support of it. His whole doctrine of Gout, I apprehend, is a fallacy; for if you enquire, the patient will tell you that he took too much Wine the night before his first fit; or that he had got Wet; or had been exposed to the East Wind; or had been vexed by some domestic matter. From which you see, the causes of Gout are any thing and every thing that may set up any other disease,—Small-pox and the other Contagious Fevers of course excepted. A paroxysm of Gout has been actually brought on by Loss of Blood and also by a purge, for which statement, if you will not believe me, you may take the authority of Parr and Darwin. What, then, is the remedy? If you ask me for a Specific, I must again remind you there is no such thing in physic; and what is more, the man who understands his profession would never dream of seeking a specific for any disorder whatever. No, the remedies for Gout are the same as cure other diseases; namely, attention to temperature during the Fit, and the exhibition of the chrono-thermal or ague medicines during the Remission;—for we have seen that, like the ague, it is a periodic disorder, and such is the description of it given by Sydenham, who was half his life a martyr to it;—to say nothing of Dr. Samuel Johnson's explanation in his dictionary. That it comes on like the ague with cold shiverings, the experience of almost every case will tell you; but as your minds may be too much occupied with school theories to mark that fact for yourselves, I will give it to you in black and white in the words of Darwin. Speaking of some cases of the disease, he says: "The patients after a few days, were both of them affected with cold fits like ague-fits, and their feet became affected with Gout." To meet it in a proper manner you must treat the disease purely as an ague. With quinine, arsenic, opium, and colchicum, I have cured it scores of times, and truth obliges me to say I have in some cases failed with all. Now

what can I say more of any other disease? Every day you hear people talk of the "principle" of a thing, but really without knowing what they are talking about. The true meaning of the word principle is UNITY—something simple or single to which you may specially refer in the midst of an apparently conflicting variety. That a perfect unity of type pervades all the variations of disease is indisputable, and of the correctness of a unity or principle to guide your treatment there is as little doubt. What, then, are all your school-divisions but "flocci, nauci, nihili, pili!" I shall now give you a case or two which may perhaps suffice to show you my treatment of Gout.

Case 1.—Colonel D—, aged 60, had a fit of Gout which came on every night, and for which leeches and purgation had been ineffectually prescribed, before I was called in. I ordered a combination of quinine and colchicum, but as this did not stop the fit, I changed it for arsenic, after taking which the patient had no return.

Case 2.—Captain M—, aged 56, had a fit of Gout which recurred every night during his sleep. I prescribed arsenic without effect; I then gave him quinine, which acted like magic. The same gentleman, twelve months after, had a recurrence, but was much disappointed, on resuming the quinine to obtain no relief. I then prescribed arsenic, which, though it failed the year before, this time perfectly succeeded!—a lesson to such as would vaunt any remedy as a specific for any disease.

The influence of the Passions in causing or curing gout is well known. One of many cases so cured comes just at this moment to my mind. A clergyman was laid up with a severe attack of the Gout—his wife having heard of the effects of Surprise in cases of the kind, dressed up a large hare in baby-clothes, and brought it to his bed-side, telling him how fearfully changed their child had become. The old gentleman eyed the animal with a look of terror, sprung out of bed, and comp'ned of his foot no more!

Now, Gentlemen, as gout, like Ague, is a remittent disease, and curable in the same manner,—whether by mental or physical agency,—what right have we to assume that its cause is a "morbid ingredient in the blood," any more than the cause of ague is? Still, we shall suppose for a moment that it is the effect of a 'morbid ingredient in the blood,' what, then, let me ask, is this morbid ingredient doing all the time of remission? Does it sleep or wake during this interval of immunity?—and how comes it that arsenic, quinine, and colchicum so often neutralise its effects—while purgation and blood-letting

in too many instances, produce a recurrence? In a word, is not this "morbid ingredient in the blood" a mere crotchet of Dr. Holland's brain—a goblin—a phantom—that, like other goblins and phantoms, disappears the moment the daylight comes in?

Having stated my reasons for dissenting from Dr. Holland's hypothetic view of the cause of gout, it may not be out of place here to request your attention to some points of infinitely greater importance, upon which that physician and myself, by some curious fatality, maintain a remarkable COINCIDENCE of opinion. I quote the following passages from his *Medical Notes and Reflections*.

"Has sufficient weight been assigned in our pathological reasonings to that principle which associates together so many facts in the history of disease, namely, the tendency, in various morbid actions, to distinct intermission of longer or shorter duration, and more or less perfect in kind?" "The subjection of so many diseased actions to this common law, establishes relations which could not have been learned from other sources, and which have much value even in the details of practice."

Again he says, "It will probably be one of the most certain results of future research, to associate together, by the connexion of causes of common kind, diseases now regarded as wholly distinct in their nature, and arranged as such in our systems of nosology. This remark applies very widely throughout all the genera of disease." "We can scarcely touch upon this subject of Fever (particularly that which our present knowledge obliges us to consider as of idiopathic kind,) without finding in it a Bond with which to associate together numerous forms of disease but withal a knot so intricate, that no research has hitherto succeeded in unravelling it."

Now, what does Idiopathic mean? It means peculiar or primary—in opposition to symptomatic disease, or disease of long standing. The profession, then, according to Dr. Holland, and he is right, have been perfectly in the dark in regard to the beginning of any disease. The "knot" they have for so many centuries been trying to unravel, I hope he, they, and every body else will now consider as completely untied, but not, as I shall in a few minutes prove, in consequence of Dr. Holland's prediction.

When speaking of the Influenza and other Epidemics, Dr. Holland says: "I may briefly notice the singular analogy to the milder forms of Typhus and Intermittent Fever which these epidemics have occasionally presented." Why he puts Typhus before Intermittent fever, I know not; but this I do

know, that except where badly treated, the Influenza seldom takes the typhoid shape. However, Dr. Holland admits he has prescribed Bark in the Influenza with very great advantage.

On the subject of Temperature, the same physician thus speaks: "The patient may almost always choose a temperature for himself, and inconvenience in most cases, positive harm in many, will be the effect of opposing that which he desires, his feelings here is rarely that of theory, though too often contradicted by what is merely such. It represents in him a definite state of the body, in which the alteration of temperature desired is that best adapted for relief, and the test of its fitness usually found in the advantage resulting from the change. This rule may be taken as applicable to all fevers, even to those of the exanthematous kind." By which term medical men understand small-pox, chicken-pox, measles, and scarlet-fever. Some include the plague.

Dr. Holland asks: "Is not depletion by blood-letting still too general and indiscriminate in affections of the Brain, and especially in the different forms of Paralysis? I believe that the soundest medical experience will warrant this opinion. The vague conception that all these disorders depend upon some inflammation or pressure which is needful to remove, too much pervades and directs the practice in them, and if the seizure be one of sudden kind, this method of treatment is often pursued with an urgent and dangerous activity." "Theory might suggest that in some of these various cases, the loss of blood would lead to mischief. Experience undoubtedly proves it, and there is cause to believe that this mischief, though abated of late years, is still neither infrequent, nor small in amount." It is now the fashion of the Eminent and their herd of followers to say, "Oh, there has certainly been too much bleeding;" and "Oh, we don't bleed as we used to do;" but it is not so convenient for them to tell who opened their eyes to their errors.

Now, Gentlemen, if any of you be disposed to question by whose influence this abatement of mischief was principally brought about, I may suggest that, from numerous letters I have received from medical men, long before Dr. Holland's volume first appeared, my writings must at least have contributed to it. Dr. Holland's work, from which I quote, was published by Messrs. Longman and Co. in 1839. Mark that date, and mark also, if you please, that it was in the year 1836, three years before, that the same Publishers brought out the *Fallacy of the Art of Physic as taught in the Schools*, wherein I stated:—

1. "We hope to prove even to demonstration, that Fever, remittent or intermittent, comprehends every shape and shade which Disorder can assume."

2. "That many cases of Disorder have been observed to partake of the nature of Remittent Fever, and to derive benefit from the modes of treatment adapted to that periodic distemper, we are sufficiently aware. But we have yet to learn that any author, ancient or modern, has detected that type, and advocated that treatment in every shade and variety of disease."

3. "That attention to Temperature is the end to all medicine."

4. "That Blood-letting might be advantageously dispensed with in all diseases, even in Apoplexy."

Gentlemen, some of you may have read an anecdote of Dennis the Critic. Having invented a new mode of producing theatrical thunder, he submitted his discovery to the managers; but their high mightiness only affected to laugh at it. Some weeks afterwards, he went to see a play, in which there was a thunder scene. "Now thought Dennis, is my turn, now can I afford to laugh at their thunder as much as they laughed at mine;" but judge his surprise when, instead of farcical squall he expected, his ears were saluted with a thunder as terrible and as true as the "hurly-burly" of his own invention. Perceiving, in an instant, the trick that had been played him, he cried aloud. "By G—! that's my thunder!" This or something like this, always excepting the irreverent adjuration, was the sentiment that escaped me when I first perused the passages I have read to you from the Medical Notes and Reflections. "These are my doctrines," I said; "aye, the identical doctrines which Dr. James Johnson, physician-extraordinary to the King deceased, two years before, stigmatized as a Pyrexia-mania, or Fever-madness. How will he receive them now, now that they are patronized a second hand by an F.R.S. and a physician extraordinary to the Queen that reigns?" That was my exclamation, and how did he receive them, Gentlemen? Oh! he praised Dr. Holland to the skies; said he was this, and said he was that; and concluded by telling us that "it is impossible to lay down his book without an acquiescence in the decision of the public, which has placed him in the first rank among the practical physicians of the capital; adding, moreover, that "his bearing towards his brethren is fair and open, and his candid mind, instructed by liberal reading and polished by society, is willing to allow their need of merit to all." But not a syllable did Dr. James Johnson

say in condemnation of Dr. Holland's prophecy, that "Fever" would one day be found to be "the Bond with which to associate together numerous forms of disease;" nor did he remind him that when that prophecy was actually fulfilled by me to the letter years before Dr. Holland took the trouble to make it, he, Dr. James Johnson ridiculed it as a Fever-madness! Gentlemen, if, in the course of his "liberal reading," the Author of the Medical Notes and Reflections never saw the Fallacy of the Art of Physic as taught in the Schools! Nor the Review of it by his patron Dr. Johnson; Nor Dr. Conolly's equally honest criticism of it! Nor the controversy in the *Lancet*, to which the former gave rise! Nor heard in "society" the remarks made by the laughter-loving part of the profession, when that controversy was concluded! Nor met with the Unity of Disease! Nor the many Reviews that were written upon it!! You must acknowledge the coincidence to be curious, startling!!! And, further, you must admit that this coincidence affords another of many proofs of the truth of a discovery, which, when Dr. Holland, with the candor, I am willing, in common with Dr. Johnson, to allow him, takes into account dates, facts and other similar trifles, I hope he will, in return, permit me now, henceforth and forever, to call MINE! Meantime, I have much pleasure in availing myself of the testimony of a physician so eminent, in favor of its "value, even in the details of practice."

[Shortly after the above observations made their appearance in print, Dr. Holland addressed to me a letter in "explanation." The correspondence which followed I am not quite at liberty to give, as the Doctor expressed a wish that his communications should be kept private. This much I may, however, state, that though couched in very polite, very diplomatic language, the explanation afforded by his letters did not appear to me to be any explanation at all. His observation might apply to this, that, or the other, or anything else! How green Dr. Holland must have thought me when he imagined he would tie up my hand with his "private" letters. But seriously, if he intended to do more than shuffle me out of my discoveries, why did he send a "private" answer to my published charge, or insinuation, if he like it better. The concluding paragraph of his last letter is so adroitly worded, that with, or without his leave I must quote it. "It gives me pleasure to know that you find anything of truth or useful suggestion in what I have published. And I shall be gratified by any opportunity



which may hereafter occur of talking with you on these subjects, of common interest to us, out of print, [no doubt! Ever, my dear Sir, yours faithfully, H. HOLLAND." Now I should like to know which is the "suggerster" here, I who first published the discovery, or Dr. Holland, who three years afterwards printed it in a phraseology only slightly altered? "New truths of a higher order," says an enlightened physiologist, "and of which the connection is not seen with common and hackneyed doctrines, are scouted by all, and especially sneered at, denied, and abused by the base creatures who have just sense enough to see there really is something in them, who have just ambition enough to make them hate one who appears to know more than they do,—and who have just cunctation, the doctrines at first denied are subseining or skill enough to bias minds yet weaker than their own. To crown suitably such proquently pilfered with all the little art of which such minds are capable." Alexander Walker on the Nervous System, "to which is prefixed some account of his earlier discoveries, of which the more recent doctrine of Bell, Magendie, &c., is shown to be at once a plagiarism, an inversion, and a blunder."]

From this digression I now turn to

#### RHEUMATISM.

Like Gout, the word Rheumatism conveys nothing beyond the expression of the false theory, which first gave rise to it. But as we are compelled, by long custom, to retain this among other equally unmeaning terms, I may tell you, that the profession of the present day class under it numerous affections of the great joints, particularly such as have come on suddenly, and are attended with much pain and swelling. You will find that these, in every case, have been ushered in by fever fits. The young and middle aged are more liable to rheumatism than the extreme old. Like the gout, it is a remittent disorder, and Dr. Haygarth, long ago, wrote a work illustrative of the value of Bark in its treatment. My own practice is to premise an emetic; this I follow up with a combination of quinine and colchicum. If that mode of treatment fail, I have recourse to opium, arsenic, guaiac, mercury, silver, turpentine, copaiba, arnica montana, aconite or sulphur,—or combinations of them—all of which remedies have succeeded and failed in ague as well as in Rheumatism. In most instances of acute rheumatism, the first combination will be found to answer perfectly; though, in cases of long standing, you may have to run from one medicine and combination of medicine to another, before being able to bring about this desirable termina-

tion;—and it is my duty to confess to you, that in some cases, particularly where either much depletion, or much mercury, or both have been employed—as I grieve to say, they too often are in the primary treatment—you may fail with every means you may devise.

Under the head of Rheumatism, medical men also include certain muscular pains, which occur in various parts of the body, but which are unattended by any apparent morbid structural development. With nitrate of silver and prussic acid, I have often cured these pains; and with the cold plunge bath, I have sometimes succeeded after every other means had failed. Of my mode of treating acute Rheumatism, I will give you two examples.

Case 1.—A young man, aged 25, had been suffering severely from Rheumatism for four or five days before I saw him. At this time, the joints of his wrists and ankles were much swelled and exquisitely painful; his heart labored, and was in such pain as to impede his breathing; his tongue was foul and furred, and he had been occasionally delirious. I ordered an emetic, which was some time in operating, but when it did, the relief was signal. I followed this up with pills containing a combination of quinine, blue pill, and colchicum, and in two days he was sitting up with scarcely any swelling remaining in the affected joints; in two days more he had no complaint.—Not a drop of blood was taken in this case.

Case 2.—A gentleman aged thirty, after exposure to wet and cold, had a shivering fit with fever, in the course of which almost every joint in his body became swollen and very painful. He was bled, leached, blistered, and took mercury to no purpose, before I was called in. I ordered him a combination of quinine, colchicum, and opium, which agreed so well with him, that in three days I found him free from every symptom but weakness, which I presume was as much the effect of the former sanguinary treatment, as of the disease; at any rate, he had certainly suffered very severely. But, Gentlemen, like every other disease incident to man, Rheumatism may not only be cured without loss of blood, but without any phisic at all; and in evidence of this, I will read to you an extract from the writings of Sydenham; "As to the cure of Rheumatism" he says "I have often been troubled, as well as you, that it could not be performed without the loss of a great deal of blood, upon which account the patient is not only much weakened for a time, but if he be of a weakly constitution, he is most commonly rendered more obnoxious to other diseases

for some years, when, afterwards, the matter that causes the Rheumatism [Sydenham, like Hippocrates, was a disciple of the Humoral School] falls upon the lungs, the latent indisposition in the blood being put into motion by taking cold, or upon some slight occasion. For these reasons, I endeavor to try for some other method different from Bleeding, so often repeated, to cure this disease; therefore, well considering that this disease proceeded from an inflammation, which is manifest from other phenomena, but especially from the color of the Blood, which was exactly like that of Pleuritis. I thought it was probable that this disease might be as well cured by ordering a simple cooling, and moderately nourishing diet, as by bleeding repeated, and those inconveniences might be avoided which accompanied the other method; and I found that a whey diet, used instead of Bleeding, did the business. After last summer, my neighbor Matthews, the apothecary, an honest and ingenious man, sent for me; he was miserably afflicted with a Rheumatism, accompanied with the following symptoms. He was first lame in the hip for two days, afterwards he had a dull pain upon his lungs, and a difficulty of breathing, which also went off in two days time, [both remittent,] after which his head began to pain him violently, and presently the hip of the right side which was first seized; and afterwards, according to the usual course of the disease, almost all the joints, both of the arms and legs, were afflicted by turns. He being of a weak and dry habit of body, I was afraid that by taking away much blood his strength before but infirm, would be wholly vanquished, especially the summer being so far spent, it was to be feared winter would come before he could recover his strength, weakened by frequent bleeding, and therefore I ordered that he should feed on nothing but whey for four days. Afterwards, I allowed him, besides the whey, white bread instead of a dinner, namely, once a day, till he was quite well. He, being contented with this thin diet, continued the use of it for eighteen days; only I at last indulged him in bread at supper too; he daily drank eighteen pints of whey, made at home, where-with he was sufficiently nourished. After these days, when the symptoms did no more vex him, and when he walked abroad, I permitted him to eat flesh, namely of boiled chickens, and other things of easy digestion; but every fourth day he was dieted with whey, till at length he was quite well; the inconveniences mentioned above being quite remedied by this method, with which he was grievously afflicted ten years before, bleed-

ing being then used by my order for his cure, and often repeated. If any one shall condemn this method because it is plain and artificial, I would have such a one know that only weak people despise things for their being simple and plain; and that I am ready to serve the public, though I lose my reputation by it. And I will say that I do not at all question, were it not for common prejudice, that the said method might be accommodated to other diseases, the names whereof I conceal at present, and that it would be more beneficial to the sick than the common pomp of Remedies that are used for people when they are just dying, as if they were to be sacrificed like beasts."—But

### THE STONE.

You will doubtless, Gentlemen, ask me whether or not I look upon that also as an effect of intermittent fever? To this question I have only to say, that Stone must be admitted to be a result of morbid urinary secretion. Can any secretion become morbid without the previous occurrence of constitutional (in other words intermittent febrile,) change? Certainly not; then; without such change, how could stone become developed at all?—moreover, are there not times of the day, when the subject of it is better and worse, and this not altogether to be referred to the period of micturition. A "fit of the stone" is as common an expression as a fit of the ague. Drs. Prout and Roget, who have paid much attention to calculary diseases, state, that while medicines styled lithon- triptics exert but little influence in such cases, tonics have almost universally ameliorated the condition of the patient;—and what are the medicines usually termed tonics, but the remedies for ague?

Whether Gout and Rheumatism be remittent diseases or not, or whether they be remarkable for the changes of temperature and action, termed fever, nobody but such as prefer books of nosology to the book of nature and common sense, would be so ignorant as to question. Whether they be varieties of the same disease is another thing; but this I know, they are both first-cousins to ague, and by treating them as such, the practitioner may save himself a world of trouble, and the patient a world of pain, which neither might escape, in adopting the doctrine of the "pathologists," that these are inflammatory diseases, and only to be subdued by leech, lancet, and mercury to salivation. Gentlemen, laugh at the pathologists, and laugh too at their disputations, which, being all about nonsense, can never possibly come to a satisfactory conclusion.

The calculary (gritty) or stony concretions which are occasionally deposited in the different joints during Gout, suggested to medical men, even at an early period, the analogy subsisting betwixt that disease and stone. During constitutional disorders, calculus may be developed in any tissue or structure of the body. Salivary concretions are common; pulmonary calculi I have seen in two instances: in one case they were expectorated by a consumptive female who died; in the other, by a gentleman whose lungs being otherwise organically uninjured recovered his health completely by attending to the temperature of his chest, and by the occasional use of hydrocyanic acid and quinine, which I prescribed for him. This patient had previously consulted two of the best employed medical men in London, one a physician, the other a surgeon, neither of whom held out a hope for him but in a warm climate. Dr. Chalmers and Sir B. Brodie, for these were the practitioners the patient previously consulted, showed in this instance, at least, their good opinion of attention to temperature. How often the liver, gall bladder, and kidney are the seat of stone, I need not tell you. Taking place in the course of an artery, calculus is erroneously termed ossification. I wonder it never occurred to authors to call it the gout! seeing that there is at least, this resemblance betwixt them, that both generally become developed after middle age has marked the subjects of them with her seal.

There are not wanting authors who have traced an analogy betwixt Rheumatism and

#### CUTANEOUS DISEASE—OR

Disease of the skin—and as all disorders are cousins-german to ague, we must give them full credit for their powers of observation—stating, at the same time, our readiness to help them out to a still more comprehensive view of the relationship which subsists betwixt all “the various genera of disease.”

What a fine thing to be able to master the cloud of ridiculous distinctions and definitions by which Drs. Willan and Bateman have contrived to disguise the whole subject of Cutaneous Disorder;—to distinguish, for example, psoriasis from lepra—erythema from erysipelas, diseases only differing from each other in being acute or chronic, or from being more or less extensively developed; all, too, depending upon the same constitutional unity and integrity of state—all more or less amenable to identical agency! Most truly, then, has my Lord Bacon remarked, “Divisions only give us the husks and out-

er parts of a science, while they allow the juice and kernel to escape in the splitting.” What! I shall be asked, is Erysipelas or Rose nothing more than a result of ague—Erysipelas, for which, according to Mr. Lawrence, we must make incisions in the skin, at least a foot long—gashes not quite so short, but quite as deep as sabre wounds! Hear what Sir James Mackenzie says when describing his own case; and the accuracy of his description will scarcely be questioned, if it be remembered that previously to entering upon his legal career, Sir James had not only studied but taken his degree in physic:—“We had an unusually cheerful day,” he says “but just as I was going to bed I was attacked by a fit of shivering, which in the morning was followed by a high fever, and in two days by an erysipelas in the face. The disease went through its course mildly, but it is liable to such sudden turns, (fits;) that one is always within six hours of death.” For the value of quinine or bark in this disease I could cite many authorities, but the candor of Mr. Travers entitles his evidence to a preference. At a meeting of the Medico Chirurgical Society, he is reported to have stated that in “a great many instances (of Erysipelas) he had found the most decided benefit from the use of Bark and other tonics, and which, at the commencement of the disease, he had often seen highly useful in the practice of others, even in cases where he would have employed the antiphlogistic treatment, if the patients had fallen into his own hands.—*Lancet*.”

Every medical man of experience knows that Erysipelas is very often epidemic; in other words, it prevails at a particular time to a greater or less extent among a particular people or class of people. Wherefore it seems to depend upon a peculiar constitution of atmosphere; for during the time it is prevalent in camps or cities, the slightest scratch on the skin will set it up. I have known it follow the application of a blister to the chest, and I remember, when in Edinburgh Castle with the Royals, I was obliged to tell the officer commanding the troops a little of my mind upon the subject of corporeal punishment: one poor fellow had just escaped with his life from the Erysipelas brought on by a flogging. But even at periods when the disease is not epidemic, it may be produced by any one of the thousand things that daily occur in life. Cold and wet are frequent causes; and there are individuals who cannot take mercury in any shape or dose without being liable to an attack of it—nevertheless, I have myself cured many cases with mercury. The best practice, however, is to treat it like other acute

fevers. Begin with emetics and follow them up with arsenic or quinine; this practice will apply to all acute diseases of the skin, by whatever names they may be known or distinguished.

What are the causes of cutaneous disease generally? Every thing that can set up Fever;—and what agent in nature, when abused, may not do that? Cutaneous disease may be produced by mechanical injury even—a blow, or a fall, for example. A friend of mine, who hunts a great deal, has had several falls from his horse, and on each occasion the accident was followed by an eruption all over his skin. I have known eruptions to be a constant effect of the introduction of a bougie into the urethra of a particular individual. What will the gentlemen of the Humoral school say to this? for you know the partizans of that school trace all such diseases to a “morbid ingredient in the blood,” and they look upon eruptions as an effort of nature to expel the “peccant humor.” Be careful, they tell you not to drive it in! Now, what is an eruption but the effect of a tendency to decomposition of the matter entering into a detached portion of the cuticular tissue, so as to produce an arrangement and motion of the atoms composing it different from their motion and arrangement in health? Such caution, therefore, amounts exactly to this: be careful that you do nothing that shall make these cuticular atoms resume their respective places and motions in the economy, so as to resemble the healthy skin! See, then, to what a ridiculous pass the humoral doctrine leads us! When that doctrine was more prevalent than it is at present, cutaneous diseases were very generally classed under the head of “Scurvy;” or Scorbutic; whoever had eruptions on his skin of a chronic character, was said to have the scurvy. Now, if this phrase had been used simply as a sign or “counter to reckon by,” no great harm could have ensued; but like “scrofula,” and the “gout” “Scurvy” in process of time came to perform the part, not of a sign merely, but of a corporeal something—an indefinite entity or essence,—or any thing but a real sense, which, like a will-o-the-wisp, played its “fantastic tricks” now in this part of the body, now in that. Some wise professor made his pupils suppose that he had detected it in the Blood even; and from that moment not only did people believe that Scurvy was a specific disease, but the whole faculty were anxious to discover a specific remedy for it. A specific for what, Gentlemen? for an “airy nothing,” that only existed in the theoretic visions of their own most mystified brains.

You may stare as you please—but this, after all, is the truth. What, then, you will demand, is the disease which doctors call “ship-scurvy!” Now to this most reasonable question, I will endeavor to reply in a reasonable manner. Having been myself for months at sea without landing or seeing land, my evidence may be just as good as that of others who have handled the subject before me. During long and harassing voyages, what from being forced by foul weather to sleep under closed and consequently unventilated decks—what from being obliged to watch and work hard upon a short allowance of food and water—together with the anxiety and depression of spirits produced by “hope deferred,” the men gradually begin to show signs of a constitutional “break up.” You will find them with faces pale and bloated;—their skins rough, rugged, and exhibiting petechiae and haemorrhagic ulcers; their gums weak, spongy, and bleeding; their hair harsh, dry and falling away, and their bowels subject to fluxes; a low fever wastes them day by day and night by night, and they become at last so ill as to faint from the least exertion. This is Ship Scurvy,—not depending upon a something noxious in the blood, but upon a positive want of something essential to its healthy reproduction. And how, think you, is this disease to be cured? By wholesome food and pure air, you will naturally reply. No such thing, Gentlemen; nothing so simple would do for scientific people. It can only be cured by Lemon Juice! Lemon Juice, according to the greatest medical professors is not only a preventive of the bad effects of starvation—but a substitute for pure air and proper food in the cure of diseases produced by a deprivation of both! Now, it is a curious fact in the history of ship scurvy, that just about the time that lemon juice came into fashion as a cure for it, great improvements began to be made in navigation, as also in ship building, and in the ventilating and victualling of fleets; voyages that formerly took up a year, can now be completed in a month or two, and the natural good effects of all this upon the habits and constitution of the seamen are up to this moment, very modestly claimed by the doctors as the result of their employment of lemon juice. And not only are there fools in the world, but philosophers also, who daily echo this trumpery story!

There is not a disorder of the skin, however named, that I have not myself cured with QUININE,—and I have met with examples of every kind of skin disease, that have baffled me with every thing I could

think of. I may here, nevertheless, state in regard to cutaneous disease generally, that I have not very often been at a loss, while I had at my disposal quinine, arsenic, oxymuriate of mercury, hydriodate of potash, creosote, iron, and lead. In a very obstinate case of scalled-head, the subject of which was a young artist of talent, a combination of belladonna and stramonium effected a complete cure in about a fortnight. The disease, in this instance, had been upwards of twelve months standing, and had resisted the prescriptions of some of the ablest men of Dublin and London. Baths, of which I shall afterwards speak, I have also found of great service in diseases of the skin—and what, Gentlemen, do all these remedies come to at last, but to thermal change?

In the great majority of instances, then, the local disorder from which physicians now almost invariably name disease, and to which they almost invariably confine their attention, is only one of the many features of universal disturbance. So far from being the causes of such disturbance, the local tendencies to disorganization are merely hereditary or accidental developments occurring in its course—developments expressive, for the most part, of the weak points of individual constitution—though sometimes determined by climate or other speciality of cause. In England, for example, the viscera of the chest are the organs which chiefly suffer, while in the East and West Indies, the liver and other contents of the abdomen become more frequently implicated. Remittent fever, I need not say, is the parent of both.

Injuries, passions, poisons, then, are each capable of producing the same constitutional disturbance with every kind and degree of organic change to which the subjects of them may, by original weakness of configuration, be predisposed. To use a homely phrase—"when the whole house shakes, the worst built room suffers most,"—and this, of course, differs with every house. A blow on the head, nay, an injury to so minute a member as the finger, may produce a general febrile disorder, ending in abscess of the lungs or liver, according to the predisposition of the patient. Even in the course of the Contagious or Pustular Fevers, we daily find all kinds of organic change developed—change which no man in his senses would place in the light of a Cause of those fevers. Among the organic and other disturbances induced by the

#### SMALL-POX FEVER

or VARIOLA, as it is called by the profession, I have noticed sore throat, deafness, dropsy,

consumption, glandular swellings, rheumatism, and palsy, just as I have seen the same localisms developed in the course of a common remittent fever,—such sequelæ depending, of course, upon the original predisposition of the patient to the development of this or that complaint by any agency capable of injuring the general constitution. And how should it be otherwise, when we come to reflect that the Small-Pox Fever, like every other fever, consists in a succession of paroxysms so exactly resembling ague, that, before the appearance of the eruption, it cannot possibly be distinguished from it! Nor, so far as individual treatment is concerned, does that matter a straw, for however perfectly specific the cause of the disorder undoubtedly is, the disease itself admits of no specific mode of treatment. To shorten the cold stage, you may resort to the nearest cordial you can get. During the hot, keep the patient as cool as possible, or endeavor to break it by an emetic, which, in nine times out of ten, you may easily do; and when that and the sweating stage are ended, endeavor to prolong the interval of remission by opium, hydrocyanic acid, or quinine. That I believe comprehends nearly the whole duty of the physician in this, as in every other acute disorder. By a reverse course, the most perfectly curable case of small-pox may be very speedily rendered malignant. During the spring of 1824, a great many instances of the disease occurred in Edinburgh, and I remember two cases which, from the difference of the practice employed, and from the difference of the results, made a strong impression upon my mind. The first case was treated by the late Dr. Mackintosh by repeated bleeding and purgation; in consequence of which the patient became delirious, and the pustules were rendered confluent. The subject of the second case was myself; having frequently visited the former gentleman during his illness, I may fairly presume I took the infection from him. But the treatment in my own instance, was restricted to an occasional antimonial, and an opiate about seven in the evening, which had the effect of either entirely preventing the anticipated paroxysm, or of rendering it so trifling as to pass without observation. On two occasions it was neglected, and a night of fever and restlessness was each time the result. I was out of the house in ten days, and, as you see, I have not a perceptible mark on my countenance, while the other gentleman was confined to his room for more than a month, barely escaping with his life, and when he made his appearance in the streets,

his face was so disfigured by scars, that his most intimate friends did not know him when he addressed them. During the autumn and winter of 1825, while I attended the Parisian Hospitals, the small-pox was raging fearfully in France. But so unsuccessful was the treatment employed, bleeding, leeching, and purgation, that the dissecting-rooms of Paris were literally crowded with the bodies of the people who had died of the disease. Some of these bodies bore the mark of vaccination on their arms. But what is Vaccination? Vaccination is only the artificial introduction into the human system of an animal poison; and it was first practised by Dr. Jenner of Berkley, in Gloucestershire. Now Jenner was a man of great observation, great penetration—a man upon whom facts were never lost, not a mere collector of facts, not one of those poor creatures who cry “facts, facts, give me facts, I never think,”—men who might as wittily cry “Bricks, bricks, give me bricks, I never Build!” Of quite a different stamp was Dr. Jenner. Practising his profession, chiefly at first among the poor of his native country, from them he learned that the people connected with dairies had their hands very often attacked with an eruptive disease, which they traced to a similar eruption on the teats of the cows they milked, and their general belief was that such as had this eruption could not take the small-pox. All through Gloucestershire this fact was known to the peasantry, but the wise doctors only looked upon it as a popular superstition. Not so Jenner,—who set about an investigation, and he discovered it to be the truth; and, in spite of the greatest opposition from men of his own profession, and others whom they secretly influenced, he finally succeeded in establishing the practice of vaccination, so called from *vacca*, the Latin for cow. Jenner, then, was the first who artificially introduced cow-pox as a preventative of small-pox; and that it is indeed a preventative you will have no difficulty in believing, if you choose to recall to memory the number of persons whose faces were fretted and seamed by the small-pox in your younger days, and the few instances of a similar kind you meet with in these times, since vaccination has been practised. Do you doubt the preventive effect of Small-pox against a recurrence of small-pox? No more can you doubt the effect of vaccination—for though small-pox does occasionally attack individuals who have previously undergone vaccination, so also does it recur occasionally in persons who bear the indelible marks of having previously suffered

from small-pox itself. What is the Vaccine disease but a modification of the small-pox? It is small-pox in a milder form, a fact which Jenner suspected, and which Mr. Ceely of Aylesbury has recently proved by a very simple experiment. He first inoculated a cow with the matter of a Small-pox pustule. From the new pustules which were in due time produced in that animal, he took matter and inserted it into the arm of a child. The vaccine or cow-pox pustule was the result!—and these experiments he has several times repeated with the same success, in the presence of many medical men,—so that the cause of small-pox in man (whatever its real nature be) becomes so altered in its vaccine or Cow modification, as to constitute a most valuable preventative against the severer form. What is the nature of the specific agent which produces and reproduces, through such an infinity of individuals, an effect so generally specific? Can it be, as Linnæus thought, of an animalculine character? or, is it at all analogous to the influence produced by the magnet on iron? which metal, you all know, may, from the contact of a magnet, become itself magnetic. These are the most probable relations in which the subject may be viewed—if, indeed, it have not some analogy to the continuation and reproduction of all animal life.

There are a few questions, connected with this subject, which I confess myself unable to answer. Perhaps the ingenuity of some of you may solve them for me.

1. Why is Small-pox, when directly inoculated, more generally mild than when taken casually by infection?

2. Why, after Vaccination, have we, in the majority of cases, only one pustule instead of many, as in cases of the small-pox?

3. Why is the Cow-pox not infectious, like Small-pox—seeing that it is a mere modification of identical agency? The cow-pox, so far as we know, can only be communicated by direct inoculation.

4. Has the protection which the Cow-pox and the Small-pox afford to the constitution against recurrence, any analogy to agricultural exhaustion—to the impossibility to obtain more than a given number of successive crops of a particular herbage, from a particular soil, in a given period of years?

But the small-pox fever is not the only fever which once having attacked an individual during his life, for the most part renders him unsusceptible of recurrence,—all the truly contagious fevers have this effect—Chicken pox, Measels, Scarlet-fever, Hooping-cough, seldom affect the constitution above once in life—though sometimes, like

Small-pox, they make their appearance twice and even three times in individuals. By some authors, the Chicken pox has been supposed to be a modification of Small-pox—an opinion to which I myself lean—for when we consider how remarkably small-pox becomes modified after vaccine transmission, we can scarcely doubt that it may admit of still further modifications, by passing through the bodies of other animals besides the cow. This much is certain, that every one of the contagious diseases has the most perfect analogy to the ague—seeing that all have remissions and exacerbations of fever more or less perfect in kind, and that all are more or less amenable to the chrono-thermal remedies—not one of which remedies, however, possess such specific influence over them, as to be exclusively relied upon in the treatment of any case. Is not this the best of all proofs that there is no Specific in physic? If in a most decidedly specific disease we have no specific remedial agency, how can we possibly expect to find such for any one of the great family of disorders which may be produced by anything and everything that can derange the general health? Yet Dr. Holland hopes that medical men may one day find a specific for Gout, and another for Consumption—diseases which may be produced and cured by any agency that can alter the moving powers of particular individuals!

Is the

#### PLAGUE

an intermittent fever?—The case of Corporal Farrell, as detailed by Dr. Calvert, [*Medico-Chirurgical Transactions*] will be a sufficient answer to the question:—"This man had been standing in the sea on the 10th of November, upwards of an hour, to wash and purify his clothes, according to an order to that effect. On coming out of the water he was seized with violent shivering and headache, succeeded by heat of skin, and afterwards by sweating, which alleviated the distressing symptoms. On the following day the paroxysm was repeated. He was permitted to remain in the barracks from a belief that his complaint was intermittent fever. The next day his fever returned as usual, but it now declared itself to be the **PLAGUE** by a bubo (glandular swelling) arising in the groin, while the seat of the pain seemed to be suddenly transferred from the head to that part. The paroxysm was again followed by intermission or remission. But the next morning, while dressing himself to go to the lazaret, he dropped down and expired."

Disputes still exist as to whether Plague be contagious or not. On whichever side truth lies, there can be no difficulty as to the

proper treatment. The indications, in Plague as in simple intermittent fever, or the Small-pox, are to regulate the temperature in the cold and hot stages, by the means already pointed out, and to prolong the remission by quinine, opium, arsenic, &c., according to particular constitutions. Treated in this manner, the disease could not by any possibility be more fatal than we are told it is under the present routine of practice. "In all our cases," says Dr. Madden, "we did as all other practitioners did,—we continued to bleed, and the patients continued to DIE!"—[*Madden's Constantinople.*]

From the same candid author, I find that the

#### YELLOW FEVER

of the West Indies, is not less remarkable for its periodic remissions and exacerbations than for the shiverings and alternations of temperature characteristic of every other disorder. The yellow appearance of the patient, like the milder jaundice of our own climate, is a mere effect of spasm of the gall ducts. Jaundice, then, is a symptom, not a disease; it is the result of spasm developed in the course of a febrile paroxysm. People will say, "You would not give Quinine or Bark in jaundice." But wherefore not? seeing I could muster a good half-hundred instances where I myself have cured the disease by one or the other. Dr. Madden details a case of yellow fever cured by Quinine, a case in which he says, "had the gentleman been bled, after the fashion of the country, I think in all probability he would have died; or had he survived, that he would have had left a debilitated constitution and a dropsical diathesis to encounter in his convalescence."

Previous to my embarkation for the East Indies, where it was my chance to serve five years as a medical officer of the army, I read Dr. James Johnson's work on the "Diseases of Tropical Climates." Impressed when a boy with his pretty style, I put his sanguinary treatment and his twenty-grain doses of calomel to the test. But so far from confirming his assertions, my own after-experience led me to adopt conclusions much the same as Dr. Madden. Capt. Owen of the Royal Navy, too, who could neither have a theory to support nor any interested end to serve one way or the other, details at great length the mortality which took place among his people while employed in surveying the African coast. "It may, in fact, be questioned," says this intelligent navigator, "whether our very severe losses were not, in some measure, attributable to European medical practice, Bleeding and Calomel being decidedly the most deadly enemies in a tropical climate.—

During the whole time of the prevalence of the fever, we had not one instance of perfect recovery after a liberal application of the lancet or of this medicine." Captain Owen farther states, that he himself recovered without either bleeding or calomel, while the ship-doctor fell a martyr to his medical faith,—he bled himself, took calomel, and died! [The above remarks were first printed in 1840.—Two years afterwards, 12th November 1842, extracts from the Report of the Select Committee on the Western coast of Africa, appeared in the Times newspaper, wherein, among other things, is the following: "The bleeding system has fortunately gone out of fashion, and the frightful mortality that attended its practice, is now no longer known on board our ships." Dr. James Johnson, are you satisfied!]

But the Eastern practitioner will tell me possibly, that

#### DYSENTERY

cannot be safely treated in any other fashion. Is he sure he knows exactly what is meant by the word Dysentery? I shall say nothing of its etymology but rather give you the symptoms included by Sydenham under the name. "The patient," he tells us, "is attacked with a chilliness and shaking, which is immediately succeeded by a heat of the whole body. Soon after this gripes and stools follow." What then, Gentlemen, is this dysentery but an ague, with increase of secretion from one surface instead of another—from the mucous surface of the bowels instead of the skin, and the skin remember is only a continuation of the mucous membrane of the bowels. Now, Dr. Cumming, late of the East India Company's medical service, informs us, that while ascending the Nile in 1836, he was attacked with dysentery. After suffering for a week with "intervals of remission," he fairly gave himself up, and so did his attendants, for he had nothing in the shape of medicine with him. As a forlorn hope, however, he ordered his guide to sponge him with warm water. And this simple remedy [attention to temperature,] with fomentation of the abdomen, was the only treatment employed. He took a little wine and water, which remained upon his stomach; he then became drowsy, slept for a short time, felt his skin less hot and burning, and, in brief, began to recover, and that rapidly. In about a week afterwards, he writes in his journal: "My recovery is almost complete, and the rapidity of my convalescence leads me to contrast my late attack with a precisely similar one which I had at Cawnpore in the autumn of 1829. On that occasion I was largely bled

at the arm, had fifty leeches applied to the abdomen, and during the first four days of the disease, in addition to extensive mercurial frictions, I swallowed *two hundred and sixteen grains* of calomel. True, I recovered; or rather I did not die! whether in consequence, or in spite of the above heroic treatment, I will not venture to say. My face was swollen to an enormous size, every tooth was loose in my jaws, and for six or eight weeks I could eat no solid food; my constitution received a shock from which it never fairly recovered, and I was obliged to come to Europe on furlough. On the present occasion, fortunately for me, the *vis medicatrix naturæ* was my sole physician, [he forgot the sponging part!] and I am now almost as well as before the attack commenced. British medical practice, in my humble opinion, deals too much in heroics."

That opinion, Gentlemen, I hope, is now yours also—it has many years been mine. Such a case, from such a quarter, must doubtless be more than sufficient to warn you against the sanguinary and mercurial practice introduced into the East by the influence of Dr. James Johnson's *Work on the Diseases of India*. What an idea, first to break down by the lancet and mercury to salivation the attractive power of every atom of the body, in the expectation of thereby strengthening its weakest parts! Does this savour of mania, or does it not? and that too, as I hinted before, madness of rather a homicidal kind?

#### DROPSY.

How can there be a morbid superabundance of any secretion without a corresponding change of temperature? He who will rigidly scrutinize this disease shall find that the same shiverings and fever which precede the sweat of ague, usher in the tumid abdomen and swollen legs of Dropsy. Dropsy, then, may be termed an Ague with inward sweat. That it is a remittent disease may be seen by the palpable diminution of the swelling on particular days; to say nothing of the hopes both of the patient and physician on such days being excited by general improvement throughout. How should the disease be treated? Not, according to modern practice, by diuretics and sudorifics solely; but by a combination and alternation of these remedies with the medicines of acknowledged efficacy in that most perfect type of all disease, the ague. Of cases successfully treated by me in this manner, I could give you hundreds—but to what purpose? The recital would only comprehend the symptoms of ague with increase of the natural secretions of the vari-



ous cavities even to effusion, (or cellular substance) instead of perspiration by the skin; and the remedies, as you may guess, quinine, opium, arsenic, hydrocyanic acid, combined or alternated with creosote, squill, ipecacuanha, colchicum, mercury, &c. What other proofs do you want of the unity of all disease? The Paymaster-Sergeant of the Royals had dropsy, which, notwithstanding the usual treatment by diuretics, purgatives, &c., was daily getting worse, when Dr. Stephenson, of the 13th Dragoons, suggested the application of poultices of *lichen vulgaris* to the loins. From that day the amendment was rapid, and the patient subsequently got well. Now, Gentlemen, everybody believed that there must have been some magical virtue in the lichen. But Mr. Brady, the surgeon of the regiment, thinking that the plant had less to do with the cure than the heat which, in the form of a poultice, it produced, determined to try poultices made with *rice* in a case exactly similar. The result was the same—a cure; proving how right he was in his conjecture. Since I have entered into private practice, I have repeatedly applied poultices to the loins with advantage, and have also, with the assistance of plasters of pitch, galbanum, &c., succeeded in curing cases of dropsy, that resisted every kind of internal remedy.

#### CHOLERA,—

the scourge of nations—will cholera be found to partake of the same universal type of disease, the ague? You will be the best judges, Gentlemen, when I draw my parallel. While in India I had ample opportunities for ascertaining its nature. Tremulous and spasmodic action belong equally to ague and to cholera; vomiting or nausea characterises both. The ague patient has sometimes diarrhoea or looseness; oppression at the chest, and coldness of the whole body are the primary symptoms of each. The increased flow of pale urine, so often remarked in ague, is an occasional symptom of epidemic cholera. In more than one instance of cholera, which came under my observation while serving in the East, that secretion passed involuntarily from the patient a short time before death. Suppression of urine, so common in the late epidemic, was a frequent symptom of the Walcheren ague. When there is no hot fit or reaction, death is usually preceded by a sleepy stupor in both. You have ague, too, with hot skin and bounding pulse, a state analogous to the milder forms of cholera, in which you remark the same phenomena. When not fatal, cholera, like ague, has a hot and sweating stage. Moreover, when ague terminates life

by a single paroxysm, you find the same appearances after death in the bodies of both. Lastly, phrensy, disease of the lungs, liver, and spleen, with dysentery and dropsy, to say nothing of epilepsy and apoplexy, have been the occasional sequelæ of each. Cholera, then, is an extreme of the cold stage of ague.

What are the remedies most beneficial in Cholera? Attention to temperature comprehends every thing that has either failed or succeeded. Were I myself to become the subject of it, I should feel inclined to trust more to a bottle of brandy than to any thing contained in the *Materia Medica*. While serving in the East Indies I saw many hundred cases of the disorder, but I never could convince myself of the superiority of any one kind of *medical* treatment over another. In my Work upon the Diseases of India, I have proved that death, in the great majority of instances of cholera, takes place from a palsy of the pneumo-gastric nerves,—those nerves that influence the functions of the lungs and stomach. If you divide these nerves in the dog, you have the essential symptoms of Cholera, viz., loss of voice, vomiting, and difficult breathing always,—cramps and flatulence frequently; and the animal seldom survives the third day. On dissection, you find the vessels of the head, lungs, and intestines, filled with black blood. That is exactly what you find on opening the bodies of persons who have died of cholera. Shortly after my return from India, Dr. Wilson Philip read a paper at the Westminster Medical Society, in which he took the very same view of Cholera, but wherein he forgot to say that his views of the disease had been every one of them anticipated in my Remarks upon it, published in the *Lancet* some months before I quitted India.

#### Poisoning by Arsenic.

M. Grimaud, a chemist at Poitiers, has proposed a mode of rendering poisoning by arsenic more difficult. He recommends that this article shall be sold only when mixed with a certain quantity of sulphate of iron and cyanure of potash. About one per cent. of each substance would, he alleges, be sufficient. The arsenic, thus qualified, shews itself either by colour or smell, when used in the various aliments fit for man. Thus, arsenic prepared this way, and thrown into warm meat soup, gives immediately a green bronze colour; into hot milk, an opal; into red wine, a violet; into bread, a deep blue; and so on for 20 mixture, on which M. Grimaud has made experiments.—*Galignani's Messenger*.

MISS MARTINEAU'S LETTERS ON  
MESMERISM.

LETTER I.

Tynemouth, Nov. 12.

It is important to society to know whether Mesmerism is true. The revival of its pretensions from age to age makes the negative of this question appear so improbable, and the affirmative involves anticipations so vast, that no testimony of a conscientious witness can be unworthy of attention. I am now capable of affording testimony: and all personal considerations must give way before the social duty of imparting the facts of which I am possessed.

For some years before June last, I was in the class of believers upon testimony. I had witnessed no mesmeric facts whatever; but I could not doubt the existence of many which were related to me without distrusting either the understanding, or the integrity, of some of the wisest and best people I knew. Nor did I find it possible to resist the evidence of books, of details of many cases of protracted bodily and mental effects. Nor, if it had been possible, could I have thought it desirable or philosophical to set up my negative ignorance of the functions of the nerves and the powers of the mind, against the positive evidence of observers and recorders of new phenomena. People do not, or ought not, to reach my years without learning that the strangeness and absolute novelty of facts attested by more than one mind is rather a presumption of their truth than the contrary, as there would be something more familiar in any devices or conceptions of men; that our researches into the powers of nature, of human nature with the rest, have as yet gone such a little way that many discoveries are yet to be looked for; and that, while we have hardly recovered from the surprise of the new lights thrown upon the functions and texture of the human frame by Harvey, Bell, and others, it is too soon to decide that there shall be no more as wonderful, and presumptuous in the extreme to predetermine what they shall or shall not be.

Such was the state of my mind on the subject of Mesmerism six years ago, when I related a series of facts, on the testimony of five persons whom I could trust, to one whose intellect I was accustomed to look up to, though I had had occasion to see that great discoveries were received or rejected by him on other grounds than the evidence on which their pretensions rested. He threw himself back in his chair when I began my story, exclaiming, "Is it possible that you

are bit by that nonsense?" On my declaring the amount of testimony on which I believed what I was telling, he declared, as he frequently did afterwards, that if he saw the incidents himself, he would not believe them; he would sooner think himself and the whole company mad than admit them. This declaration did me good; though of course, it gave me concern. It showed me that I must keep my mind free, and must observe and decide independently, as there could be neither help nor hindrance from minds self-exiled in this way from the region of evidence. From that time till June last, I was, as I have said, a believer in Mesmerism on testimony.

The reason why I did not qualify myself for belief or disbelief on evidence was a substantial one. From the early summer of 1839, I was, till this autumn, a prisoner from illness. My recovery now, by means of mesmeric treatment alone, has given me the most thorough knowledge possible that Mesmerism is true.

This is not the place in which to give any details of disease. It will be sufficient to explain briefly, in order to render my story intelligible, that the internal disease, under which I have suffered, appears to have been coming on for many years; that after warnings of failing health, which I carelessly overlooked, I broke down, while travelling abroad, in June, 1839; that I sank lower and lower for three years after my return, and remained nearly stationary for two more preceding last June. During these five years, I never felt wholly at ease for one single hour. I seldom had severe pain; but never entire comfort. A besetting sickness, almost disabling me from taking food for two years, brought me very low; and, together with other evils, it confined me to a condition of almost entire stillness—to a life passed between my bed and my sofa. It was not till after many attempts at gentle exercise that my friends agreed with me that the cost was too great for any advantage gained: and at length it was clear that even going down one flight of stairs was imprudent. From that time I lay still; and by means of this undisturbed quiet, and such an increase of opiates as kept down my most urgent discomforts, I passed the last two years with less suffering than the three preceding. There was, however, no favorable change in the disease. Every thing was done for me that the best medical skill and science could suggest, and the most indefatigable humanity and family affection devise: but nothing could avail beyond mere alleviation. My dependence upon opiates was desperate. My kind and vigilant medical friend—the most

sanguine man I know, and the most bent upon keeping his patients hopeful—avowed to me last Christmas, and twice afterwards, that he found himself compelled to give up all hope of affecting the disease—of doing more than keeping me up, in collateral respects, to the highest practicable point. This was no surprise to me; for when any specific medicine is taken for above two years without affecting the disease, there is no more ground for hope in reason than in feeling. In June last, I suffered more than usual, and new measures of alleviation were resorted to. As to all the essential points of the disease, I was never lower than immediately before I made trial of Mesmerism.

If, at any time during my illness, I had been asked with serious purpose, whether I believed there was no resource for me, I should have replied that Mesmerism might perhaps give me partial relief.

After my medical friend's avowal of his hopelessness, however, I felt myself not only at liberty, but in duty bound, to try, if possible, the only remaining resource for alleviation. I felt then, and I feel now, that through all mortification of old prejudices, and all springing up of new, nobody in the world would undertake to say I was wrong in seeking every recovery by any harmless means, when every other hope was given up by all: and it was not recovery that was in my thoughts, but only solace. It never presented itself to me as possible that disease so long and deeply fixed could be removed; and I was perfectly sincere in saying that the utmost I looked for was release from my miserable dependence on opiates. Deep as are my obligations to my faithful and skilful medical friend, for a long course of humane effort on his part, no one kindness of his has touched me so sensibly as the grace with which he met my desire to try a means of which he had no knowledge or opinion, and himself brought over the Mesmerist under whom the first trial of my susceptibility was made.

Last winter, I wrote to two friends in London, telling them of my desire to try Mesmerism, and entreating them to be on the watch to let me know if any one came this way of whose aid I might avail myself.—They watched for me, and one made it a business to gain all the information she could on my behalf; but nothing was actually done, or seemed likely to be done, when in June a sudden opening for the experiment was made, without any effort of my own, and on the 22nd I found myself, for the first time, under the hands of a Mesmerist.

It all came about easily and naturally at last. Mr. Spencer T. Hall being at New-

castle lecturing, my medical friend went out of curiosity, was impressed by what he saw and came to me very full of the subject. I told him what was in my mind; and I have said above with what a grace he met my wishes, and immediately set about gratifying them.

At the end of four months I was, as far as my own feelings could be any warrant, quite well. My mesmerist and I are not so precipitate as to conclude my disease yet extirpated, and my health established beyond all danger of relapse; because time only can prove such facts. We have not yet discontinued the mesmeric treatment, and I have not re-entered upon the hurry and bustle of the world; the case is thus not complete enough for a professional statement. But, as I am aware of no ailment, and am restored to the full enjoyment of active days and nights of rest, to the full use of my powers of body and mind, and as many invalids, still languishing in such illness as I have recovered from, are looking to me for guidance in the pursuit of health by the same means, I think it right not to delay giving a precise statement of my own mesmeric experience, and of my observation of some different manifestations in the instance of another patient in the same house.

On Saturday, June 22nd, Mr. Spencer Hall and my medical friend came, as arranged, at my worst hour of the day, between the expiration of one opiate and the taking of another. By an accident the gentlemen were rather in a hurry—a circumstance unfavorable to a first experiment. But result enough was obtained to encourage a further trial, though it was of a nature entirely unanticipated by me. I had no other idea than that I should either drop asleep or feel nothing. I did not drop asleep, and I did feel something very strange.

Various passes were tried by Mr. Hall; the first of those that appeared effectual, and the most so for some time after, were passes over the head, made from behind—passes from the forehead to the back of the head and a little way down the spine. A very short time after these were tried, and twenty minutes from the beginning of the seance, I became sensible of an extraordinary appearance, most unexpected, and wholly unlike anything I had ever conceived of. Something seemed to diffuse itself through the atmosphere—not like smoke, nor steam, nor haze—but most like a clear twilight, closing in from the windows and down from the ceiling, and in which one object after another melted away, till scarcely anything was left visible before my wide opened eyes. First, the outlines of all objects were blurred; then

a bust, standing on a pedestal in a strong light, melted quite away; then the opposite bust, then the table with its gay cover, then the floor, and the ceiling, till one small picture, high up on the opposite wall, only remained visible—like a patch of phosphoric light. I feared to move my eyes, lest the singular appearance should vanish; and I cried out, "O! deepen it! deepen it!" supposing this the precursor of the sleep.—It could not be deepened, however; and when I glanced aside from the luminous point, I found that I need not fear the return of objects to their ordinary appearance while the passes were continued. The busts reappeared, ghost-like, in the dim atmosphere, like faint shadows, except that their outlines, and the parts in the highest relief, burned with the same phosphoric light. The features of one, an Isis with bent head, seemed to be illumined by a fire on the floor, though this bust has its back to the windows. Wherever I glanced, all outlines were dressed in this beautiful light: and so they have been at every seance, without exception, to this day; though the appearance has rather given away to drowsiness since I left off opiates entirely. This appearance continued during the remaining twenty minutes before the gentlemen were obliged to leave me.—The other effects produced were, first, heat, oppression and sickness, and, for a few hours after, disordered stomach: followed, in the course of the evening, by a feeling of lightness and relief, in which I thought I could hardly be mistaken. On occasions of a perfectly new experience, however, scepticism and self distrust are very strong. I was aware of this beforehand, and also, of course of the common sneer—that Mesmeric effects are "all imagination." When the singular appearances presented themselves, I thought to myself,—"Now, shall I ever believe that this was all fancy? When it is gone, and when people laugh, shall I ever doubt having seen what is now as distinct to my waking eyes as the rolling waves of yonder sea, or the faces round my sofa?" I did a little doubt it in the course of the evening: I had some misgivings even so soon as that; and yet more the next morning, when it appeared like a dream.

Great was the comfort, therefore, of recognizing the appearances on the second afternoon. "Now," thought I, "can I again doubt?" I did, more faintly; but, before a week was over, I was certain of the fidelity of my own senses in regard to this, and more.

There was no other agreeable experience on this second afternoon. Mr. Hall was exhausted and unwell, from having mesmerized many patients; and I was more oppres-

sed and disordered than on the preceding day, and the disorder continued for a longer time: but again, towards night, I felt refreshed and relieved. How much of my ease was to be attributed to Mesmerism, and how much to my accustomed opiate, there was no saying, in the then uncertain state of my mind.

The next day, however, left no doubt. Mr. Hall was prevented by illness from coming over, too late to let me know. Unwilling to take my opiate while in expectation of his arrival, and too wretched to do without some resource, I rang for my maid, and asked whether she had any objection to attempt what she saw Mr. Hall do the day before. With the greatest alacrity she complied. Within one minute the twilight and phosphoric lights appeared; and in two or three more, a delicious sensation of ease spread through me,—a cool comfort, before which all pain and disease gave way, oozing out, as it were, at the soles of my feet. During that hour, and almost the whole evening, I could no more help exclaiming with pleasure than a person in torture crying out with pain. I became hungry, and ate with relish, for the first time for five years. There was no heat, oppression, or sickness during the seance, nor any disorder afterwards.—During the whole evening, instead of the lazy hot ease of opiates, under which pain is felt to lie in wait, I experienced something of the indescribable sensation of health, which I had quite lost and forgotten. I walked about my rooms, and was gay and talkative. Something of this relief remained till the next morning; and then there was no re-action. I was no worse than usual; and perhaps rather better.

Nothing is to me more unquestionable and more striking about this influence than the absence of all re-action. Its highest exhilaration is followed, not by depression or exhaustion, but by a further renovation. From the first hour to the present, I have never fallen back a single step. Every point gained has been steadily held. Improved composure of nerve and spirits has followed upon every mesmeric exhilaration. I have been spared all the weaknesses of convalescence, and have been carried through all the usually formidable enterprises of return from deep disease to health with a steadiness and tranquility astonishing to all witnesses. At this time, before venturing to speak of my health as established, I believe myself more firm in nerve, more calm and steady in mind and spirits, than at any time of my life before. So much, in consideration of the natural and common fear of the mesmeric influence as pernicious excitement—as a kind of intoxication.

When Mr. Hall saw how congenial was the influence of this new Mesmerist, he advised our going on by ourselves, which we did until the 6th of September.

I owe much to Mr. Hall for his disinterested zeal and kindness. He did for me all he could; and it was much to make a beginning, and put us in the way of proceeding.

## LETTER II.

I next procured, for guidance, Deleuze's 'Instruction Pratique, sur le Magnetisme Animal.' Out of this I directed my maid: and for some weeks we went on pretty well. Finding my appetite and digestion sufficiently improved, I left off tonics, and also the medicine which I had taken for two years and four months, in obedience to my doctor's hope of affecting the disease,—though the eminent physician who saw me before that time declared that he had "tried it in an infinite number of such cases, and never knew it avail." I never felt the want of these medicines, nor others which I afterwards discontinued. From the first week in August, I took no medicines but opiates; and these I was gradually reducing. These particulars are mentioned to show how early in the experiment Mesmerism became my sole reliance.

On four days, scattered through six weeks, our *seance* was prevented by visitors, or other accidents. On these four days, the old distress and pain recurred; but never on the days when I was mesmerized.

From the middle of August (after I had discontinued all medicines but opiates,) the departure of the worst pains and oppressions of my disease made me suspect that the complaint itself,—the incurable, hopeless disease of so many years,—was reached; and now I first began to glance towards the thought of recovery. In two or three weeks more, it became certain that I was not deceived; and the radical amendment has since gone on, without intermission.

Another thing, however, was also becoming clear: that more aid was necessary. My maid did for me whatever, under my own instruction, good-will and affection could do. But the patience and strenuous purpose required in a case of such long and deep seated disease can only be looked for in an educated person, so familiar with the practice of Mesmerism as to be able to keep a steady eye on the end, through all delays and doubtful incidents. And it is also important, if not necessary, that the predominance of will should be in the Mesmerist, not the patient.

The offices of an untrained servant may avail perfectly in a short case,—for the removal of sudden pain, or a brief illness; but, from the subordination being in the wrong party, we found ourselves coming to a stand.

The difficulty was abolished by the kindness and sagacity of Mr. Atkinson, who had been my adviser throughout. He explained my position to a friend of his—a lady, the widow of a clergyman, deeply and practically interested in Mesmerism—possessed of great Mesmeric power, and of those high qualities of mind and heart which fortify and sanctify its influence. In pure zeal and benevolence, this lady came to me, and has been with me ever since. When I found myself able to repose on the knowledge and power (mental and moral) of my Mesmerist, the last impediments to my progress were cleared away, and I improved accordingly.

A few days after the arrival of my kind Mesmerist, I had my foot on the grass for the first time for four years and a half. I went down to the little garden under my windows. I never before was in the open air, after an illness of merely a week or two, without feeling more or less overpowered; but now, under the open sky, after four years and a half spent between bed and a sofa, I felt no faintness, exhaustion, or nervousness of any kind. I was somewhat haunted a day or two by the stalks of the grass, which I had not seen growing for so long (for, well supplied as I had been with flowers, rich and rare, I had seen no grass, except from my windows;) but at the time I was as self-possessed as any walker in the place. In a day or two, I walked round the garden, then down the lane, then to the haven, and so on, till now, in two months, five miles are no fatigue to me. At first, the evidences of the extent of the disease were so clear as to make me think that I had never before fully understood how ill I had been. They disappeared one by one; and now I feel nothing of them.

The same fortifying influence carried me through the greatest effort of all,—the final severance from opiates. What that struggle is, can be conceived only by those who have experienced, or watched it with solicitude in a case of desperate dependence on them for years. No previous reduction can bridge over the chasm which separates an opiated from the natural state. I see in my own experience a consoling promise for the diseased, and also for the intemperate, who may desire to regain a natural condition, but might fail through bodily suffering. Where the mesmeric sleep can be induced, the transition may be made comparatively easy. It

appears, however, that opiates are a great hindrance to the production of the sleep; but even so, the mesmeric influence is an inestimable help, as I can testify. I gave all my opiates to my Mesmerist, desiring her not to let me have any on any entreaty; and during the day I scarcely felt the want of them. Her mesmerizing kept me up; and, more, it intercepted the distress,—obviated the accumulation of miseries under which the unaided sufferer is apt to sink. It enabled me to encounter every night afresh,—acting as it does in cases of insanity, where it is all-important to suspend the irritation—to banish the haunting idea. What further aid I derived in this last struggle from Mesmerism in another form, I shall mention when I detail the other case with which my own became implicated, and in which, to myself at least, the interest of my own has completely merged.

It will be supposed that during the whole experiment, I longed to enjoy the mesmeric sleep, and was on the watch for some of the wonders which I knew to be common. The sleep never came, and except the great marvel of restored health, I have experienced less of the wonders than I have observed in another. Some curious particulars are, however, worth noting.

The first very striking circumstance to me, a novice, though familiar enough to be practised, was the power of my Mesmerist's volitions, without any co-operation on my part. One very warm morning in August, when every body else was oppressed with heat, I was shivering a little under the mesmeric influence of my maid,—the influence, in those days, causing the sensation of cold currents running through me from head to foot.—“This cold will not do for you ma'am,” said M. “O!” said I, “it is fresh, and I do not mind it:” and immediately my mind went off to something else. In a few minutes, I was surprised by a feeling as of warm water tickling through the channels of the late cold.—In reply to my observation, that I was warm now, M. said, “Yes, ma'am, that is what I am doing. By inquiry and observation, it became clear to me, that her influence was, generally speaking, composing, just in proportion to her power of willing that it should be so. When I afterwards saw, in the case I shall relate, how the volition of the Mesmerist caused immediate waking from the deepest sleep, and a supposition that the same glass of water was now wine—now porter, &c., I became too much familiarized with the effect to be as much astonished as many of my readers will doubtless be.

Another striking incident occurred in one of the earliest of my walks. My Mesmerist

and I had reached a headland nearly half a mile from home, and were resting there, when she proposed to mesmerize me a little—partly to refresh me for our return, and partly to see whether any effect would be produced in a new place, and while a fresh breeze was blowing. She merely laid her hand on my forehead, and in a minute or two the usual appearances came, assuming a strange air of novelty from the scene in which I was. After the blurring of the outlines, which made all objects more dim than the dull gray day had already made them, the phosphoric lights appeared, glorifying every rock and headland, the horizon, and all the vessels in sight. One of the dirtiest and meanest of the steam tugs in the port was passing at the time, and it was all dressed in heavenly radiance—the last object that any imagination would select as an element of a vision. Then, and often before and since, did it occur to me that if I had been a pious and very ignorant Catholic, I could not have escaped the persuasion that I had seen heavenly visions. Every glorified object before my open eyes would have been a revelation; and my Mesmerist, with the white halo round her head, and the illuminated profile, would have been a saint or an angel.

Sometimes the induced darkening has been so great, that I have seriously inquired whether the lamp was not out, when a few movements of the head convinced me that it was burning as brightly as ever. As the muscular power oozes away under the mesmeric influence, a strange inexplicable feeling ensues of the frame becoming transparent and ductile. My head has often appeared to be drawn out, to change its form, according to the traction of my Mesmerist, and an indescribable and exceedingly agreeable sensation of transparency and lightness, through a part or the whole of the frame, has followed. Then begins the moaning, of which so much has been made, as an indication of pain. I have often moaned, and much oftener have been disposed to do so, when the sensations have been the most tranquil and agreeable. At such times, my Mesmerist has struggled not to disturb me by a laugh, when I have murmured, with a serious tone, “Here are my hands, but they have no arms to them:” “O dear! what shall I do? here is none of me left!” the intellect and moral powers being all the while at their strongest. Between this condition and the mesmeric sleep there is a state, transient and rare, of which I have had experience, but of which I intend to give no account. A somnambule calls it a glimmering of the lights of somnambulism and clairvoyance. To me there appears nothing like glimmering

in it. The ideas that I have snatched from it, and now retain, are, of all ideas which ever visited me, the most lucid, and impressive. It may be well that they are incommunicable—partly from their nature and relations, and partly from their unfitness for translation into mere words. I will only say that the condition is one of “no nervous excitement,” as far as experience and outward indications can be taken as a test. Such a state of repose, of calm translucent intellectuality, I had never conceived of; and no reaction followed, no excitement but that which is natural to every one who finds himself in possession of a great new idea.

Before leaving the narrative of my own case for that of another, widely different, I put in a claim for my experiment being considered rational. It surely was so, not only on account of my previous knowledge of facts, and of my hopelessness from any other resource, but on grounds which other sufferers may share with me;—on the ground that though the science of medicine may be exhausted in any particular case, it does not follow that curative means are exhausted;—on the ground of the ignorance of all men of the nature and extent of the reparative power which lies under our hand, and which is vaguely indicated by the term “Nature;”—on the ground of the ignorance of all men regarding the very structure, and much more, the functions of the nervous system;—and on the broad ultimate ground of our total ignorance of the principal of life,—of what it is, and where it resides, and whether it can be reached, and in any way beneficially affected by a voluntary application of human energy.

It seemed to me rational to seek a way to refreshment first, and then to health, amidst this wilderness of ignorances, rather than to lie perishing in their depths. The event seems to prove it so. The story appears to me to speak for itself. If it does not assert itself to all,—if any should, as is common in cases of restoration by Mesmerism,—try to account for the result by any means but those which are obvious, supposing a host of moral impossibilities rather than admit a plain new fact, I have no concern with such objectors or objections.

In a case of blindness cured, once upon a time, and cavilled at and denied, from hostility to the means, an answer was given which we are wont to consider sufficiently satisfactory: “One thing I know, that whereas I was blind, now I see.” Those who could dispute the fact after this must be left to their doubts. They could, it is true, cast out their restored brother; but they could not impair his joy in his new blessing, nor despoil him of his far higher privileges of belief in an allegiance to

his benefactor. Thus, whenever, under the Providence which leads on our race to knowledge and power, any new blessing of healing arises, it is little to one who enjoys it what disputes are caused among observers. To him, the privilege is clear and substantial.—Physically, having been diseased, he is now well. Intellectually, having been blind, he now sees.

For the wisest this is enough. And for those of a somewhat lower order, who have a restless craving for human sympathy in their recovered relish of life, there is almost a certainty that somewhere near them there exist hearts susceptible of simple faith in the unexplored powers of nature, and minds capable of an ingenuous recognition of plain facts, though they be new, and must wait for a theoretical solution.

### LETTER III.

Tynemouth, Nov. 20, 1844.

When I entered upon my lodgings here, nearly five years ago, I was waited upon by my landlady's niece, a girl of fourteen. From that time to this, she has been under my eye; and now, at the age of nineteen, she has all the ingenuousness and conscientiousness that won my respect at first, with an increased intelligence and activity of affections. I am aware that personal confidence, such as I feel for this girl, cannot be transferred to any other mind by testimony. Still, the testimony of an inmate of the same house for so many years, as to essential points of character, must have some weight: and therefore I preface my story with it. I would add that no wonders of Mesmerism could be greater than that a person of such character, age, and position should be able, for a long succession of weeks, to do and say things, every evening, unlike her ordinary sayings and doings, to tell things out of the scope of her ordinary knowledge, and to command her countenance and demeanor, so that no fear, no mirth, no anger, no doubt, should ever once make her move a muscle, or change colour, or swerve for one instant from the consistency of her assertions and denials on matters of fact or opinion. I am certain that it is not in human nature to keep up for seven weeks, without slip or trip, a series of deceptions so multifarious; and I should say so of a perfect stranger, as confidently as I say it of this girl, whom I know to be incapable of deception, as much from the character of her intellect as of her *morale*. When it is seen, as it will be, that she has also told incidents which it is impossible she could have known by ordinary means, every person who really wishes

to study such a case, will think the present as worthy of attention as any that can be met with, though it offers no array of strange tricks, and few extreme marvels.

My Mesmerist and I were taken by surprise by the occurrence of this case. My friend's maid told her, on the 1st of October, that J. (our subject) had been suffering so much the day before, from pain in the head and inflamed eye, that she (the maid) had mesmerised her; that J. had gone off into the deep sleep in five minutes, and had slept for twenty minutes, when her aunt, in alarm had desired that she should be awakened. J. found herself not only relieved from pain, but able to eat and sleep, and to set about her business the next day with a relish and vigour quite unusual. My friend saw at once what an opportunity might here offer for improving the girl's infirm health, and for obtaining light as to the state and management of my case, then advancing well, but still a subject of anxiety.

J. had for six years been subject to frequent severe pain in the left temple, and perpetually recurring inflammation of the eyes, with much disorder besides. She is active and stirring in her habits, patient and cheerful in illness, and disposed to make the least, rather than the most, of her complaints. She had, during these six years, been under the care of several doctors, and was at one time a patient at the Eye Infirmary at Newcastle; and the severe treatment she has undergone is melancholy to think of, when most of it appears to have been almost or entirely in vain. She herself assigns, in the trance, a structural defect as the cause of her ailments, which will prevent their ever being entirely removed: but from the beginning of the mesmeric treatment, her health and looks have so greatly improved, that her acquaintance in the neighborhood stop her to ask how it is that her appearance is so amended. There was in her case certainly no "imagination" to begin with; for she was wholly ignorant of Mesmerism, and had no more conception of the phenomena she was about to manifest than she has consciousness of them at this moment.

This unconsciousness we have guarded with the utmost care. We immediately resolved that, if possible, there should be one case of which no one could honestly say that the sleeping and waking states of mind were mixed. Our object has been, thus far, completely attained—one harmless exception only having occurred. This was when, speaking of the nature and destiny of man, an idea which she had "heard in church" intruded itself among some otherwise derived, and troubled her by the admixture. On

that occasion, she remarked afterwards, that she had been dreaming, and, she thought, talking of the soul and the day of judgment. This is the only instance of her retaining any trace of anything being said or done in the trance. Her surprise on two or three occasions, at finding herself, on awakening, in a different chair from the one she went to sleep in, must shew her that she has walked, but we have every evidence from her reception of what we say to her, and from her ignorance of things of which she had previously informed us, that the time of her mesmeric sleep is afterwards an absolute blank to her. I asked her one evening lately, when she was in the deep sleep, what she would think of my publishing an account of her experience with my own,—whether she should be vexed by it. She replied that she should like it very much; she hoped some body would let her know of it, and show it to her,—for though she remembered when asleep everything she had thought when asleep before, she could not keep any of it till she awoke. It was all regularly "blown away." But if it was printed, she should know; and she should like that.

To preserve the unconsciousness as long as possible, we have admitted no person whatever at our sésances, from the first day till now, who could speak to her on the subject. We shut out our maids at once; and we two have been the constant witnesses, with a visitor now and then, to the number of about twelve in the whole.

It is a memorable moment when one first hears the monosyllable, which tells that the true mesmeric trance has begun. "Are you asleep?" "Yes." It is crossing the threshold of a new region of observation of human nature. Then it goes on.—"How long shall you sleep?" "Half an hour."—"Shall you wake of yourself, or shall I wake you?" "I shall wake of myself."—And so she did to a second,—no clock or watch being near, but the watch in my hand. For some weeks she could always see the time, and foretell her own waking; but of late, in manifesting some new capabilities, she has lost much of this.

Nothing can induce her to say a word on a matter she is not perfectly sure of. She solemnly shakes her head, saying, "I won't guess: it won't do to guess." And sometimes, appealingly, "I would tell you if I could." "I'll try to see." "I'll do all I can," &c. When sure of her point, nothing can move her from her declarations. Night after night, week after week, she sticks to her decisions, strangely enough sometimes, as it appears to us: but we are not aware of



her ever yet having been mistaken on any point on which she has declared herself. We ascribe this to our having carefully kept apart the waking and sleeping ideas; for it is rare to find somnambules whose declarations can be at all confidently relied on. If any waking consciousness is mixed up with their sleeping faculties, they are apt to guess—to amuse their fancy, and to say anything that they think will best please their Mesmerist. J.'s strict and uncompromising truthfulness forms a striking contrast with the vagaries of hackneyed, and otherwise mismanaged somnambules.

It soon became evident that one of her strongest powers was the discernment of disease, its condition and remedies. She cleared up her own case first, prescribing for herself very fluently. It was curious to see, on her waking, the deference and obedience with which she received from us the prescriptions with which she herself had just furnished us. They succeeded and so did similar efforts on my behalf. I cannot here detail the wonderful accuracy with which she related, without any possible knowledge of my life ten and twenty years ago, the circumstances of the origin and progress of my ill-health, of the unavailing use of medical treatment for five years, and the operation of Mesmerism upon it of late. One little fact will serve our present purpose better. Soon after she was first mesmerized, I was undergoing my final severance from opiates—a serious matter to one who had depended so long and so desperately upon them. As I have said, I got through the day pretty well; but the nights were intolerable, from pain and nervous irritations, which made it impossible to rest for two minutes together. After four such nights, I believe my Mesmerist's fortitude and my own would have given out together, and we should have brought the laudanum bottle to light again, but for the bright idea, "let us ask J!" She said at once what my sufferings had been, and declared that I should sleep more and more by degrees, if I took—(what was as contrary to her own ordinary ideas of what is right and rational as to mine)—ale at dinner, and half a wine-glass full of brandy in water at night. I refused the prescription till reminded—"Remember she has never been wrong." I obeyed; the fact being kept secret between us two, in order to try, every evening, J.'s knowledge and opinion. She always spoke and advised, in a confident familiarity with incidents known only to us two, and carried me steadily through the struggle. I lost my miseries, and recovered my sleep, night by night, till, at the end of the week, I was quite well, without stimulant or sedative. Nothing can be

more remote from J.'s ordinary knowledge and thought than the structure of the human body, and the remedies for disease; and, though I was well aware how common the exercise of this kind of insight is in somnambules—how it is used abroad as an auxiliary to medical treatment—I was not the less surprised by the readiness and peremptoriness with which a person, in J.'s position, declared, and gave directions about things which she is wholly ignorant of an hour after, and was, during the whole of her life before.

Monday, October 14th, J. did not come up as usual to our seance. There was affliction in the house-hold. An aunt of J.'s, Mrs. A., a good woman I have long known, lives in a cottage at the bottom of our garden. Mrs. A.'s son, J.'s cousin, was one of the crew of a vessel which was this evening reported to have been wrecked near Hull. This was all that was known, except that the owner was gone to Hull to see about it. J. was about to walk to Shields with a companion to inquire, but the night was so tempestuous, and it was so evident that no news could be obtained, that she was persuaded not to go. But she was too much disturbed to think of being mesmerized. Next morning there was no news. All day there were flying reports,—that all hands were lost—that all were saved—but nothing like what afterwards proved to be the truth. In the afternoon (no tidings having arrived) we went for a long drive, and took J. with us. She was with us, in another direction, till tea-time; and then, on our return, there were still no tidings; but Mrs. A. was gone to Shields to inquire, and if letters had come, she would bring the news in the evening. J. went out on an errand, while we were at tea,—no person in the place having then any means of knowing about the wreck; and on her return, she came straight up to us for her seance. Two gentlemen were with us that evening, one from America, the other from the neighbourhood. I may say here, that we note down at the moment what J. says; and that on this evening there was the additional security of my American friend repeating to me, on the instant, (on account of my deafness,) every word as it fell.

J. was presently asleep, and her Mesmerist, knowing the advantage of introducing subjects on which the mind had previously been excited, and how the inspiration follows the course of the affections, asked, as soon as the sleep was deep enough,

"Can you tell us about the wreck?"

J. tranquilly replied,

"Oh! yes, they're all safe; but the ship is all to pieces."

"Were they saved in their boat?"

"No, that's all to pieces."

"How then?"

"A queer boat took them off; not their boat."

"Are you sure they are all safe?"

"Yes; but all that were on board; but there was a boy killed. But I don't think it is my cousin."

"At the time of the wreck?"

"No, before the storm."

"How did it happen?"

"By a fall"

"Down the hatchways, or how?"

"No, he fell through the rigging, from the mast."

She presently observed, "My aunt is below, telling them all about it, and I shall hear it when I go down."

My rooms being a selection from two houses, this "below" meant two stories lower in the next house.

She continued talking of other things for an hour longer, and before she awoke, the gentlemen were gone. After inquiring whether she was refreshed by her sleep, and whether she had dreamed, ("No,") we desired her to let us know if she heard news of the wreck; and she promised, in all simplicity, that she would. In another quarter of an hour, up she came, all animation, to tell us that her cousin and all the crew were safe, her aunt having returned from Shields with the news. The wreck had occurred between Elsinore and Gottenberg, and the crew had been taken off by a fishing-boat, after two days spent on the wreck, their own boat having gone to pieces. She was turning away to leave the room, when she was asked,—

"So all are saved—all who left the port?"

"No, ma'am," said she, "all who were on board at the time: but they had had an accident;—a boy fell from the mast, and was killed on the deck."

Besides having no doubt of the rectitude of the girl, we knew that she had not seen her aunt,—the only person from whom tidings could have been obtained. But, to make all sure, I made an errand to the cottage the next morning, well knowing that the relieved mother would pour out her whole tale. My friend and I encouraged her; and she told us how she got the news, and when she brought it to Tynemouth,—just as we knew before. "How glad they must have been to see you 'at ours'!" said I.

"O yes, ma'ma:" and she declared my landlady's delight.

"And J.," said I.

"Ma'am, I did not see J.," said she, simply and rapidly, in her eagerness to tell. Then, presently,—“They told me, ma'ma, that J. was up stairs with you.”

Two evenings afterwards, J. was asked, when in the sleep, whether she knew what she related to us by seeing her aunt telling the people below? to which she replied, "No; I saw the place and the people themselves,—like a vision."

Such was her own idea, whatever may be the conjectures of others.

#### LETTER IV.

Tynemouth, Nov. 24, 1844.

I have too little knowledge of Mesmerism to be aware whether the more important powers of somnambulism and clairvoyance abide long in, or can be long exercised by, any individual. I have heard of several cases where the lucidity was lost after a rather short exercise; but in those cases there was room for a supposition of mismanagement. The temptation is strong to overwork a somnambule; and especially when the faculty of insight relates to diseases, and sufferers are languishing on every side. The temptation is also strong to prescribe the conditions,—to settle what the somnambule shall or shall not see or do, in order to convince oneself or somebody else, or to gratify some desire for information on a particular subject. It is hard to say who was most to blame with regard to Alexis,—the exhibitor who exposed him to the hardship of unphilosophical requirements, or the visitors who knew so little how to conduct an inquiry into the powers of Nature, as to prescribe what her manifestations should be. The "failures," in such cases, go for nothing, in the presence of one new manifestation. They merely indicate that there is no reply to impertinent questions. The successes and failures together teach that the business of inquirers is to wait upon Nature, to take what she gives, and make the best they can of it, and not disown her because they cannot get from her what they have predetermined. Strongly as I was impressed by this, when reading about Alexis, from week to week last spring, I still needed a lesson myself,—a rebuke or two such as our somnambule has more than once given us here. As soon as her power of indicating and prescribing for disease was quite clear to us, we were naturally anxious to obtain replies to a few questions of practical importance. We expressed, I hope, no impatience at the often repeated "I'll try to see: but I can't make it out yet." "I shall not get a sight of that again till Thursday." "It's all gone:—it's all dark,—and I shall see no more to-night." We reminded each other of the beauty and value of her truthfulness, from which she could not be turned aside, by any pressure of our eagerness.

But one evening out came an expression, which procured us a reproof which will not be lost upon us. She was very happy in the enjoyment of some of her favorite objects, crying out "Here come the lights! This is a beautiful light! It is the quiet, steady, *silent light*!" And then she described other kinds, and lastly one leaping up behind the steady light, and shining like the rays of the sun before the sun itself is visible. When this rapture had gone on some time, she was asked "What is the use of these lights, if they show us nothing of what we want?" In a tone of gentle remonstrance, she said earnestly, "Ah!—but you must have patience!"

And patience comes with experience. We soon find that such extraordinary things drop out when least expected, and all attempts to govern or lead the results and the power are so vain, that we learn to wait, and be thankful for what comes.

The first desire of every witness is to make out what the power of the Mesmerist is, and how it acts. J seems to wish to discover these points; and she also struggles to convey what she knows upon them. She frequently uses the act of mesmerizing another person as soon as the sleep becomes deep; and if not deep enough to please her, she mesmerizes herself,—using manipulations which she can never have witnessed. Being asked about the nature of the best mesmeric efforts, she replied that every power of body and mind is used, more or less, in the operation; but that the main thing is to desire strongly the effect to be produced. The patient should do the same.

"People may be cured who do not believe in the influence; but much more easily if they do."

"What is the influence?"

"It is something which the Mesmerizer throws from him; but I cannot say what."

And this was all that evening; for she observed, (truly,) "It is a few minutes past the half hour; but I'll just sleep a few minutes longer."

"Shall I wake you then?"

"No, thank you; I'll wake myself." And she woke up accordingly, in four minutes more. Another evening, "Do the minds of the Mesmerist and the patient become one?"

"Sometimes, but not often."

"Is it then that they taste, feel, &c., the same things at the same moment?"

"Yes."

"Will our minds become one?"

"I think not."

"What are your chief powers?"

"I like to look up, and see spiritual things. I can see diseases; and I like to see visions."

When asked repeatedly whether she could read with her eyes shut, see things behind her, &c., she has always replied that she does not like that sort of thing, and will not do it;—she likes "higher things." And when asked how she sees them—

"I see them, not like dreams in common sleep,—but things out of other worlds;—not the things themselves, but impressions of them. They come through my brain."

"Mesmerism composes the mind, and separates it from the common things of every day."

"Will it hurt your Mesmerist?"

"It is good for her. It exercises some powers of body and mind, which would otherwise lie dormant. It gives her mind occupation, and leads her to search into things."

"Can the mind hear otherwise than by the ear?"

"Not naturally; but a deaf person can hear the Mesmerist, when in the sleep;—not any body else, however."

"How is it that you can see without your eyes?"

"Ah! that is a curious thing. I have not found it out yet."—Again when she said her time was up, but she would sleep ten minutes longer.

"Shall I leave you, and mesmerize Miss M.?"

"No: I should jump about and follow you. I feel so queer when you go away; The influence goes all away.—It does so when you talk with another."

"What is the influence," &c. &c. as before.

"I have seen as many places since I was mesmerized; but they all go away when I wake. They are like a vision,—not a common dream."

"How do you see these? Does the influence separate soul and body?"

"No: it sets the body to rest; exalts and elevates the thinking powers."

When marking, from her attitude and expression of countenance, the eagerness of her mind, and vividness of her feelings, and when listening to the lively or solemn tones of her voice, I have often longed that she had a more copious vocabulary. Much has probably been lost under the words "queer," "beautiful," "something," "a thing," &c., which would have been clearly conveyed by an educated person. Yet some of her terms have surprised us, from their unsuitableness to her ordinary language; and particularly her understanding and use of some few, now almost appropriated by Mesmerism. On one of the earliest days of her sleep, before we learned her mesmeric powers and habits, she was asked one evening, after a good deal of questioning,

"Does it tire you to be asked questions?"

"No."

"Will it spoil your lucidity?"

"No."—Whereat I made a dumb sign to ask her what "lucidity" meant.

"Brightness," she instantly answered.

In the course of the day, her Mesmerist asked her carelessly, as if for present convenience, if she could tell her the meaning of the word "lucidity."

J. looked surprised, and said, "I am sure, ma'am, I don't know. I don't think I ever heard the word."

When asleep the next day, she was again asked,

Does it hurt your lucidity to be asked many questions?"

"When not very deep in sleep, it does."

"What is lucidity?"

"Brightness, clearness, light shining through. I told you that yesterday."

"Have you looked for the word since?"

"No: and I shall not know it when I am awake."

It struck us that we would try, another evening, whether her Mesmerist's will could affect her taste. In her absence, we agreed that the water should be silently willed to be sherry next night. To make the experiment as clear as possible, the water was first offered to her, and a little of it drank as water. Then the rest was, while still in her hands, silently willed to be sherry; she drank it off,—half a tumbler full—declared it very good; but, presently, that it made her tipsy. What was it? "Wine—white wine." And she became exceedingly merry and voluble, but refused to rise from her chair, or dance any more, or go down stairs, for she could not walk steady, and should fall and spoil her face, and moreover frighten them all below. I afterwards asked her Mesmerist to let it be porter the next night. J. knew nothing of porter, it seems, but called her refreshment "a nasty sort of beer." Of late she has ceased to know and tell the time,—“can't see the clock-face,” as she declares. The greatest aptitude at present seems to be for being affected by metals, and for the singular muscular rigidity producible in the mesmeric sleep.

When her arms or hands are locked in this rigidity, no force used by any gentleman who has seen the case can separate them; and in her waking state she has certainly no such muscular force as could resist what has been ineffectually used in her sleeping state. The rigid limbs then appear like logs of wood, which might be broken, but not bent; but a breath from her Mesmerist on what is called by some phrenologists the muscular organ, causes her muscles to relax, the fin-

gers to unclose, and the limbs to fall into the attitude of sleep. During these changes, the placid sleeping face seems not to belong to the owner of the distorted and rigid limbs, till these last slide into their natural positions, and restore the apparent harmony.

Not less curious is it to see her inextricable gripe of the steel snuffers, or the poker, detached by a silent touch of the steel with gold. When no force can wrench or draw the snuffers from her grasp, a gold pencil-case or a sovereign stealthily made to touch the point of the snuffers, causes the fingers to unclasp and the hands to fall. We have often put a gold watch into her hands, and when the gripe is firm, her mesmerist winds the gold chain round something of steel. In a minute or less occurs the relaxation of the fingers, and the watch is dropped into the hand held beneath. While grasping these metals she sometimes complains that they have burnt her.

## LETTER VII.

Tynemouth, Nov. 28, 1844.

Many persons suppose that when the truth, use, and beauty of Mesmerism are established, all is settled; that no further ground remains for a rejection of it. My own late experience, and my observation of what is passing abroad, convince me that this is a mistake. I know that there are many who admit the truth and function of Mesmerism, who yet discountenance it. I know that the repudiation of it is far more extensive than the denial. It gives me pain to hear this fact made the occasion of contemptuous remark, as it is too often by such as know Mesmerism to be true. The repudiation I speak of proceeds from minds of a high order; and their superstition (if superstition it be) should be encountered with better weapons than the arrogant compassion which I have heard expressed.

I own I have less sympathy with those who throw down their facts before the world, and then despise all who will not be in haste to take them up, than with some I know of, who would seriously rather suffer to any extent, than have recourse to relief which they believe unauthorized; who would rather that a mystery remained sacred than have it divulged for their own benefit; who tell me to my face that they would rather see me sent back to my couch of pain than witness any tampering with the hidden things of Providence. There is a sublime rectitude of sentiment here, which commands and wins one's reverence and sympathy; and if the facts of the history and condition of

Mesmerism would bear out the sentiment, no one would more cordially respond to it than I—no one would have been more scrupulous about procuring recovery by such means—no one would have recoiled with more fear and disgust from the work of making known what I have experienced and learned. But I am persuaded that a knowledge of existing facts clears up the duty of the case, so as to prove that the sentiment must, while preserving all its veneration and tenderness, take a new direction, for the honor of God and the safety of man.

Granting to all who wish that the powers and practice of Mesmerism (for which a better name is sadly wanted) are as old as man and society; that from age to age there have been endowments and functions sacred from popular use, and therefore committed by providential authority to the hands of a sacred class; that the existence of mysteries ever has been, and probably must ever be, essential to the spiritual welfare of man; that there should ever be a powerful sentiment of sanctity investing the subject of the ulterior powers of immortal beings in their mortal state; that it is extremely awful to witness, and much more to elicit, hidden faculties, and to penetrate by their agency in to regions of knowledge otherwise unattainable;—admitting all these things, still the facts of the present condition of Mesmerism in this country, and on two continents, leave to those who know them, no doubt of the folly and sin of turning away from the study of the subject. It is no matter of choice whether the subject shall remain sacred—a deposit of mystery in the hands of the Church—as it was in the Middle Ages, and as the Pope and many Protestants would have it still. The Pope has issued an edict against the study and practice of Mesmerism in his dominions; and there are some members of the Church of England who would have the same suppression attempted by means of ecclesiastical and civil law at home. But for this it is too late; the knowledge and practice are all abroad in society; and they are no more to be reclaimed than the waters, when out in floods, can be gathered back into reservoirs. The only effect of such prohibitions would be to deter from the study of Mesmerism, the very class who should assume its administration, and to drive disease, compassion, and curiosity into holes and corners to practice as a sin what is now done openly and guiltlessly, however recklessly, through an ignorance for which the educated are responsible. The time past for facts of natural philosophy to be held at discretion by priesthoods; for any facts which concern all human beings to be a de-

posit in the hands of any social class. Instead of re-enacting the scenes of old—setting up temples with secret chambers, oracles, and miraculous ministrations—instead of reviving the factitious sin and cruel penalties of witchcraft, (all forms assumed by mesmeric powers and faculties in different times), instead of exhibiting false mysteries in an age of investigation, it is clearly our business to strip false mysteries of their falseness, in order to secure due reverence to the true, of which there will ever be no lack. Mystery can never fail while man is finite: his highest faculties of faith will, through all time and all eternity, find ample exercise in waiting on truths above his ken: there will ever be in advance of the human soul, a region “dark through excess of light;” while all labor spent on surrounding clear facts with artificial mystery is just so much profane effort spent in drawing minds away from the genuine objects of faith. And look at the consequences! Because philosophers will not study the facts of that mental rapport which takes place in Mesmerism, whereby the mind of the ignorant often gives out in echo the knowledge of the informed, we have claims of inspiration springing up right and left. Because medical men will not study the facts of the mesmeric trance, nor ascertain the extremest of its singularities, we have tales of Estaticas, and of sane men going into the Tyrol and elsewhere to contemplate, as a sign from heaven, what their physicians ought to be able to report of at home as natural phenomena easily producible in certain states of disease. Because physiologists and mental philosophers will not attend to facts from whose vastness they pusillanimously shrink, the infinitely delicate mechanism and organization of brain, nerves and mind are thrown as a toy into the hands of children and other ignorant persons, and of the base. What, again, can follow from this but the desecration, in the eyes of the many, of things which ought to command their reverence? What becomes of really divine inspiration when the commonest people find they can elicit marvels of prevision and insight? What becomes of the veneration for religious contemplation when Estaticas are found to be at the command of very unhallowed—wholly unauthorized hands? What becomes of the respect in which the medical profession ought to be held, when the friends of the sick and suffering, with their feelings all alive, see the doctors’ skill and science overborne and set aside by means at the command of an ignorant neighbor—means which are all ease and pleasantness? How can the profession hold its dominion over minds, however

backed by law and the opinion of the educated, when the vulgar see and know that limbs are removed without pain, in opposition to the will of the doctors, and in spite of their denial of the facts? What avails the decision of a whole College of Surgeons that such a thing could not be, when a whole town full of people know that it was? Which must succumb, the learned body or the fact? Thus are objects of reverence desecrated, not sanctified, by attempted restriction of truth, or of research into it.—Thus are human passions and human destinies committed to reckless hands, for sport or abuse. No wonder if somnambules are made into fortune-tellers—no wonder if they are made into prophets of fear, malice and revenge, by reflecting in their somnambulism the fear, malice, and revenge of their questioners; no wonder if they are made even ministers of death, by being led from sick-bed to sick-bed in the dim and dreary alleys of our towns, to declare which of the sick will recover, and which will die! Does any one suppose that powers so popular, and now so diffused, can be interdicted by law—such oracles silenced by the reserve of the squeamish—such appeals to human passions hushed—in an age of universal communication, by the choice of a class or two to be themselves dumb? No: this is not the way. It is terribly late to be setting about choosing a way, but something must be done; and that something is clearly for those whose studies and art relate to the human frame to take up, earnestly and avowedly, the investigation of this weighty matter; to take its practice into their own hands, in virtue of the irresistible claim of qualification. When they become the wisest and most skilful in the administration of Mesmerism, others, even the most reckless vulgar, will no more think of interfering than they now do of using the lancet, or operating on the eye. Here, as elsewhere, knowledge is power. The greater knowledge will ever insure the superior power. At present, the knowledge of Mesmerism, superficial and scanty as it is, is out of the professional pale. When it is excelled by that which issues from within the professional pale, the remedial and authoritative power will reside where it ought: and not till then. These are the chief considerations which have caused me to put forth these letters in this place;—an act which may seem rash to all who are unaware of the extent of the popular knowledge and practice of Mesmerism. The *Athenæum*\* is not likely to reach the ignorant classes of our

towns; and if it did, the cases I have related would be less striking to them than numbers they have learned by the means of itinerant Mesmerists. The *Athenæum* does reach large numbers of educated and professional men; and I trust some of them may possibly be aroused to consideration of the part it behoves them to take.

As for the frequent objection brought against inquiry into Mesmerism, that there should be no countenance of an influence which gives human beings such power over one another, I really think a moment's reflection, and a very slight knowledge of Mesmerism would supply both the answers which the objection requires. First, it is too late, as I have said above; the power is abroad, and ought to be guided and controlled. Next, this is but one addition to the powers we have over one another already; and a far more slow and difficult one than many which are safely enough possessed. Every apothecary's shop is full of deadly drugs—every workshop is full of deadly weapons—wherever we go, there are plenty of people who could knock us down, rob, and murder us; wherever we live there are plenty of people who could defame and ruin us. Why do they not? Because moral considerations deter them. Then bring the same moral considerations to bear on the subject of Mesmerism. If the fear is of laying victims prostrate in trance, and exercising spells over them, the answer is, that this is done with infinitely greater ease and certainty by drugs than it can ever be by Mesmerism; by drugs which are to be had in every street. And as sensible people do not let narcotic drugs lie about in their houses, within reach of the ignorant and mischievous, so would they see that Mesmerism was not practised without witnesses and proper superintendence. It is a mistake, too, to suppose that Mesmerism can be used at will to strike down victims, helpless and unconscious, as laudanum does, except in cases of excessive susceptibility from disease; cases which are of course under proper ward. The concurrence of two parties is needful in the first place, which is not the case in the administration of narcotics; and then the practice is very uncertain in its results on most single occasions; and again, in the majority of instances; it appears that the intellectual and moral powers are more, and not less vigorous than in the ordinary state. As far as I have any means of judging, the highest faculties are seen in their utmost perfection during the mesmeric sleep; the innocent are stronger in their rectitude than ever, rebuking levity, reproving falsehood and flattery, and indignantly refusing to tell secrets, or say or do any thing they ought not; while

\* The Letters were first published in London, in the "Athenæum, a Journal of English and Foreign Literature and the Fine Arts."

the more faulty confess their sins, and grieve over and ask pardon for their offences. The volitions of the Mesmerist may actuate the movements of the patient's limbs, and suggest the material of his ideas; but they seem unable to touch his *morale*. In this state the *morale* appears supreme, as it is rarely found in the ordinary condition. If this view is mistaken, if it is founded on too small a collection of facts, let it be brought to the test and corrected. Let the truth be ascertained and established; for it cannot be extinguished, and it is too important to be neglected.

And now one word of respectful and sympathizing accost unto those reverent and humble spirits who painfully question men's right to exercise faculties whose scope is a new region of insight and foresight. They ask whether to use these faculties be not to encroach upon holy ground, to trespass on the precincts of the future and higher life. May I inquire of these in reply, what they conceive to be the divinely appointed boundary of our knowledge and our powers? Can they establish, or indicate, any other boundary than the limit of the knowledge and powers themselves? Has not the attempt to do so failed from age to age? Is it not the most remarkable feature of the progress of Time that, in handing over the future into the past, he transmutes its material, incessantly, and without pause, converting what truth was mysterious, fearful, impious to glance at, into that which is safe, beautiful and beneficent to contemplate and use,—a clearly consecrated gift from the Father of all to the children who seek the light of his countenance. Where is his pleasure to be ascertained but in the ascertainment of what he gives and permits, in the proof and verification of what powers he has bestowed on us, and what knowledge he has placed within our reach? While regarding with shame all pride of intellect, and with fear the presumption of ignorance I deeply feel that the truest humility is evinced by those who most simply accept and use the talents placed in their hands; and that the most child-like dependence upon their Creator appears in those who fearlessly apply the knowledge he discloses to the furtherance of that great consecrated object the welfare of the family of man.

#### HARRIET MARTINEAU.

These letters of Miss Martineau are hard pills for the "old ladies in breeches" to swallow and it is amusing to see the wry faces they make in contemplation of the dire necessity which awaits them. The Editor of the London *Lancet* has had the ludicrous vanity to

express his astonishment at the temerity of Miss Martineau in resorting to the remedial agency of mesmerism, after he forsooth! had exposed what he arrogantly assumed to be its "arrant, trickery and scandal." It appears, however, that this vaunted exposition was not very satisfactory even to the venerable sisterhood in inexpressibles, with which he has latterly identified himself; and it is perfectly evident to every discerning reader of his flippant and inconsequential remarks upon this case, that he has not only superciliously dismissed it without investigation, but is blankly ignorant of the whole subject of which he coolly usurps the umirage. But even this conduct is tolerable, perhaps only laughable, when compared with the outrageous brutality of the attack upon Miss Martineau, committed by a Dr. Robert Hull, of Norwich, in England, where that distinguished lady resides. It is far too indelicate, both in expression and allusion, for reprint in this work, and is only equalled by the meanest blackguards. Yet this coarse and unmanly piece of obscene scurrility, together with the Lancel's arbitrary contemptuousness, with a few garbled extracts from Miss Martineau's letters, is eagerly selected and hashed up by the Boston *Medical Journal*, for the benefit of its readers or the musty fraternity in this country to whom we have referred. [Editor Dissector.

#### The Presence of Animalculæ in the Blood.

Dr. Goodfellow relates, in the *Medical Gazette*, a case of fever in which he discovered a great number of animalculæ in the contents of the stomach and in the blood. The following is a condensation of his remarks:—

"On examining the fluid ejected from the stomach during life, and on the day following that on which the vomiting commenced, by the aid of the microscope, myriads of animalcula were observed in very active motion. These minute organisms appeared to vary in length from 1-5000th to the 1-3000th of an inch, and their diameter (which I am convinced was the same throughout their length) from about 1-40,000th to about 1-2000th of an inch. Nothing was observed by which I could distinguish the head from the tail, although sometimes one extremity appeared certainly larger than the

other; close observation enabled me to discover that this appearance was owing to one extremity being a little out of focus; when the whole of one animalcule was in focus, no difference could be detected. Their movements, when active, closely resembled those of the small naiades so frequently seen in river water after rain, but when they became sluggish from the inclosure of the animalcula between slips of glass for several hours, they resembled those of the larvæ of the common meat fly, *musca vomitoria*. The fluid ejected after every attack of vomiting was found to contain the animalcula in as large numbers as when it was first examined; they were also found in the sanguineous exudation from the lining membrane of the mouth and nostrils. The vomited matters also contained a considerable quantity of altered blood corpuscles, epithelial cells, and a small quantity of mucus, but no trace of bilious admixture. Similar animalculæ were observed in blood taken from the capillaries of the skin, but in such small numbers that they escaped my notice for several examinations. Repeated observation, however, ultimately convinced me of their existence in the blood taken from the capillaries during life. At the autopsy, forty-eight hours *p. m.*, they were still seen in large numbers in the contents of the stomach, and in the blood taken from both sides of the heart, and the aorta, carotid, *venæ cavæ*, pulmonary artery and veins, brachial artery and veins, and the femoral artery and vein. They were also found, during life, in the fæces, but here they were never seen to exercise any movement.—None could be detected in the gall-bladder or biliary ducts, in the pancreatic fluid, in the urine, or in the frothy mucus in the large bronchial tubes.

Dr. Goodfellow expresses his ignorance of the manner in which those animals got into the blood-vessels. He does not believe that they were introduced into the blood from the stomach, but rather that they passed, and they could do this readily, owing to their minute size, from the blood-vessels into the stomach.—*London Lancet*.

#### Means of Arresting Hæmorrhage from Leech Bites.

The "*Journal de Chirurgie*" contains the details of an interesting case, narrated by Dr. Bordes, in which the twisted suture was successfully used to arrest hæmorrhage from leech bites. The operation is a trifling one, and, it appears, always successful, and consequently deserves to be better known. M.

Bordes was called one evening to attend a young English lady, twenty-two years of age, who had had forty leeches applied to the abdomen at seven o'clock in the morning. Seven or eight of the leech bites were bleeding in the same manner as if veins had been opened with the lancet. She had lost all consciousness. Compression was impossible, and cauterization was not likely to succeed with so abundant a flow of blood. M. Bordes, recollecting the manner in which veterinary surgeons close the vein after bleeding horses, resolved to try the effect of the twisted suture. Pinching the skin at the orifice of the wound he passed a small needle through it, and then tied a thread around. The slight operation was repeated for each orifice, and effectually arrested the bleeding. It was only the following day that the lady recovered her senses, and the convalescence lasted three months. M. Bordes has since frequently resorted to this plan, and always with success.

*On the consequences of Insects or Foreign Bodies gaining admission into the auditory passages, and on the best modes of extracting them.*

By W. WRIGHT, Esq., London.

The case mentioned by Mr. Hatfield, in *THE LANCET* for April 13th, quoted by Sir B. Brodie, of a child in whose ear there was a pea, the attempts to remove which caused death, is by no means a singular unfortunate instance, and probably had not those attempts been made so injudiciously, the case would not have terminated fatally. I had under my care, in 1818, a young gentleman who had had a pea in his auditory passage four years and a half, which I extracted without pain. I gave the particulars of the treatment in several medical journals: he is now alive, and filling a responsible station abroad.

The case of the boy who died, after suffering great agony, through injury inflicted by the endeavors to extract the head of a nail from his left ear, which was not found during his life, or after the most rigid post-mortem examination, is interesting. In that instance, an efficient examination before the cutting and laceration began, would have probably saved the poor boy's life.

A girl who died at London hospital, from the operations for extracting a pebble from her ear, was destroyed by gross ignorance.—I have pebbles, and even a small shell, which I removed from the ears of patients without pain or inconvenience. It is not necessary to mention more of those cases which have



terminated fatally through the *maladroit* endeavors of well-intentioned but incompetent men. The proper method of examining the auditory passage is so little known, that I cannot but commiserate the poor patients who are the subjects of examination by funnel-shaped spring forceps, as suggested by Kramer, and with equal stolidity imitated by other writers, some of whom give plates of this most absurd contrivance; whereas nothing is more simple or easy to the patient or practitioner than the examination of the ear, or the extraction of any substance from it. The syringe, however, is not always to be depended upon, even in the hands of the most competent operators: hence I use small steel hooks, with the handles marked, and these being passed down flatwise beyond the substance, and then turned, never fail of success; of course I have them of all sizes and shapes.

It is very injudicious to endeavor to remove any large live insect, because its struggles are so violent as to affect the brain, through the fibres of the portio dura becoming excited, and communicating that excitement to the base of the nerve. Want of attention to this caused the death of a boy in the Bristol Infirmary, several years ago; whereas had the ear been filled with oil, the insect would have been killed, and might easily have been removed. In the case of a man in Ireland, who had a horse-leech in his ear, and died an hour and a half after it was extracted, such a termination might have been prevented by either injecting salt and water, or sprinkling salt, into the ear.—*Lancet*.

#### Physiological and Pathological Researches on Tuberculosis.

BY H. LEBERT, M. D.

(*Muller's Archives*, Nos. 2 and 3, 1844.)

#### SUMMARY.

1. The pathological peculiarities of tubercle are exhibited in its microscopical structure.

2. The constant elements of tubercle are, molecular granules, an adhesive hyaline mass, and peculiar tubercle cells, from 0.05 to 0.01 of a millimetre in diameter—of irregular form, containing no nucleus but molecular granules.—Water, æther, and weak acid, scarcely change them. Concentrated alkalies, liq. ammonia, dissolve them completely.

3. The dimensions of tubercle cells undergo many variations, which depend rather

upon the different organs than upon differences of age. They are most easily recognised in crude yellow tubercle.

4. Tubercle corpuscles consist of cells having a very low power of development.

5. The opinion that tubercular substance is a modification of pus is contradicted in the most positive manner by the microscope.

6. Tubercle corpuscles are distinguished from undeveloped pus globules, by the spherical form and greater diameter of the latter. Cancer cells are clearly distinguished by their being two to four times as large, and consisting of a cell wall, and a large clear nucleus, often containing nucleoli.

7. When tubercle softens, the adhesive matter becomes fluid, and the corpuscles rounded; their opposition to each other is destroyed, they become distended, and hence appear larger. This, however, is not the result of growth, but the beginning of decay.

8. The pus which surrounds softened tubercle never originates in the tubercle itself, but is formed directly in the surrounding parts.

9. The microscope can determine whether we have to do with softened tubercle, with purulent matter, or whether there be a mixture of both.

10. Pus appears to destroy quickly tubercle corpuscles, and thus to make their individuality undistinguishable.

11. When the irregular outline and close apposition of tubercle cells, in their first stage of development, present the second stage of separation from each other, distention and roundness, then the third stage of disintegration commences. The corpuscles are broken up into a granular, half-fluid mass, and lose their individuality.

12. Tubercle becoming hard and calcareous (*état cretace*) is a natural process of cure. The peculiar elements of tubercle disappear, and become in part absorbed. In their place, small mineral granules, and sometimes crystals of cholesterine, are deposited. The deposition of lime is generally accompanied by an increase of pigment. According to the chemical analysis of M. T. Boudet, there exist, as principal elements, chlorate of sodium and sulphate of soda; salts of lime only in small quantity.

13. Among the occasional elements of tubercle may be mentioned melanosis, which is the most frequent; further, fat, filaments, dark olive-colored globules, and crystals. Sometimes we find mixed with tubercle, but in no way belonging to its substance, the products of inflammation, serum, pus, and the elements of epithelium in various forms.

14. The seat of tubercle in the lungs is generally the elastic cellular tissue. Yet it

is also found in the air vesicles, and in the bronchial capillaries.

15. The tissue of the lung surrounding tubercle may be sound, but is mostly in a state of congestion or inflammation. The last is either globular, or spread over a large portion of a lobe.

16. The pus found surrounding tubercle is often not the result of grey hepatization, but comes from the mucous membrane of the small, partly destroyed and open bronchi, in the substance of the lung.

17. The pneumonia surrounding tubercles has nothing specific; there is found in it the same elements of the exudation as in ordinary pneumonia—viz. aggregate globules, fat vesicles, pus corpuscles, &c. Tubercle corpuscles are not generally found among the products of exudation.

18. Sometimes there is found surrounding tubercle a peculiar form of chronic inflammation, with yellowish hepatization, and increased consistence of the tissue. The vesicles of the lung, small bronchi, and parenchyma, are partly filled with coagulated fibrin, and a formation of new fibrous filaments, partly with aggregate and pus corpuscles, and in the centre of the chronic slightly vascular hepatization there is found a highly vascular acute lobular pneumonia.

19. The degree of consistence of acute or chronically inflamed lungs depends upon the amount they contain of fibrin, fluid blastema, and corpuscles. Much fibrin, with a small quantity of blastema and corpuscles, produce induration; much fluid blastema, with a small number of corpuscles, cause softening. An equal proportion of these different elements produces a medium degree of hardness.

20. Lungs rendered compact from the pressure of a pleuritic effusion often exhibit throughout no appearance of inflammation.

21. The grey semi-transparent granulations of the tissue of lung are also a true form of tubercle. Their color and transparency are partly dependent on the apposition of the tubercle corpuscles to each other, throughout the intact fibres of the lung, partly on the existence of a large quantity of adhesive material.

22. The grey granulation is not always the commencement of the formation of yellow tubercle; the last is often primarily developed as such.

23. The vascular network found surrounding the grey granulations is neither a proof of inflammation nor of a new formation, but rather results from the pressure on many capillaries, occasioned by the tubercular deposition, and the consequent distention of the remaining capillaries, which are reduced in number.

24. The opinion that grey granulations may be the result of inflammation is opposed by positive observation.

25. The process of ulceration is throughout different from that of suppuration. Thus we find on the mucous membrane of the bronchi, suppuration without ulceration, and on the intestinal mucous membrane, ulcers without suppuration. The last cause of ulceration is from inflammation by parasitic deposition, sometimes from causes unknown to us, producing obliteration in a certain number of capillary vessels.

26. The tubercular ulcer of the lung is not physiologically different from the tubercular ulcer of the intestines or of the skin.

27. In tuberculosis a general ulcerative diathesis is found to take place even in organs where tubercles appear very seldom. This is clearly established by the excellent labors of Louis.

28. The internal fluid layer of the contents of a cavernous ulcer of the lung, contains—*a*, tubercular substance, seldom intact, the corpuscles for the most part in a state of distention, or broken down into granules; *b*, pus corpuscles sometimes in small quantity; *c*, "puridea" corpuscles; *d*, aggregate corpuscles; *e*, purulent mucus; *f*, blood corpuscles; *g*, filaments of the lung; *h*, black pigment; *i*, epithelium; *k*, sometimes crystals; and *l*, adipose tissue.

29. Amongst this thick fluid are generally found pseudo-membranes, consisting of coagulated pus elements inclosing fibrin.

30. Among the pseudo-membranes covering the diseased tissue of the lung is found a true pus membrane, consisting of filaments inclosing small corpuscles. It generally becomes partly destroyed by a new irruption of tubercle occurring in the same.

31. This membrane is a natural effort towards cure, isolating the ulcerous tissue of the lung, and thus favoring its cicatrization.

32. Between the pus membrane and the tissue of the lung is often found newly-formed filamentous tissue.

33. Surrounding the cavernous ulcer is generally found a deposition of recent crude tubercle.

34. The healing of caverns takes place,—*a*, from isolation, by means of the pus membrane, and shrinking of the cavern; *b*, by deposition of fibrin, which fills up the cavern, grows to its walls, and so forms a fibrous cicatrix; *c*, by mineral deposition in the cavity, and formation of a filamentous tissue around the same.

35. There are no peculiar mucous bodies; what has been described as such are nothing but pus corpuscles secreted from diseased

membranes. Pus tests are thus henceforth useless.

36. In the sputa of phthisical individuals the following elements are found—*a*, mucus; *b*, pus corpuscles, existing in large quantity—they are sometimes found in a shrunken state, and may easily induce error; *c*, epithelium in its various forms; *d*, granular substance in great quantity, probably consisting of broken down tubercle corpuscles; *e*, small yellow shreds, pieces of pseudo-membrane; *f*, filaments of the lung; *g*, fat vesicles; *h*, blood corpuscles, sometimes combined with coagulated fibrin; *i*, aggregate corpuscles; *k*, small infusoria, vibrios, but this seldom, and only accidentally.

37. The peculiar tubercle cells are not commonly found in the expectoration of phthisis. There are also no constant means of distinguishing the sputum of phthisis pulmonalis from that of other diseases.

38. Filaments of the lung in sputum indicate an ulcerous cavity. Their presence, however, is rather exceptionable than otherwise.

39. The greatest portion of the sputa in phthisis does not come from caverns, but is secreted from the bronchi.

40. The copious mucus and purulent secretion of the bronchi, so frequent in phthisis pulmonalis, is one of the ways nature adopts in order to prevent the great destruction of the circulation which would necessarily result from the complete imperviousness of one portion of the capillary system, and distention of the rest.

41. A portion of the broken down tubercle of the ulcerous cavity mixes itself with the expectoration; another portion is re-absorbed.

42. The law announced by Louis, that after the age of 15 years the lungs contain tubercles, when they are found in other organs, is throughout correct. It may, however, be so far modified, that if very extensive tubercular deposition has occurred anywhere in an organ—as, for instance, in the liver, the kidneys, or the peritoneum,—the lungs often contain very little.

43. In childhood, tubercles are more frequent in the membranes of the brain, the glandular system, and the peritoneum, than in adults.

44. The thickening of the pleura in tuberculosis of the lung, not only originates in inflammation, but also in increased nutrition, from its greater vascularity, dependant on the diminution of blood in the lungs. Thus a supplementary organ for the circulation of the lung is produced, and at the same time, from its growth to the thoracic walls, the

anastomosis with the great circulation is increased.

[Nothing can be more erroneous than this old astrological theory, which imputes the thickening of the pleura in tuberculosis of the lungs to inflammation. *Ed. Dis.*]

45. It results from embryological and pathological researches, that neither around the tubercle, nor in the pseudo-membrane of the pleura, are new vessels formed independent of the general circulation. New vessels in diseases are rather formed centrifugally from the general circulation.

46. The apparent transformation of the pseudo-membrane into cartilaginous substance consists only in the filaments being pressed together, without the formation of the peculiar cartilage elements. In the same manner the so-called ossification of the pseudo-membrane only consists in the deposition of an amorphous mineral formation.

47. The three principal forms of glandular tubercles are those of the more superficial—the bronchial and mesenteric glands: the last have a very slight tendency to soften.

48. The tubercular matter in the glands is throughout the same as that in other organs.

49. The existence of a sensible scrofulous matter we cannot admit; what has been considered as such is either the result of common inflammation or of suppuration—certainly under the influence of cachectic elements, but without a peculiar material or tubercular deposition accompanying the inflammation or suppuration.

50. Tuberculosis in the osseous system is a much more rare disease than is generally supposed at present. There is frequently found here a difficulty in determining between concrete pus and tubercular matter. In doubtful cases, the microscope can alone determine the diagnosis.

51. True scrofulous diseases, which are mostly distinguished by inflammatory and suppurative eliminations, are to be separated, on the one hand, from tuberculous diseases, and on the other, from idiopathic chronic inflammations of the eye, skin, glands, bones, joints, &c. The last category is often confounded with scrofula in children.

52. In a word, the positive diagnosis and abstract separation of scrofula are most urgent desiderata in modern medicine.

[The magnetic symptoms always give a positive diagnosis, but no abstract separation of scrofula. There are no such distinctions in nature or in fact. Compelled at last to acknowledge that the common cases of

chronic disease of the organs and limbs, or of the serous membranes and tissues, called chronic inflammations, are cases of scrofula, an attempt is made to set up distinctions where there are no real differences. All the cases of scrofula, in all its forms, and in all ages and conditions, are distinguished in an instant by the same symptoms, and are constantly cured by the same remedies, and these facts, which are now known to hundreds of physicians in this country, are fatal to the assumptions on which these distinctions are founded. *Ed. Dis.*]

53. The grey granulations of the membranes of the brain—viz. of the pia mater, exhibit clearly between the filaments of the serous membrane depositions of tubercle corpuscles. They present themselves, besides, frequently in the brain, together with yellow miliary tubercle; with tuberculous infiltration, as well as with large tubercles.

54. In the liver, tubercles are often found in very considerable masses, and even with true caverns. These cases are easily confounded with cancer. In like manner, the change into softening and breaking down of certain cerebriiform tumours of the liver often present a similar appearance to tuberculous depositions.

55. Besides the fatty depositions in the liver, fatty degeneration of the heart is sometimes present in phthisis; also a tendency to internal depositions of fat, whilst, for the most part, it disappears from the external parts.

56. The kidneys also may be almost entirely filled with tuberculous degeneration. In these cases fewer tubercles are found in the lungs.

57. In tubercles of the peritoneum there are found, together with tubercle corpuscles, several filaments of the serous membrane. Peritoneal tubercles have little tendency to softening. They are mostly accompanied by a considerable pigmentary deposition.

58. Tuberculosis of the peritoneum produces sometimes perforation of the intestine, which is generally fatal; but in very rare cases, life is maintained by the formation of an artificial anus.

59. The consistence of crude tubercle in the intestines is usually less thick than it is in other organs. No pus is found upon tuberculous intestinal ulcers.

60. The microscopic elements of tubercular ulcers of the intestines, besides broken down tubercle cells, are cylinder epithelium,

broken down granular mucous membrane, and the filaments and bundles of the muscular coat. The young epithelial cells are not to be confounded with pus corpuscles.

61. On the diseased mucous membrane of phthisis are occasionally found polypi, melanotic and tubercular excrescences.

62. In extremely rare cases, tubercles are found deposited between the coats of arteries, an exceedingly important fact for (in favor of) the excretion of tubercle from the blood.

63. Tubercles are also found in the pericardium and heart. An extensive adherence often thus takes place, and a vascular anastomosis of the branches of the coronary artery with those on the surface of the lungs, a remarkable communication between the vessels of the larger and smaller circulations.

64. Tubercles in the cavity of the chest, as well as of the abdomen, can open themselves externally, and thus form fistulæ of the lungs and of the intestines.

65. Tubercles and cancer do not exclude one another, or even interfere with their separate march. Both morbid processes can at the same time run through their stages of development in the same person.

[We have investigated long since and very thoroughly the subject of cancer connected with scrofula with the magnetic symptoms, dissections and the microscope, and have little doubt but there will hereafter be found a fallacy in those investigations, which will be fatal to the distinctions that are here attempted to be established. It is only in the second stage of tubercular disease of a gland, a membrane or tissue that cancerous degeneration is developed, and then only when every other contiguous membrane, fibre, tissue or substance becomes equally involved in the disease, and this condition appears to be always necessary to the true cancerous formation.

We will not affect to conceal the fact that we republish the above comprehensive summary of elaborate researches on Tubercular disease, with a degree of satisfaction partaking of a sense of personal triumph. It is now many years since we advanced the self-same doctrines of the all-pervading character of Tuberculosis, in calm and confident independence of the ignorant sneers and arrogant denunciations of a large portion of

the profession. To scoff them as "visionary theories" and "arrant quackery," was, even within a recent period, deemed almost essential to professional respectability among those who condescended to advert to them, or in whose hearing they were mentioned. It was of no consequence that we had traced and demonstrated them in the most "regular" and legitimate manner, and by a process of induction as severe and scrutinizing as is ever adopted in any scientific investigation; it was a matter of no weight with these inflated scorners that we had verified and matured these doctrines by the ocular evidence of many continuous dissections, and by the results of experience in a long, extensive, and laborious practice, both in town and country. All this was of no value with such opponents, first, because they had not made these discoveries themselves; secondly, because they were new; and, thirdly, because they had not received the approving stamp of *foreign* authority. Now, however, that our original views, publications and practice upon these subjects, and our most novel and even startling propositions, have been confirmed by such men as Lugol, Louis, Lisfranc, and others of the eminent Parisian schools; now that our long-proclaimed doctrine that the ganglia of the posterior spinal nerves are connected with the ganglia of the great sympathetic nerve; and as the latter are connected with the organs, so external pressure on the former would indicate the seat of disease in those organs—now that this connection has received full and irresistible confirmation by the dissections and microscopic determinations of Volkmann and Bidder, the German anatomists, behold! our lofty medical *savans* stroke their chins, knit their brows, and look as sage and as comical as the carved heads of their canes. With what grotesque caprice of physiognomy they will peruse the above synopsis of Tuberculosis, by Lebert, from *Muller's Archives*, it is rather difficult to imagine; and it is to be regretted that it cannot be caught by the Daguerreotype process, for the embellishment of the medical journals of the schools. [Ed. Dis.]

On the cure of Deafness by puncturing the membrana tympani.

Sir Astley Cooper wrote a memoir on this subject in the "Philosophical Transactions," and shewed that the cases likely to be relieved by the practice were those in which the Eustachian tube was permanently closed, or when blood had been extravasated behind the membrane. To those cases other pathologists have added "a morbidly thickened and cartilaginous condition of the membrana tympani" itself. In the last number of the *Northern Journal*, we find an interesting communication on the results of the operation, by Dr. Mercer. This gentleman has performed it in several cases. He gives a table, which includes fifteen. Of these, six were performed for chronic thickening of the membrane, and the remaining nine for obstruction of the Eustachian tube. One case alone, and that of the latter affection, succeeded in the restoration of hearing. The operator then agrees with Itard in saying that "nothing is more rare than the cure of deafness by perforation of the membrana tympani." He then details at length the history of an instance of idiopathic hæmorrhage into the cavity of the tympanum. In this case, deafness, which was complete, was removed by the operation. As the example is an instructive one, we shall allow the author to describe the local appearances, the mode of operating, and the instrument:—

"The membrana tympani, instead of its normal, transparent gray appearance, had a dull brown colour, and was slightly congested at the margin; the vertical line, indicating the handle of the malleus, was lost in the surrounding colour, and the membrane, instead of presenting its concave appearance, seemed pushed outwards into the meatus. On touching it with a probe it was almost insensible, and pressure against it produced an elastic pitting. The head was carefully supported with the left ear turned up, and the auricle drawn towards the vertex. The speculum being introduced as far as the second curve of the meatus, and then expanded with a clear and steady light, the anterior and inferior part of the membrane was perforated, and a small portion of it removed by an instrument, which consists of a fine but strong steel needle, two inches and a half long, and the handle of an octagonal form, one and a half inch in length. The cutting or drill head is spear-shaped, one sixth of an inch long, and one-eighth in breadth at the shoulders, where the edges are turned over. The point and edges are very sharp. Each of these edges is hook-

shaped; one turned forwards and the other backwards; and when thus viewed longitudinally at their broadest part, they resemble the italic letter *f*. On being brought in contact with the membrana tympani, the handle is made to rotate between the thumb and fore-finger, and this being communicated to the cutting point, it perforates the membrane similar to a drill, at the same time that the averted edges are causing a considerable loss in its substance."

The subsequent treatment consisted chiefly in injections of warm water, and inflating the cavity with air, through the Eustachian tube. Dr. Mercer observed that the average time for reproduction of the membrane, when allowed to take place, was about four days.—*London Lancet*.

#### The Scalp Issue in Cerebral Diseases.

Instead of the long and frightful incision made through the scalp for the purpose of establishing this issue in chronic cerebral disease, Dr. James Johnson has adopted with success "a more simple and less painful practice."

"It consists merely in drawing a line of the kali purum along the course of the sagittal suture—poulticing till the slough clears away—and then inserting a few threads of silk or cotton daily, imbued with the ceratum lyttæ. A purulent drain is thus established with very little trouble, and with great benefit in obstinate cerebral affections."—*Medico-Chir. Review*.

#### Statistics of Obstetric Practice.

In the last number of the *Dublin Journal* we find a communication from Professor Murphy, which contains several points deserving attention. We shall refer to them in the order of their occurrence.

1. *Menstruation*.—Dr Murphy has ascertained the age at which this function commenced in 559 individuals. This inquiry has been already pursued in 450 instances by Mr. Robertson, and in 1160 by Dr. Lee. A total of 2169 cases shews,

"That there is a great variety in the age at which the catamenia first appears; 9 years [14 cases,] and 23 years [1,] seem to be the extremes; the most frequent period of its occurrence is between the ages of 12 and 18; and of those recorded, it commenced, in the greatest number of instances [417,] at 15."

The interval of the catamenial function was recorded in 591 cases by the author, and by Mr. Robertson in 100. In 557 of those cases the interval was found to be 28 days; in 105 it was 21 days; and in the remaining 29 it was irregular, varying from 14 days to

42. It should be observed, that Dr. Murphy's inquiries were addressed to pregnant females, in whom probably the menstrual period would be found to have been more regular than in the same number of females taken indiscriminately.

2. *Pregnancy*.—Its duration was made by the author the principal subject of inquiry; some curious and useful facts are the result. The number of cases in which accurate information was procured was 186; in each the catamenial period was noticed; and

"To prevent error arising from uncertainty as to the exact date of conception, this interval was deducted from the whole number of days of pregnancy; thus, 328—28 would make the duration of pregnancy 300 days."

The results thus ascertained establish 301 days as the average limit of gestation. To this there are, however, three remarkable exceptions. In the first a fully developed child was borne after an interval of 261 days. The evidence of this instance (an unmarried female, stating herself to be pregnant after one connexion) is not to be wholly relied on. In two other cases the duration of pregnancy extended to 342 and 352 days, or deducting the menstrual period to 324 and 314 days respectively. The histories of those cases given in detail are such as to lead to the conclusion that pregnancy may be prolonged to this extended period—a fact of great importance to the medical jurist. The relation of pregnancy to previous menstruation is referred to, and some exceptional cases are recorded. Thus in one instance pregnancy occurred without previous menstruation; in another menstruation ceased on marriage, and in a few cases periodic discharges resembling the catamenia were present during pregnancy.—*Dublin Journal*.

#### The Administration of Medicines in a State of Fluidity.

"It has been found that fifteen grains of sulphate of quinine exhibited in infusion of senna, are more efficacious, as a tonic, notwithstanding the aperient quality of the reliefs, than twenty-four grains of quinine taken in pills. M. Pannezza accounts for this difference by supposing that the senna, by augmenting the peristaltic action of the alimentary tube, and increasing the secretions of the bowels, excites the production of a fluid well adapted for perfectly dissolving the quinine, and in that state it is applied to a much greater surface of absorption than if it passed along the canal in the form of pills."—*Medico Chir. Review, from Medical Examiner*.

## On the Method of taking Plaster Casts.

We have frequently heard medical men express their regret at not knowing how to take plaster casts of various objects in which they felt interested. The method is sufficiently simple, as shown by the following directions, given by Mr. Butler, in the "*Zoist*," and copied into the "*Phrenological Journal*." Referring more particularly to casts of the head taken during life, they are equally applicable under all other circumstances.

"In taking casts of the head from life, precaution is necessary, to prevent adhesion of the plaster; for this purpose a lather of soap and water is employed, of a consistency similar to that used in shaving, or even stronger. With this the hair must be saturated and combed or brushed down close to the head, after which the soap and water is again applied abundantly to the smoothed surface, and, sometimes, if any doubt exist of perfect security against adhesion, the lather may be applied even a third time.

"In mixing the plaster, let a basin be nearly filled with water, and the plaster carefully and gradually but quickly scattered in with the hand until it rise to the surface, when it may be stirred with a common iron spoon. Care is necessary, in doing this, to prevent the formation of lumps.

"It will be understood that the mould must be removed from the head in sections. The simplest form of division is in two parts; the line of separation running from the throat to the back of the head, so dividing the whole into two equal portions. For this purpose, and before the application of the plaster, a thin string is passed over the face, dividing it down the centre of the nose, and again passing over the head down to the nape of the neck. This string should be arranged before the plaster is laid on. Divide the plaster into two portions; one of which place in any earthen vessel approaching in shape the back of the head, and sufficiently large to admit of immersion for the greater facility of applying the plaster. The person should be in a recumbent position, and the back of the head immersed in the vessel provided for the purpose, while the other portion is to be gently but quickly laved over the face, previously moistened with a little sweet oil. The eyebrows it will be necessary to moisten with soap lather, as also the whiskers and the eyelashes with a little oil. The whole of the head is thus covered, the nostrils of course being left open; it would, however, be advisable that novices should place quills just within the nostrils, to avoid inconvenience. The mould should be consolidated by the

repeated addition of plaster, until it is of the thickness of about half an inch, when it may be divided by drawing up the string; this must be done before the plaster acquires too great a degree of induration; then the mould may be removed without difficulty.

"The greatest care must be observed in casting the ears; in order to prevent the plaster from adhering internally or even externally. Let the whole of the crevices be well stopped with a mixture composed of soap and oil, of about the consistency of thick paste; and it may be well to observe to the inexperienced operator, that should any of the plaster form internally, it would be productive of, at least, extreme inconvenience.

"To take casts from the mould.—Immediately after the removal of the mould, tie it together and saturate it with water by steeping it during three or four minutes; and before the moisture has disappeared from the surface, pour in at the opening at the throat a quantity of plaster of the same consistency as before, and this, by turning the mould around, must be made to flow into every part of it. The plaster will be thus added until the cast be of the thickness of about half an inch. When this substance has been thus acquired, let the whole stand for a few hours, after which the mould may be removed from the cast by the careful use of a mallet and chisel.

"The multiplication of casts.—Dry the original casts thoroughly; then with a brush and some boiled oil go over the surface two or three times, after which the cast must stand a day or two, to allow it to dry, when it will be in a fit condition for the formation of the mould. For ordinary purposes the mould may be made in three pieces, of which the back of the head as far as the ears, but not including them, constitutes one, and the face, equally divided as before, affords the other two, an ear of course attaching to each. This operation is performed piecemeal. The part receiving the plaster must first be thinly coated with a mixture of oil and grease, (hogs-lard or tallow,) to prevent adhesion. When the piece is of the necessary thickness, remove it, and trim the edges with a sharp knife, after which replace it on the cast, and having greased the edges, proceed to the formation of another portion, which of course will adapt itself to the edge already prepared. When the mould is made, put it together, dry it perfectly, then oil it in the manner before described with reference to the cast, and in the course of two or three days it will be in a fit state for casting, taking care to coat it with oil and grease before taking each cast."—*Lancet*.

ON THE TREATMENT OF FEMORAL  
HERNIA.

By J. SEBASTIAN WILKINSON, Esq., Surgeon, London.

THE following case of femoral hernia occurred to me in the course of my practice some years ago; and having met with similar cases since, in the treatment of which I have been equally successful, I beg the favour of its insertion in the widely-circulated journal, *THE LANCET*.

Mrs. W——, aged forty, affected with femoral hernia, applied to me in the early part of the spring of 1833, to know if I could afford her any relief, as her case was pronounced irreducible and incurable. The subjoined is her own history of the case:—

“The swelling in the groin first appeared in the year 1823. It could then be easily returned into the abdomen. I thought nothing of it, and neglected to apply a truss. About four years before I applied for medical advice, I could not return the swelling. It was occasionally painful, especially when the bowels were confined. About three months before I consulted you, I became alarmed, owing to the increased size of the tumour, and the pain I experienced in walking. I was obliged to be particular in my diet, and keep the bowels always relaxed. I then lived as cook and housekeeper in a family residing at Newport Pagnell, who called in their family surgeon. He said he could do nothing for me, but sent me to London to Mr., now Sir Benjamin Brodie. This gentleman examined me, and said it was quite irreducible and incurable, and that my life would be endangered by any blow upon the part, or from inflammation arising from walking. He, however, considered it advisable to wear a piece of thick leather, beat out in the form of a cup, over the tumour, to be confined by a strap round the lower part of the body.”

When I saw the patient, the tumour was as big as a large walnut, doubled over Poupart's ligament; moveable, but confined at the femoral ring. It consisted of intestine and omentum, and quite irreducible. Having observed in the dissecting-room, subjects with old herniæ, with both abdominal and crural rings of a large size, I considered it feasible that dilatation might gradually be accomplished in an inverse direction.

The patient being very fat, I first reduced her in substance by bleeding twice a week, to eight, and afterwards to five ounces; low diet, consisting of broth and gruel, with warm baths, three times a-week, and occasional doses of castor oil. When the skin had become flabby, and her size reduced, I

used daily manipulations, pressing the tumour downwards and then upwards. In this way I proceeded for nearly six months, and at last succeeded in returning the rupture. I tied my silk handkerchief in a large knot, which I placed in the groin of the patient, and confined the ends on the opposite side of the pelvis, thus affording a temporary truss. I put her into a coach and sent her to Mr. Brodie, who returned me the following note:—

“MY DEAR SIR,—There appears to be nothing left but the sac, and probably a small portion of adhering omentum. There can be no objection to the patient wearing one of Salmon and Ody's trusses.

“J. S. Wilkinson, Esq.”

Mrs. W—— soon afterwards got married, and is now living in good health, with her husband, who is a farmer in Herefordshire.—*London Lancet*.

## Medical Memoranda.

*Quinine in Ague*.—Dr. Stratton thinks a single large dose in the interval, cures more rapidly than repeated small doses.

*Treatment of Neuralgia*.—Dr. Jacques, of Antwerp, recommends inoculation, by means of a vaccinating lancet, with a solution of sulphate of morphia.

M. Lafargue recommends inoculation in the same way, with a solution of veratria: and M. Roclauds, a Dutch physician, gives nux vomica, in doses of from three to ten grains in the twenty-four hours.

*Succinate of Ammonia in Delirium Tremens*.—M. Scharn has seen the most furious delirium overcome as by enchantment, and the disease removed in a few hours, by the use of this remedy alone.

*Arsenic in Peritoneal Dropsy*.—Dr. Debavay has treated a case successfully. One-twentieth of a grain was given twice a day. The improvement was notable in six weeks, and in six months all symptoms had ceased, and the catamenia, which had been suppressed, was restored.

*Mustard in the Convulsions of Children*.—Dr. Triplu was led to the employment of this remedy as an emetic, and finding it arrest in a few minutes an attack of convulsions that had lasted five hours, he has employed it in three other cases with complete success.

*Prophylactic Remedy against Ptyalism*.—Dr Schoepf recommends the following tooth-powder during the administration of mercury, to prevent salivation. Dried alum, powdered, ℥ij.; powder of cinchona, ʒj.; to be used by means of a soft brush, morning and evening.—*Northern Journal of Medicine*.



**POLYPUS OF THE WOMB.**

BY M. LISFRANC, PARIS.

[In an able notice of Lisfranc's clinical surgery in the British and Foreign Medical Review, we find some excellent and practical remarks on this subject. A polypus descending from the womb is said to be insensible, whilst an inverted uterus is very sensible. If, however, a polypus descend with a covering from the inner surface of the womb, it is evident that its sensibility will be more or less retained.]

In partial inversion of the uterus, M. Lisfranc thinks favorably of the mode of examination proposed by M. Malgaigne, which we shall describe. In this affection the bladder and a portion of the intestines are lodged in the concavity formed by the depression of the fundus of the uterus; if, then, a curved catheter is passed into the bladder with its concavity downwards, and the beak of the instrument is directed to the most depending part of the bladder, its extremity will be readily felt by the finger in the vagina, if the case is one of inversion, unless, indeed, the intestines have become adherent to the womb in such a way as to prevent the catheter penetrating into the depression formed by the inverted organ, a circumstance of very rare occurrence. But M. Lisfranc thinks that the best way of discriminating between polypus and inversion of the uterus, is by a mode of examination similar to that above recommended, in the case of an intra-uterine polypus or of a commencing inversion. If we seize and depress the tumor with two fingers passed into the vagina, and then introduce the index-finger of the other hand into the rectum, no tumor can be felt through the gut above the one which is grasped in the vagina, if the case is one of inverted uterus. But if, on the contrary, we feel through the rectum, a second tumor similar in shape to the uterus, above the vaginal tumor, then this latter tumor is a polypus. In one instance, indeed, M. Lisfranc was misled by this mode of examination; he diagnosed inversion of the uterus, but the patient having died, a small fibrous tumor was discovered implanted on the uterus, which was flattened and reduced to the tenth part of its natural size. It appears that attempts have been made to defraud the author of the honor due to this suggestion, as he subsequently "begs leave to thank the authors who have appropriated his ideas, or with characteristic candor cited them as dating from the eleventh century." It is not stated who are the delinquents here alluded to, and we are not able to supply the omission.

M. Lisfranc has on several occasions removed by enucleation both polypi and fibrous

tumors which were not pedunculated, whether situated completely within the cavity of the uterus, or having partly (or in the case of polypi entirely) made their way into the vagina. To use his own words, he "dwells on this important point of practice which he believes to be new." We need not occupy space in showing that the practice is not new, but as we believe M. Lisfranc has adopted it with more boldness than his predecessors, and under circumstances in which it was not previously applied, we shall give a summary of a few of the cases by which he illustrates this practice.

In one case having drawn a fibrous polypus almost entirely through the vulva, he perceived that its envelope, which consisted of a thin layer of the tissue of the uterus, was lacerated, and passing the index-finger through the rent, enucleated the tumor with the greatest facility. In another case enucleation was effected almost accidentally: M. Lisfranc, while examining a polypus, found the envelope give way beneath the nail of the index-finger, and by an easy manipulation enucleated the tumor in a few seconds. On examining the uterus immediately afterwards, he found that the part of that organ to which the polypus had been attached, had singularly contracted, that the depression caused by the tumor had diminished greatly in depth, and at least two-thirds in breadth, it seemed to be diminishing while the finger was in contact with it, and in ten hours the uterus had regained its natural size, and the cervix would not admit the finger. We mention these latter facts, as we conceive they have an important bearing on the question of hemorrhage after excision of polypi. M. Lisfranc has also frequently enucleated with the nail of the index-finger, small celluloso-vascular polypi occupying the neck of the womb. In a case where a fibrous tumor as large as the clenched hand projected into the vagina, its envelope was lacerated with the nails, and the contained tumor turned out. But enucleation must generally be preceded by an exploratory incision; and by this combination of means, M. Lisfranc has removed fibrous tumors while still completely included within the cavity of the uterus. A lady was reduced almost to extremity, by protracted uterine hemorrhage caused by a fibrous tumor, which could be felt through the dilated cervix uteri. The neck of the uterus was seized with Museaux's hook, depressed almost to the vulva, and a more perfect examination being then practicable, the tumor was found to extend from the middle of the body of the uterus almost to its lower extremity, and to be lodged in its posterior wall, from which it was commencing to disengage itself. With a straight, blunt-

pointed bistoury passed along the forefinger, a vertical incision was slowly and cautiously made over the tumor until the finger was enabled to be insinuated beneath the envelope and complete the enucleation, which was not accomplished without some difficulty. Occasionally enucleation may be more easily achieved by substituting a spatula for the finger. If it is necessary to enlarge the incision in order to effect the removal of the tumor, a grooved director will often guide the knife more conveniently and safely than the finger. In some cases where the cervix uteri was insufficiently dilated, M. Lisfranc divided it anteriorly. Whenever the peduncle of a polypus is very broad, we should incise the envelope, and endeavor to enucleate the tumor, in this, however, we cannot always succeed. If the tumor is removed, the envelope sometimes contracts and cicatrizes, sometimes sloughs in whole or in part.

[The removal of polypi by *ligature*, M. Lisfranc condemns in common with most French surgeons.]

#### Symptoms and Pathological Appearances in a Case of Spinal Meningitis.

The following case, from the *Guy's Hospital Reports*, affords a good illustration of this rare form of disease:—

"T. M.—, aged nineteen, of small, but well-formed frame, of temperate and regular habits, generally having good health, until eighteen months before his death, when he was treated in Guy's Hospital for pleurisy; this was followed by scarlatina; from both he recovered; but he subsequently complained of wandering pains in the *neck* and *loins*, and general *malaise*. Three months before his last admission, he had erysipelas of the face, and was confined to his bed for a few days, but perfectly recovered in about a month, at the expiration of which period he became an out-patient, the pains continuing in the *back*, *neck*, and *loins*, and being regarded and treated as rheumatism, without relief. On the Friday before admission, the pains became very much aggravated in the *neck*, *back*, and *loins*, causing him to scream violently, with great restlessness, alarm, and dread, if any one approached to touch any part of his body. These symptoms were more severe on Saturday; and on the following morning, May 7, he was admitted, with symptoms of fever, and complained of the pains in the *neck*, and *loins*, which were less severe; had great disinclination to turn in bed; and, on being raised, maintained almost a tetanic rigidity of the *muscles of the neck*, but these symptoms were not very marked

until two or three days afterwards. On the Wednesday, he lost the use of his arms for a time, and then the pains left him, but became again severe with the return of motion. On Thursday, convulsions came on; he had foaming at the mouth; the features were distorted; the hands were clenched, and he was insensible: the tonic rigidity of the neck continued. He had frequent recurrence of the convulsive attacks during the next day, when he died, trismus having been present during the two hours preceding his death.

"*Sectio Cadaveris*.—The skin, generally, and conjunctivæ, were slightly jaundiced. On opening the head, the veins and sinuses were seen large and congested; and on dividing the spinal cord, just below the medulla oblongata, some puriform-looking fluid exuded from, apparently, the centre of the cord, the cut surface of which was looser in texture than natural.

"The spinal canal being opened from behind, there was some light *ecchymosis* between the muscles, and extravasation of blood, with effusion of lymph, between the vertebræ and dura-mater: an effusion of lymph, and some puriform albuminous matter, were also seen between the arachnoid surfaces, and beneath the arachnoid itself, rendering these membranes slightly adherent and opaque. This opacity was seen especially in some spots, and evidently of no very recent character. These appearances were most observed at the fourth and fifth cervical vertebræ.

"The surface of the liver was rather pale; the edge rather rounded; and some yellowish spots, of the size of half-a-crown, surrounded by an areola of darker vascularity, were observed: these extended to the depth of half an inch. On incision, the structure was yellowish, with an occasional mottling of florid red. The lobules were universally of a pale-yellow colour; and in those parts which were of a brighter red hue, the interlobular fissures were the seat of florid vascularity. The organ was lacerated and tore with a granular appearance. This was regarded as an inflammatory condition of the liver.

"The peritoneal surface of the bladder was corrugated, thickened, and the seat of *ecchymosis*, which was also observed internally, in the submucous tissue."—[Lancet.]

The above is a plain case of serosis or tubercular disease of the liver, bladder and muscles, extending to the membranes of the brain and spinal cord, as every physician who practices the magnetic symptoms would have known without a post mortem examination.

[Ed. Dis.]

### A SUBSTITUTE FOR WOOD ENGRAVING.

By RICHARD LEWIS BEAM, Esq., M.R.C.S., London.

HAVING been engaged lately in some photogenic experiments, I tried the following method of engraving, which, although not of use in photography, appears to be an excellent substitute for wood engraving, as it takes so little time, (two or three hours,) and only costs a few pence; those who can draw a little may avail themselves of it, and I have no doubt, surgeons and others publishing would find it of great service, as the trouble and expense are so light.

I take a piece of black glass, or glass with a black ground behind; melt common wax, so that there may be a coat about the thickness of a sixpence; when this is cool, rub it over with a preparation of salad oil and white lead, mixed into an ointment; this is to give a white ground for etching upon. Trace the drawing so as to leave a red outline on the ground; proceed to etch with needles, (taking care to make the grooves perpendicularly through the wax;) when this is done, lay some water gently over the wax, and if there are any minute globules of air sticking to it, they are to be removed by gently heating with a lamp, great care being taken not to melt the wax; sprinkle some of the finest sulphate of lime, (plaster of Paris,) which is best got at the casting shops; let it combine with the water, and set. When this is done, it should be made of a convenient thickness, by adding more to the back of it; now dry, and deepen the broad lights in the same manner as a wood engraver's block; boil in glue, which will sink into the substance of the plaster, and enable it to bear pressure in printing. After this, proofs must be taken, and gradual improvements made.—*London Lancet*.

### Reciprocal influence of the Nervous and Sanguiferous Systems.

The bloodvessel and the nervous fibre are the first parts which receive life, and the last which lose it. Anatomy shows that they are always associated together in the cellular substance, which serves as a bond of union between them. Physiology displays them invariably acting in unison—and Pathology finds them very generally acting one upon the other. Let us cite a few examples in illustration of these propositions:—

A young girl, returning home one morning, was insulted by a soldier, who clasped her round the waist. She chanced to have the catamenia upon her at the time; the secretion was at once checked, and did not again return.

The mother of one of the young soldiers in the army of Italy, 1798, was told of the death of her son: she started up for a second, and the menstrual discharge ceased that very moment.

These are instances of the action of the nervous on the sanguiferous system: the following exhibit the action of the sanguiferous on the nervous.

A young Creole girl, of an hysterical constitution, was seized with spasm of the throat, which for two days prevented her from swallowing anything. She was bled; and from the moment that the blood began to flow, the spasm gave way, and she could swallow with ease.

A plethoric woman is advanced beyond the middle of pregnancy without having quickened; draw a few drops of blood from her, and the first movements of the fœtus will probably be felt forthwith — *Medico Chirur. Review*.

### PRESTAT'S ADHESIVE PLASTER.

The following composition is said never to crack, and not to inflame the skin:—Empl. Diachyl. Gum., 400 grs., Purified Rosin, 50 grs., Tereb. Venet., 38 grs., are mixed together at a gentle heat, and then 12 grs., of Gum Mastic, and 12 grs. of Gum Ammoniac incorporated, and the mass spread on linen. In winter it is advisable to add 10 grs. more turpentine, and 12 grs. of Ol. Amygdal.—*Lancet*.

### SCROFULA,

BY M. LUGOL, PARIS.

M. Lugol looks upon scrofula as an hereditary cachexia of the entire system with the intimate nature of which we are wholly unacquainted, but the manifestations of which may be followed from birth in the diseases of every tissue and of every organ. The maximum of the scrofulous diathesis is the production of tubercle, which may be generated in any region of the economy. The tubercle in M. Lugol's eyes is an organised abnormal formation, endowed with a life and nutrition of its own, and passing through the various phases of its existence like all other abnormal tissues. The development of tubercle takes place in different parts of the human economy at different periods of life, owing to various modifications of local vitality. Accompanying the production of tubercle, anteriorly or posteriorly to it, various forms of disease occur in the different tissues of persons laboring under the cachexia. These various morbid

forms are all manifestations of the scrofulous diathesis. Thus, the mucous and cutaneous surface, the bones, cellular tissue, joints, &c., are attacked with chronic inflammations, viz. ophthalmia, coryza, catarrh, diarrhœa, &c.; lupus, acne, pustular and papular eruptions; osteitis, caries, necrosis; white swellings, cold abscesses, &c. These constitute the *cortège* of the scrofulous cachexia. These are the diseases which, more or less developed, accompany the martyr of scrofula from his birth to his grave, rendering manifest to the medical observer the cachexia under which he labours, even in the absence of tubercular formations.

The characters of hereditary scrofula in a family are the existence of the scrofulous complexion among its members—the great mortality which is observed in such families more especially during infancy. These two characters may be studied—in the family itself, in the different branches which originate from the same stock, in the children of different marriages. With reference to parents who procreate scrofulous children, their giving birth to such children may be owing to their original health, in which case either they are scrofulous or affected with pulmonary tubercles; have been scrofulous during their infancy, and have ceased to appear so; have brothers and sisters who are scrofulous;—or it may be owing to an acquired state of health. Thus, syphilitical parents, parents who have given themselves up with excess to venereal pleasures; who are too young or too old; whose age is disproportionate; who are suffering from epilepsy, paralysis, or insanity, all give birth to scrofulous children; also the father whose strength is disproportioned to that of the mother. In some instances the disease is evidently transmitted by heredity without the original or acquired health of the parents being such as at first to explain the circumstances. Parents may only show symptoms of scrofula after the birth of scrofulous children. Hereditary scrofula never skips a generation.\* The hereditary causes of scrofula may be united, in variable number, in the same individual. Marriage is the most ordinary cause of the propagation of scrofulous diseases. Scrofula is very frequent among foundlings and orphans.—The seeds of scrofulous disease may be transmitted by the nurse to her nursing.

Scrofulous families says Lugol, may be recognized by the general impression of debility which all the children present; their state of health being at the most negative, and always exclusive of the attributes of health and strength, and of good organiza-

tion. Their physical forms are devoid of harmony; there is no proportion between the limbs and the trunk; the former are badly attached to a body too long or too short. The development of the similar regions of the trunk is unequal, often giving rise to deformity. The size of scrofulous children is generally short, although sometimes they grow to an extreme height. The mouth is small, and the teeth are black, and soon decay. The spongy tissue of the bones is hyperthrophied, so that the joints are disproportionately large. The spine and bones of the pelvis often give way more or less.—The digestive functions are frequently in a continued state of atony, of inertia: such children have no appetite, and do not take enough food to support the economy; others present a voracious appetite, by which, however, they do not seem to profit. The face is pale, the breath fœtid. Constipation alternates with diarrhœa, in which latter case a considerable portion of the food passes through the intestinal canal only partly digested. The skin and cellular tissue is extremely emaciated, or in a peculiar state of unhealthy, hardened hypertrophy. It is often dry, and covered with papulæ of lichen, or prurigo. Children who present these characteristics are generally idle, apathetic, and have no inclination whatever for exercise. Menstruation is very late with girls, and the age of puberty with both sexes is retarded. Writers on scrofula have generally considered a certain degree of *enbonpoint* and freshness of complexion to be peculiar to scrofulous constitutions, especially with women. This peculiar kind of beauty is certainly observed, but much less frequently than is generally supposed, and generally co-exists with some scrofulous symptom which reveals its nature, such as a too-dilated pupil; slight epiphora; habitual coryza; obstinate chilblains; a small mouth, of an ogee form; teeth too long and too close, often black and carious; too short and thick a neck; habitual leucorrhœa; dysmenorrhœa; anorexia; frequent sore throats, &c. This state of freshness and fullness seldom lasts long; it disappears early in life, leaving behind a wrinkled skin, which disfigures women who ought still to be in the bloom of youth.

Parents who are not themselves scrofulous, may, under certain circumstances, procreate scrofulous children. The abuse of venereal excitement will lead to this result; and instances of this kind are frequently seen in the higher walks of life. Early marriages are followed by the generation of scrofulous children. A man ought to be five-and-twenty before he marries; before

\* Here Lugol is mistaken. [Ed. Dia.]

that period his organization is seldom sufficiently manured to enable him to procreate healthy children. This law holds good throughout nature. The first year or two a fruit-tree bears, the fruit is small in size, in different in quality. Such marriages are principally seen in the lowest and in the highest classes of society. Scrofulous children are still more frequently the result of late marriages. If either of the parents has arrived at the time of life when the system begins to decay, their children are generally scrofulous. At the age of forty-five the procreative faculty begins to decline in man. For a few years, however, he is still able to procreate healthy children, but after fifty-two they seldom present the conditions of health. Thus, when a healthy man, advanced in life, marries, his first children are healthy, but they deteriorate as they increase in number. The same remark applies to women. As they approach the critical age their powers of reproduction diminish, and after forty their children are often scrofulous. Disproportion between the ages of the parent is a cause of scrofula among children. The wife ought to be a few years younger than the husband; if she is older the children are generally scrofulous. A man whose bodily strength is not that of his sex, especially if it is much less than that of his wife, will generally have scrofulous children; consequently the popular opinion that the children of a weak scrofulous man married to a strong robust woman will be healthy, is a fallacy. Diseases of the brain appear to modify the reproductive powers.—Those who are laboring under insanity, paralysis, or epilepsy, generally procreate scrofulous children.

Scrofula may be inoculated by suckling—a fact which has been remarked by various authors. Nurses, however, should only be made responsible for scrofula occurring in children whom they suckle, when, on the one hand, it is quite evident that no traces of that disease exists in the child's family, and when, on the other, the diseases can be traced clearly to the nurse. When the constitution of a child is contaminated from this source, its health will form a striking contrast with that of the other members of the family. As a necessary consequence of the above fact, scrofulous mothers ought never to suckle their own children.—*Lancet*.

#### CLAIRVOYANCE.

DEAR SIR—There is in this place a Clairvoyant, Jackson Davis, whose wonderful powers have for a long time astonished many

of our citizens. This young man is eighteen years of age, is uneducated, and has resided here for the last six years, and is very generally known.

What is perfectly astonishing is, when in the Clairvoyant state, he is complete master of the general sciences, such as physiology, pathology, anatomy, geology, hydrology, phrenology, astronomy, medicine, &c. He is conversant with all these sciences—distinctly points out their fundamental truths, and exposes their incidental errors. He has spoken also in as many different languages, and, whilst in that state is able and willing to give instruction on any subject which will be of benefit to mankind. He has already explained many phenomena in nature which the learned have been unable to fathom, such as for instance the cause of the *variation of the Magnetic Needle*.

Of late, he has given us four lectures on Animal Magnetism. The theory of Magnetism, as given in these lectures, is entirely new, and beautiful beyond description. He shows in a clear and lucid manner that Mesmerism is a science, and that all its phenomena are accounted for on natural principles, thus removing all the mystery in which the subject has been shrouded, and completely reversing all former theories which have been put forth—and he has given Mesmerism a new name, expressive of this fact, that of "*Clairmative-ness*."

Within the last twelve months, this young man has examined and prescribed for upwards of one hundred persons, and has restored them to health.

The names of these persons can be given if called for. Among the number, I will mention Dr. Charles Thatcher, an eminent physician of this town. This gentleman, for four years past, was afflicted with ulceration of the bowels, in consequence of which he was obliged to give up the practice of medicine. He is now restored to health.

This young man has often astonished and confounded me by revealing to me my own thoughts when I have been sitting beside him, in the trance state. And he has frequently done the same with others, in the presence of many witnesses.

He is still engaged in giving us lectures on various subjects, and these lectures in due time will be given to the public.

By giving the above a place in your paper, you will much oblige myself and many of your readers in this vicinity.

GIBSON SMITH,

Pastor of the First Universalist Society.  
*Poughkeepsie, Feb. 16, 1845.*

[*N. Y. Tribune.*]

## Bursal Swelling of the Wrist and Palm of the Hand.

By JAMES SYME, Esq.

There are few subjects of surgical practice that have occasioned more trouble and disappointment than morbid distension of the bursa, which accompanies the flexor tendons of the fore-arm, in their course under the annular ligament of the wrist, towards the fingers. The resistance of the ligament prevents any enlargement of the bursa where lying under it; but the wrist and palm become distended, so as to occasion an unseemly swelling, and weakness of the hand. The fluid effused into the cavity is generally associated with numerous small cartilaginous-looking bodies, of a lozenge or lenticular figure.

In treating this form of ganglion, the means generally employed prove very unavailing. Punctures either heal without producing any improvement, or remain open, so as to occasion obstinate sinuses. Incisions of larger extent, caustics, and setons, have all been carefully employed with very uncertain benefit, and frequently great suffering; indeed I have known the continued irritation so induced prove fatal. As the treatment of similar derangements in other parts of the body is not attended with such troublesome consequences, the question naturally presents itself, what local peculiarity is concerned in causing the obstinacy of this particular case? The reply suggested by what has fallen within my observation is, that the constriction caused by the annular ligament produces the effect in question, by preventing the portion of bursal sac corresponding to it and the subjacent tendons from undergoing the healing process. Impressed with this conviction, I tried the following experiment, the complete success of which encourages me to hope that the method pursued will be found to afford an effectual remedy for a complaint which has hitherto proved so troublesome.

Janet Preston, aged 20, was admitted on the 13th of February, complaining of pain and weakness in her left hand. The wrist and palm of the hand were much swelled, but not discoloured, and pressure on these parts caused distinct fluctuation, with the jarring sensation that characterizes effusion into the bursal sheaths. She stated that pain had been first felt about two years before, and that for the last twelve months she had had hardly any use of the hand, in consequence of the swelling, and weakness attending it. I made a free incision from the wrist into the palm of the hand, dividing the annular ligament. This gave vent to a quantity of glai-

ry fluid, with many small flat cartilaginous-looking bodies, and exposed to view the flexor tendons, separated and surrounded by thickened bursal membrane. The cavity was filled with dry lint, supported by a bandage moderately compressing the hand and wrist. In the subsequent treatment care was taken to prevent protrusion of the tendons, by drawing the edges of the wound together, and applying a compress over the seat of the annular ligament. Not the slightest disagreeable symptom followed the operation, and three days after it the patient was able to sew, which she had been prevented from doing for many months previously. In the course of a few weeks the wound healed, and the limb was in every respect perfectly sound.—*London and Ed. M. J. of M. S., Oct., 1844, p. 825.*

## Caoutchouc as a Remedy for Toothache.

Caoutchouc, becoming very smooth and viscous by the action of fire, has been proposed by Dr Rolfs as an excellent remedy for filling hollow teeth, and alleviating the toothache proceeding from that defect. A piece of caoutchouc is to be put on a wire, then melted at the flame of a candle and pressed, while warm, into the hollow tooth, and the pain will disappear instantly. The cavity of the tooth should first be cleaned out with a piece of cotton. In consequence of the viscosity and adhesiveness of the caoutchouc, the air is completely prevented from coming in contact with the denuded nerve, and thus the cause of the toothache is destroyed.—*Medical Times.*

## An Extraordinary Fact.

A case has been communicated to the Liverpool Pathological Society by Dr. Gill, of an altogether extraordinary kind. A man by the name of McIvor was dying, and the nurse who was tending him made the following statement:

"Nov. 16th, 11 P. M.—Nurse observed a 'red-hot coal-like streak' on M.'s mouth, and (playing) on his right cheek and top lip, as he lay in the insensibility of approaching dissolution. This flame lasted for about twenty minutes—i. e. until death.

"The impression on the mind of the nurse was, that he was insensible during the whole of this luminous combustion of his breath. He lay with his eyes open, on his back. The 'flame was red, just like red-hot coal-fire,' to which the nurse and the other man (McIvor) both compared it. Nurse pointed to the centre of the clear fire then burning in the ward when these notes were taken; it was 'not blue,' it was persistent with the breath of ex-

piration, ('when he breathed out,' and not *lambent*, 'not flickering, coming and going.') There was in the room a common 'raked' fire in the fireplace at the one end, close to which the nurse stood, and a gas jet burning low, (very low) suspended from a rafter in the middle of the room, and about twelve feet from the dying man's bed. M. had not been taking any phosphoric medicine at all, or any alcoholic stimulant during that day, or for six weeks previous, though he bore the character of being a drunkard. Nurse and McIvor were both terrified so much, that they dared not stir from their places until the flames had ceased."

#### General Laws Regulating the Displacement of Fractures.

M. Ed. Lacroix has published an interesting and philosophical paper on this subject, to which we beg to direct the particular attention of our surgical readers. His general conclusion is, that "the displacements of bones occur in angles which have the same sines directed in the same planes and in the same sense as the natural curves of the bones implicated."

**Clavicle.**—Displacement variable according to the point broken; forwards when the two external thirds are broken off from the inner thirds; backwards when the two inner thirds are severed from the outer third; upwards so as to form an angle with its apex superior, where the seat of fracture is the middle of the bone. When the clavicle is broken in two places, one towards the sternal, the other towards the acromial extremity, the natural curves of the bone are replaced by two angular knees, one of which corresponds to each of the solutions of continuity.

**Humerus.**—Displacement generally outwards, so as to form an angle the apex of which is external when the shaft of the bone is broken, not outwards and upwards as is commonly said by writers; the inferior portion of the bone is most apt to get in front of the superior. In fractures of the inferior extremity the displacement is mostly forwards, and there is generally an increase of concavity inwards, of convexity outwards; the inferior portion is also very apt to rotate outwards and inwards.

**Forearm.**—Tendency to displacement, outwards and backwards, when both bones give way in the middle. The ulna alone fractured in its upper portion, the tendency is to displacement backwards and outwards; in its lower portion, to displacement forwards and inwards. The radius having given way singly in its upper third, the tendency to displacement is inwards, to the formation of an

angle, the apex of which looks inwards; the bone having yielded in the middle, the angle of displacement will regard backwards; and having failed in its lower third, the angle will turn inwards and backwards.

**Femur.**—Wherever seat of the fracture, the extremity of the superior portion of the bone tends to get in front of the inferior, and to form an angle projecting outwards.

**Tibia.**—When the bone is broken in its lower moiety, there is a general tendency to rotation, in which the inner malleolus becomes more anterior; and to the formation of an angle, the apex of which looks backwards.

**Fibula.**—Constant tendency to form an angle whose apex regards inwards, and more or less backwards.

**Tibia and Fibula.**—General tendency to the formation of an angle, with its apex turned posteriorly and internally. Less disposition to rotation than when either of the bones is broken singly.

But we must refer to the original and very ingenious paper of M. Lacroix for other and more particular information, in *Annales de la Chirurgie Française, &c.*, Mars, 1844.

[*Medical Gazette.*

#### Varicocele Treated by Compression.

Mr. Curling publishes some cases of this kind to show the value of compression at the external ring in curing the enlarged veins. The cure seems to depend not so much on the pressure as on the removal of the hydrostatic pressure of the blood in the dilated veins by means of the presence of the moc-main truss. In one case "there was a large bunch of dilated veins above and behind the left testis. There was a dull aching pain, which became worse towards evening."—The moc-main lever truss was applied day and night, so as to compress the spermatic veins at the external abdominal ring. This ended in a complete cure. Another case of the same kind is related, which was equally benefitted by the compression.—*Lancet.*

#### Inoculation with *Strychnia* in Amaurosis.

BY DR. VERLEGH.

The subject was a lady, twenty-seven years of age, of nervous temperament, affected with incomplete amaurosis of the left eye, and commencement of the same disease in the right one. The disease was of three months' standing, and of rheumatic origin; after two months' fruitless efforts, Dr. Verleghe tried inoculation with the sulphate of strychnia in the neighborhood of the orbit. A grain of the salt was dissolved in two drops of water; the first day twelve inocula-

tions were performed, six above the eye in the course of the supra-orbital nerve, six under, and on the side of the nose where the ethmoidal filaments and nasal branch terminate, and whence arise the filaments which go to the iris. There was no effect that day; but next day some slight tremors occurred in the neighborhood of the inoculated spots. After two days rest the inoculations were repeated and the number of punctures increased to eighteen. The patient now became sensible of a slight haziness. After five successive inoculations, carried to the length of thirty punctures, she commenced to distinguish objects; after the eighth, vision was completely restored; the contraction of the pupil gradually increased, and the other symptoms diminished after five grains of the sulphate had been used; during the same time inoculations were had recourse to in the neighborhood of the right eye; after the lapse of two months the patient continued perfectly restored; and this the author conceived sufficiently long to warrant him in considering the cure as permanent.—*Gazetta Medica di Milano*.

#### **The Styptic Power of Ergot.**

[Mr. Liston, in his lectures on surgery, relates the following case to show the efficacy of this medicine as a styptic.]

Mr. Wright, of Nottingham, an excellent surgeon, told me of a case in which a strong decoction of the herb proved immediately efficacious in a case of very profuse and alarming bleeding. The case was a very odd one. A man in the country had been suspected of unfaithfulness to his wife, and she caught him at last in the embraces of another woman. She was in a great rage, snatched up his fowling-piece, which he had put down in the room, loaded, and when he had got fairly upon his legs, she presented it at him, and blew away one side of his face. He went on recovering very well, for a time, from this dreadful and dangerous wound, but one day very profuse hemorrhage took place. The wound was so extensive that it was impossible to say where the blood came from; it was doubtful whether even the ligature of one carotid would suffice. Knowing the powerful astringent effects of the ergot, Mr. W. begged of Dr. Sibson, the intelligent and active resident medical officer, to have a decoction of the remedy injected into the wound, and amongst the ethmoid cells, and some dossils of lint, soaked in the decoction applied to the wound. It had the effect of instantly stopping the bleeding; a clot was formed, there was no recurrence of it, and the case did very well. The oil of ergot is as I have said, reputed to be very effectual as

a styptic, and I shall certainly use it on the first favourable opportunity that presents itself.—*Lancet*, Aug. 31, 1844, p. 691.

#### **EXTIRPATION OF THE MAMMA OF A FEMALE IN THE MESMERIC SLEEP, WITHOUT ANY EVIDENCE OF SENSIBILITY DURING THE OPERATION. By L. A. Dugas, M. D. Professor of Physiology in the Medical College of Georgia.**

On the 3d of January, 1845, Mrs. Clark (wife of Mr. Jesse Clark, of Columbia county, Georgia,) came to this city for the purpose of getting me to remove a scirrhous tumor off her right mamma, which had been gradually increasing for the last three years, and which had now attained the size of a turkey's egg. The tumor had never caused any pain of consequence, was not adherent to the skin, nor did it implicate any of the axillary glands.—Mrs. C. is about 47 years of age, has never borne a child, and her health, though by no means robust, was pretty good, and had not been impaired by the evolution of the tumor. The operation having been determined upon for the following day, Mrs. C. remarked to me that she had been advised by Mr. Kenrick to be mesmerized, but as she knew nothing about it, she would like to have my advice, and would abide by it. To which I replied that there were several well authenticated cases on record, in which surgical operations had been performed under mesmeric influence, without the consciousness of the patient; that I would be happy to test the subject in her case, and that I would endeavor to mesmerize her, instead of operating as had been proposed on the day following.

On the 4th of January, at 11 o'clock, A. M. I called on Mrs. C. and was informed that on the preceding evening she had been put to sleep by Mr. B. F. Kenrick, at whose house she resided. I then mesmerized her myself, and induced sleep in about fifteen minutes. Finding my patient susceptible to the mesmeric influence, and reflecting that it would not be convenient for the same person to maintain this influence and to perform a surgical operation at the same time, I requested Mr. Kenrick to mesmerize Mrs. C. morning and evening, at stated hours, until insensibility could be induced. This was regularly done, with gradually increasing effect, when, on the evening of the 6th of January, sleep was induced in five minutes, and the prick of a pin was attended with no manifestation of pain. The sittings were continued, and the patient's insensibility daily tested by myself and others in various ways. On the 9th of January I invited Professor Ford to be present, and, after pricking and pinching strongly



the patient without evidence of pain, the mesmerizer was requested to leave the room, when we exposed the breast, handled it roughly in examining the tumor, and re-adjusted the dress, without the consciousness of the patient. We then held to her nostrils a vial of strong spirits of hartshorn, which she breathed freely for a minute or two, without the least indication of sensation, unless the fact that she swallowed once be regarded as such, instead of a mere reflex action. On the 11th of January, in presence of Professors Ford and Means, in addition to the usual tests, I made, with my pocket-knife, an incision about two inches in length, and half an inch in depth, into the patient's leg, without indication of sensation.

Fully satisfied now of our power to induce total insensibility, I determined to operate on her the next day at noon, but carefully concealed any such design from the patient and her friends, who did not expect its performance until several days later.

On the 12th of January, at twenty minutes past 11, A. M., Mrs. C. was put to sleep in forty-five seconds, without touch or pass of any kind, the facility with which the mesmeric influence was produced having gradually increased at each sitting. At 12 o'clock, in presence of Profs. Ford, Means, Gavin and Newton, and Dr. Halsee, the patient being in a profound sleep, I prepared her dress for the operation, and requested my professional brethren to note her pulse, respiration, complexion, countenance, &c. before, during, and after the amputation, in order to detect any evidence of pain or modification of the functions. As Mr. Kenrick had never witnessed a surgical operation, he feared he might lose his self-possession, and requested to be blindfolded; which was done. He now seated himself on the couch near the patient, and held her hand in his during the operation. This was accomplished by two elliptical incisions about eight inches in length, comprehending between them the nipple and a considerable portion of skin, after which the integuments were dissected up in the usual manner, and the entire mamma removed. It weighed sixteen ounces. The wound was then left open about three quarters of an hour, in order to secure the bleeding vessels, six of which were ligated. The ordinary dressing was applied, and all appearances of blood carefully removed, so that they might not be seen by the patient when aroused.—The amount of hemorrhage was rather more than is usual in such cases.

During the operation, the patient gave no indication whatever of sensibility, nor was any of the functions observed by those present modified in the least degree. She remained

in the same sound and quiet sleep as before the use of the knife. Subsequently the pectoral muscle, which had been laid bare, was twice or thrice seen to contract when touched with the sponge in removing the blood. About fifteen minutes after the operation, a tremulous action was perceived in her lower jaw, which was instantaneously arrested by the application of the mesmerizer's hand to the patient's head. This phenomenon recurred in about ten minutes after, and was again in the same manner quieted. Professor Ford, who counted the pulse and respiration, states that before any preparation was made for the operation, the pulse was ninety-six; and the respiration sixteen per minute; that after moving the patient to arrange her dress for the operation, and just before this was commenced the pulse was ninety-eight, and the respiration seventeen; that immediately after the detachment of the breast, the pulse was ninety-six, respiration not counted; and that after final adjustment of the bandages and dress, which required the patient to be raised and moved about, the pulse was ninety-eight and the respiration sixteen. All present concur in stating that neither the placid countenance of the patient, nor the peculiar natural blush of the cheeks, experienced any change whatever during the whole process; that she continued in the same profound and quiet sleep, in which she was before the operation, (with the exceptions above noted,) and that, had they not been aware of what was being done, they would not have suspected it from any indications furnished by the patient's condition.

The patient having been permitted to sleep on about half an hour after the final arrangement of her dress, the mesmerizer made passes over the seat of the operation, in order to lessen its sensibility, and aroused her in the usual manner, when she engaged in cheerful conversation with Mr. Kenrick and myself, as though she had no suspicion of what had taken place. I then introduced to her the gentlemen who had placed themselves so as not to be seen by her on awakening, and observed, that I had invited them to come in during her sleep, in order that we might fully test her insensibility, preparatory to the operation. After a few minutes of conversation, I asked her when she would like to have the operation performed? to which she replied, the sooner the better, as she was anxious to get home. I added, "Do you really think that I could remove your entire breast, when asleep, without your knowledge?" Answer. "Why, doctor, the fact is, that from the various experiments I am told you have made on me, I really do not know what to think of it. "Well, madam, suppose I were to perform the operation one of these days, and

to inform you of it when you would awake, would you believe me, and could you control your feelings, on finding that it had been done?" Answer. "I could not suppose that you would deceive me, and of course I would be very glad, but would try not to give way to my feelings." "Have you perceived since your arrival here, or do you now perceive, any change in the ordinary sensations of the affected breast?" "No, sir; it feels about as it has done for some time back." About a quarter of an hour having elapsed since she woke, I then told her that, as we found her in a proper state for the operation. I had performed it, and that the breast was now removed. She expressed her incredulity—said I was certainly jesting, as it was impossible that it could have been done without her knowing it at the time, or feeling any thing of it now. She became convinced only on carrying her hand to the part, and finding that the breast was no longer there. She remained apparently unmoved for a few moments, when her friends approaching to congratulate her, her face became flushed, and she wept unaffectedly for some time. The wound healed by the first intention.

In laying the above narrative before the profession, it is due to the cause of truth to state, that it has been submitted to all the physicians present at the operation, and that I am authorized by them to say that it accords in every particular with their own observations so far as they were present. I should also add that, having no other object in view than the establishment of the fact that a surgical operation may be performed under such circumstances, without the consciousness of the patient, I have designedly avoided any mention of the various and interesting mesmeric phenomena manifested prior and subsequently to the operation.

AUGUSTA, Ga., Feb. 1st, 1845.

[Southern Med. and Sur. Jour.]

#### MAGNETIC SLEEP.

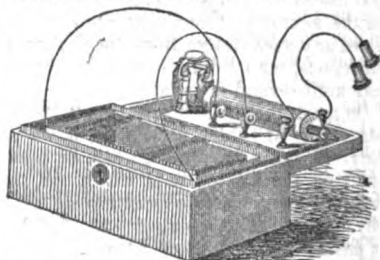
(Continued from Page 45.)

The internal organization of the pole in the centre of the brain, as disclosed in the somniscient state, is a subject of great interest; for the interior inverted cone, described by clairvoyants, is the magnetic miniature germ of the form of the brain. The heart, lungs, stomach, and other organs, as well as the limbs, have magnetic miniature germs of their organizations, which are varied, according to the variations in the forms of the organs and limbs, as seen by clairvoyants. These organizations are also seen to be connected together by magnetic axes and interlacings, irrespective of the organization of the nervous system, and constitute a perfect mag-

netic, spiritual, or immaterial form, corresponding with that which is material. They are purely spiritual forms, connected with, or inclosed in, those that are material, and according to the concurrent testimony of clairvoyants, these spiritual forms are raised in all the beauty of their earthly tenements.

The germs with which the human system was formed and perpetuated, are, therefore, magnetic or immaterial forms, inclosed in those that are material; and according to the same concurrent testimony, the entire animal and vegetable kingdoms were formed, and perpetuated in the same manner. Hence we infer a corresponding cosmogony of the solar system, and of the stars in the heavens.

VIBRATING MAGNETIC MACHINE.



We have substituted a spring, as seen in the above figure, which vibrates so fast as to make the motion of the forces continuous. The power of the instrument is also greatly increased, and, with the continuous motion of the forces, makes them greatly superior to the rotaries, or any other instruments for magnetizing. We have also made other important improvements connected with these machines, in which no expense has been spared to render them every thing that could be desired for the purpose for which they are intended.

The construction of these machines is so simple as to make any instructions for running them apparently unnecessary. We may, however, observe that the solution of sulphate of copper, with which the instrument is run, should be a saturated solution, or as strong as it can be made, and should be poured into and nearly fill the space surrounding the zinc: when, on adjusting the conducting wires from the battery to the instrument, as seen in the above engraving, the armature or spring will commence vibrating, if the screw presses moderately upon it.

If the pressure, however, is very strong, strike the spring downwards with the end of the finger, when it will vibrate unless the screw presses too hard.

A very little attention to the effect of the

screw upon the action of the spring, will enable any person to understand it, and to see that the intensity of the forces from the machines may be varied by the screw as well as by the piston.

### CASES.

#### CHRONIC MUCOSIS\* OF THE LUNGS.

##### *Chronic Bronchitis.*

Mr. J. G. of Sixth Avenue, New York, aged 40 years. Called to see him Nov. 17th 1844, and found him in the last part of the last stages of chronic mucosis of the lungs. He had severe hemorrhage from the lungs about three months before, about a year after the disease commenced, and was now raising large quantities of matter—was emaciated, had night sweats and sleepless nights—was sinking fast under the ordinary treatment, and in this state abandoned by his family physician as a hopeless case.

There was no pain or tenderness produced by pressure on the ganglions of the spinal nerves connected with the lungs or any other organ.

We now magnetized his lungs in the most thorough manner, and directed Mrs. G. to repeat the operation morning and evening, and give him a pill of the following prescription, morning, noon and night.

Hard Bal. Copa and Cubebs, - - 3 iiss  
Ext. Hyos. - - - - - 3 ss

Make one hundred pills.

We also directed the use of Port wine or strong beer morning and evening, and brandy at dinner, with the most nourishing diet. Mrs. G., after having recovered from her frightful apprehensions of a return of the hemorrhage, from the gormandizing beverage we had prescribed, promised a faithful adherence to our advice, and afterwards called upon us once a week with buoyant spirits to advise us of the favorable progress of the case.

At the end of four weeks a messenger called to inform us that "a gentleman whom we had cured of consumption" had that day "examined Mr. G. and found he had tubercles in his lungs, and required the gold pills."† I had, however, no hesitation in declaring my belief that the gentleman was mistaken, but promised to call and see the patient, when, on applying pressure upon the ganglions of the spinal nerves connected with the lungs, we found them very sensitive, and consequently that tubercles had formed in his lungs, as they frequently do in the last stage of mucosis. His cough and expectoration had, however, been gradually decreasing—his night sweats had disappeared, and he had gained flesh and strength.

We now added to our prescription in this case the magnetized gold pill morning and evening, and in five weeks from this time his cough and expectoration ceased, and he is now, Feb. 20th, attending to his daily routine of business.

We have selected this case for notice from among many others, to show the effect of the treatment in chronic mucosis, and also as an example of the development and treatment of tubercles in the last stage of the disease.

#### CHRONIC SEROSIS\* OF THE UTERUS, STOMACH, AND LIVER.

##### *Tubercula; Chlorosis; Green Sickness; Pylidus Morbus.*

Miss J. S. of Newark, N. J., aged 22 years. On an examination of this young lady in June, 1844, there was found great sensibility to pressure on the ganglions of the spinal nerves connected with the heart, stomach, liver, and uterus, and it was two years since her health began to decline, and a year and a half since the last recurrence of the catamenia. She was greatly emaciated—her skin perfectly blanched—was very feeble, and in the last part of the last stage of the disease. She had been a long time under the ordinary routine of treatment of the schools, but the disease continued to make progress.

The gold pills were now prescribed, with the action of the Rotary Magnetic machine, and we magnetized the diseased organs from one to three times a week. It was, however, five or six weeks before the disease began to give way, when she began to gain strength, and to show some color in her skin.† Her appetite began to increase, and she now began to gain a little flesh, and more color in the skin. In about four months her breasts began to expand, and in about six months the catamenia appeared, after an absence of more than two years, and her health was soon re-established. As a matter of curiosity, we have since looked into a number of recent medical works of high reputation, to see the notions of the writers on the subject of the fatal disease called *Chlorosis*, with which our patient was affected; and we have no hesitation in saying that none of them knew a word of the true cause of the phenomena presented in such cases, or of the proper treatment of the disease.

#### CHRONIC SEROSIS OF THE ABDOMEN.

##### *Ascitis Dropsy.*

In the last stage of chronic disease of the organs, their serous surfaces excrete an albuminous serum, which accumulates in the

\* Chronic diseases of the mucous membranes.

† We did not learn the name of the gentleman.

\* Chronic disease of the serous membranes.

† This young lady required constantly two of the gold pills a day to keep her from sinking.

cavity of the abdomen, and distends it. Serum is also excreted by the serous surfaces of the fascia of the muscles, when the feet, ankles, and legs, begin to swell, and sometimes, with the abdomen, become very large.

We commenced magnetizing a perfectly hopeless case of this kind about seven weeks since, of a lady aged 40 years, and the results have been such as to leave little doubt that the forces from the magnetic machines will be found greatly superior to any other remedy in such cases. It was a case of serous disease, and very great enlargement of the left kidney.

We placed the negative button over the ganglion of the spinal nerve connected with the organ, and moved the other, repeatedly, all over the abdomen, under the full power of the instrument. We then placed the positive button over the ganglions of the spinal nerves connected with the stomach, and repeated, with the negative button, the operation over the abdomen, and then magnetized the feet and legs in the usual manner, under the full power of the instrument.

We repeated this operation nearly every day, with a daily progress of improvement, without any other aid than that of Homœopathic medicines, and the swellings have now nearly disappeared, and the lady's general health and strength greatly improved.

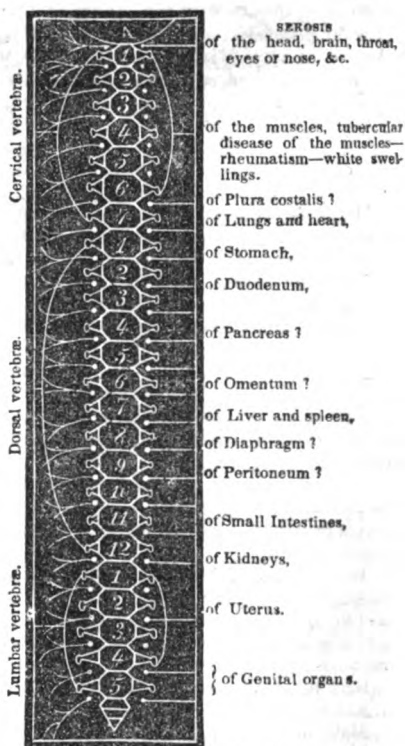
On reading over this case, I find I have described it so as to make it appear not more than about half as bad as it really was, or would have appeared had it been described by her family physician, who prescribed the medicine required during the time we were magnetizing her.—[Sherwood's Manual for Magnetizing, fifth edition.

#### ANATOMY AND PHYSIOLOGY.

It is now more than thirty years since we ascertained by the magnetic symptoms, and by post-mortem examinations, that there was a direct connexion between the ganglions of the spinal nerves, and the serous surfaces of the organs, as well as with the muscles.—These ganglions were thus found to be connected with the different organs, and with the muscles, in the order described in diagram A.

The intermediate ganglions are no doubt connected with the different viscera, and a physician of this city has, at our request, directed his attention to this subject. He has been trying to determine these connections by the action of the magnetic machines, and the result thus far makes the probable connections as marked with interrogation points.

When the doctor found tenderness on applying pressure over the ganglions, thus



marked, he placed the positive button over the ganglion thus indicated; and then passed the negative button over the entire surface of the chest and abdomen, under a moderate power of the instrument, by which sensations, more or less painful, were produced on different parts of these surfaces, and which induced him to locate the connexions as above described.

No opportunity has, however, occurred to test their correctness by post-mortem examinations, and we would now suggest to physicians who are practising the magnetic symptoms, and using the magnetic machines, the importance of these scientific investigations, and of ascertaining, and publishing, as soon as possible, the true connections of these ganglions with the viscera.

The connections of the spinal nerves between the 3d and 4th, 5th and 6th, and 10th and 11th dorsal, should also be ascertained, as well as the connection of the lumbar vertebrae in males, corresponding with those that are connected with the uterus in females.

This is a fine field for investigation and for distinction, and we hope that the enterprising young men of the profession will not fail to enter upon it.—[lb.

Letter to the Editor from J. D. Friend, M. D.  
 Middletown, N. Y., March 6, 1845.

DR. SHERWOOD—Dear Sir:—I am much gratified with the Magnetic Machine. I consider it, from the opportunities I have had of testing its virtues, an *invaluable* assistant to the practitioner: and these opportunities have not been few; for I have used it, during the last two months, in more than thirty cases; and in each instance the effect has been more or less salutary. In the first case which I used it, I was astonished at the *immediate* relief it afforded the patient. This was a case of Tic Douloureux, and abscess of the Alveolar process. The patient was a lady nearly sixty years of age, and had been afflicted for more than six years. The pain was so severe that I was assured by her relatives she had not for three months previous to my being called, slept *five minutes* during the night. After the first application she rested well and sent for me early to repeat the operation. The result is that she is nearly as well as she ever was, with every prospect of her complete restoration. In cases of Rheumatism, Head-ache, Bronchitis, and Prolapsus Uteri, I can confidently recommend the Machine as a remedial agent which will not disappoint the practitioner. I may mention, in closing this brief communication, that a severe case of *colic* which came under my observation was completely cured in less than ten minutes by the application of the machine.

I have been very much amused at the reports which have been circulated in reference to the supernatural effects which have been attributed to this beautiful piece of mechanism, which is rather a matter of surprise since there is such a wonderful propensity in the human mind to reject everything which does not come recommended for its antiquity; and it can be for this reason and for no other that mankind have adhered with such pertinacity to the absurdities and contradictions and barbarisms of a false school of medicine; and it is a fact that the inquirer after truth who endeavours to arrive at *practical* knowledge by an examination and study of the countless volumes which have been issued by as many ambitious aspirants, must of necessity become lost and bewildered in the search, without having the satisfaction of knowing that he has, by concurrent testimony, established in his mind *one important principle*—one universally acknowledged opinion!

Knowledge and science are ever progressive; and he who with a self-satisfied and egotistical air laughs at the pretensions of any fresh discovery, without previously in-

vestigating its merits, may aptly be compared to the snail, which inhabiting its own narrow shell, thinks the whole universe lies within the scope of its limited vision. He who will not read and compare and investigate must remain in ignorance; and while it is the duty of every man to deal justly with every subject that may be presented to his mind, he acts unwisely when he *takes that for granted*, which the testimony of centuries even has stamped with the seal of approval. *For the reason*, simply, that a certain dogma comes down to us dressed up in the habiliments of age, and loaded with the "dust and cobwebs of time" is no *real* evidence of its correctness. DOUBT, IGNORANCE AND STUPIDITY have ever been at work, rearing boundaries and barriers to the advancement of the human intellect: and they have been arrested most ardently by our "Medical professors" and the host of "blind leaders of the blind." In the study of medicine we have taken too much for granted. And we have found it easier to follow than to lead. The *ipse dixit* of the celebrated Doctor such-an-one has been received with all the meekness and servility of an urchin in the school room. The scientific conclusions of the learned Sir John Somebody, have placed the capstone upon a given science: and sacrilegious are the hands that dare attempt to hurl it from so proud an eminence or carry the structure to a more grand and dazzling height.

The "science of medicine," if it could be embodied, would be found to have upon its huge trunk ten thousand wounds and bruises and putrifying sores that can never be "bound up or mollified with ointment!"

But, thanks to the "dawning intelligence" of the age, men are beginning to break away from the restraints of the schools, and are weighing and investigating for themselves. They are beginning to discover the absurdities and gilded ignorance of those schools, and to follow more closely the dictates and teachings of plain experience and nature.

Yours, truly,

John Wesley and Electricity.

The individual whose name stands at the head of this article was one of the most remarkable men of the past century. For depth of scholarship, consistent piety, abundance of labors, and a rich harvest of success, he has been excelled, or even equalled, by few men since the days of the apostle Paul. The general wisdom of his plans and arrangements is manifest from the fact that more than a million of his followers are found in this country, and nearly that many more in Great

Britain and Ireland, whose consistent piety is read and known of all men. He died at the advanced age of 88; and although not a day was given to repose, nor an hour to unnecessary leisure, for 70 years he did not lose a night's sleep, and such was his capability to endure fatigue, that in his eighty-fifth year, he speaks of that day as a day of leisure, in which he preached only twice. It was the misfortune of this distinguished man, quite early in his public life, to be the subject of a severe pulmonary affection, bringing him almost to death's door. This fact, in connexion with many others which came under his observation, induced him to pay particular attention to the economy of nature and the laws of life. His work entitled, "*Primitive Physic*," or "*An easy and natural method of curing most diseases*," reached its twenty-third edition before his death in March, 1791. It is not my intention to notice at length more than one of the remarkably simple and therefore efficient remedies there suggested for the relief of human suffering;—one only shall claim our attention: it is *Electricity as a remedial agent*. It was soon after the very interesting experiments of Drs. Franklin, Lovett, Hoadly, and others, were published, that Mr. Wesley collected together the sum of what had been written on this subject, and published it with this title: "*Desideratum: or Electricity made plain and useful*." By a lover of mankind and common sense." His opinion of its efficacy is thus expressed:

"Indeed there cannot be in nature any such thing as an absolute panacea—a medicine that will cure every disease incident to the human body. If there could, Electricity would bid fairer to do it than any thing in the world; as it takes place in such a vast number of disorders, some of them so widely different from the others."

On the 26th of February, 1753, there is the following statement in his journal. "I advised one who had been troubled many years with a stubborn paralytic disorder, to try a new remedy. Accordingly she was electrified, and found immediate help. By the same means I have known two persons cured of an inveterate pain in the stomach; and another of a pain in his side, which he had had ever since he was a child. Nevertheless who can wonder that many gentlemen of the faculty, as well as their good friends the apothecaries, decry a medicine so shockingly cheap and easy." In perfect accordance with this, on the 9th Nov. 1756, I find the following: "Having procured an apparatus on purpose, I ordered several persons to be electrified, who were ill of various disorders; some of whom found an immedi-

ate, some a gradual cure. From this time I appointed, first, some hours in every week, and afterwards, an hour in every day, wherein any that desired it might try the virtue of this surprising medicine. Two or three years alter, our patients were so numerous that we were obliged to divide them. So part were electrified in Southwark, part at the Foundry, others near St. Paul's, and the rest near the seven dials. The same method we have taken ever since; and to this day, white hundreds, perhaps thousands, have received unspeakable good, I have not known one man, woman, or child who has received any hurt thereby; so that when I hear any talk of the danger of being electrified, (especially if they are medical men who talk so,) I cannot but impute it to a great want either of sense or honesty."

As the work to which I have alluded is entirely out of print, I beg leave to make the following quotations from its preface:

"And yet there is something peculiarly unaccountable with regard to its operation. In some cases where there was no hope of help, it will succeed beyond all expectation; in others where we had the greatest hope, it will have no effect at all. Again, in some experiments, it helps at the very first, and promises a speedy cure; but presently the good effect ceases, and the patient is as he was before. On the contrary, in others it has no effect at first; it does no good; perhaps seems to do hurt. Yet all this time it is striking at the root of the disorder, which in a while it totally removes. Frequent instances of the former we have in paralytic, of the latter in rheumatic cases.

"But still one may, upon the whole, pronounce it the *Desideratum*. The general and rarely failing remedy in nervous cases of every kind (palsies excepted) as well as in many others. Perhaps if the nerves are really perforated (as is now generally supposed) the electric ether is the only fluid in the universe which is fine enough to move through them. And what if the nervous juice itself be a fluid of this kind? If so, it is no wonder that it has always eluded the search of the most accurate naturalists.

"Be this as it may, Mr. Lovett is of opinion, 'the electrical method of treating disorders cannot be expected to arrive at any considerable degree of perfection, till administered and applied by the gentlemen of the faculty.' Nay, then *quanta de spe decidi*! All my hopes are at an end. For when will it be administered and applied by them? truly *ad Græcis Calendis*. [Never.]

"Therefore, without waiting for what probably never will be, and what indeed we have no reason to expect, let men of sense

do the best they can for themselves, as well as for their poor, sick, helpless neighbors. How many may they relieve from racking pain or pining sickness, by this unexpensive and speedy remedy! restoring them to ease, health, strength, generally in a few minutes, frequently in a moment! And if a few of these lovers of mankind, who have some little knowledge of the animal economy would only be diligent in making experiments, and setting down the more remarkable of them, in order to communicate them one to another, that each might profit by the others' labor, I doubt not but more nervous disorders would be cured in one year, by this single remedy, than the whole English MATERIA MEDICA will cure by the end of the century."

The above testimony is valuable not only because of the source from whence it comes, but because it is confirmed by recent experiments, and is entirely disinterested: as such it is commended to the attention of the public.

R.

Newark, N. J., March 1, 1845.

DR. SHERWOOD:

Sir—For more than a year past, I have been in the constant use, in my practice, of the Electro-Magnetic Machine, and I must acknowledge it has more than met my expectations in its effects. It exerts a most surprising influence in reducing inflammations, soreness and pains. It seems to exhilarate the nerves, excite the absorbents, dissolve and remove obstructions in many instances in an extraordinary manner.

I applied it to an elderly gentleman who had a large tumor on the lower point of the sternum, of some thirty years standing. It caused it to suppurate in a few days, and entirely removed it. I applied it to a Mr. L. for a tumor on the side of the neck, of some ten years standing, and in a few weeks it caused suppuration, and completely cured it.

I have given permanent relief to several cases of Tic Douloureux, and restored the senses of hearing and smelling. In one or two cases of mucous diseases the effect has been astonishing.

I have recently applied it with wonderful effect in a very severe case of hip disease, using also your Electro-Magnetic pill at the same time.

I have just relieved two severe cases of St. Vitus' dance; and I might multiply the cases, but this must answer for the present.

As ever,

L. D. FLEMING.

# MAGNETIC MISCELLANY.

In magnetizing a boy aged 12 years on the 23d of March inst., with recent paralysis of the left arm, tongue and face, and tetanic rigidity of the muscles of the neck, &c., we placed the positive button in his left hand, and the negative button in our left hand, while we made passes with the right hand over the face during four or five minutes. In about five minutes from the time we finished the operation, our left arm began to ache,\* and the intensity of this sensation increased so rapidly as to completely paralyze the arm in one minute, and in about two minutes it was so great as to be insupportable. A sinking sensation began to pervade the system, when we called for assistance, and had the negative button quickly placed in the left hand, and the positive on the neck, under the full power of our largest machine. We soon felt a pleasant sensation from the action of the instrument—the horrible aching sensation began to give way, and in about five minutes it had ceased very nearly, and the motion of the arm restored. In this case the disease in the left arm of the boy was conducted to our left arm by the current from the positive button in an opposite direction from the current which was at the same time moving from the negative to the positive button.

This manner of magnetizing is a very pleasant one for patients, but sometimes, as we have now learnt, a very dangerous one for magnetizers.†

The most severe cholic pains are reduced with great rapidity by the action of the machines, as we are informed by several physicians. Two cases of recent dropsy—one from chronic serosis or tubercular disease of the heart and muscles, and the other from chronic serosis of the liver and right kidney, have, we are also informed, been promptly removed by the action of these instruments.

Asthma's which have long defied every

\* ACHEING is the sensation produced by the prevalence of the positive over the negative force, and PAIN the sensation produced by the prevalence of the negative over the positive force.

† We have taken disease in mesmerizing patients, and in each case it was the exact counterpart of the disease with which the patients were affected.

other remedy, have readily yielded to the action of these machines. In these cases patients should be magnetized as in Bronchitis.

The importance of a scientific application of the buttons may be seen in the fact that many cases of disease which resisted an empirical manner of magnetizing, have yielded readily to a scientific application of the buttons.

Dr. Cox, of Williamsburg, N. Y., has cured a bad case of white swelling of the knee, with the Savage Rotary Machine alone.

Dr. Baker, of Brooklyn, New York, has brought a child about two years old to life, and saved it with one of these machines, after it had been apparently dead ten or fifteen minutes.

Dr. — brought a child to life under similar circumstances. It breathed a few minutes, but in consequence of some difficulty in running the machine, the child was lost. On learning these circumstances, we determined, if possible, to have a machine which should not be subject to such accidents, and we have succeeded in the Vibrating Machine with the assistance of the ingenious Mr. Cornell, of the Magnetic Telegraph.\*

**SALT RHEUM.** The worst cases of this disease are quickly cured by the action of the machine. Dilute Sulphuric acid is the remedy to use at the same time. One drop of the acid to ninety of alcohol—magnetize. Dose three to five drops two or three times a day, in a wine glass of water.

Dr. Milsbaugh, of Orange county, N. Y., has cured a case of Amaurosis with the Savage Rotary Machine.

There are some cases of rheumatism in which pain in a limb or other part of the system commences or is increased on becoming warm in bed at night. In these cases the Tincture Rhus Toxicodendron† is the remedy which should be used in conjunction with the action of the machine. Dose 1 to 3 drops in a wine glass of water, three times a day, according to the age and condition of the patient.

\* Importers are already engaged in attempts to impose on the public miserable imitations of these machines.

† Weissmann & Cassebeer, German Apothecaries, New York.

**BILIOUS FEVERS.**—A number of physicians of this city and country, have reduced violent paroxysms of fever with these instruments, in from five to ten minutes. The excessive action of the instrument on persons in health, produces fever.

The blood is dark colored in fevers and in acute and chronic diseases, and becomes more florid under the action of the instrument.

In the Vibrating Magnetic Machines, the circuit of the forces is broken so fast as to make their motions continuous, without variation of intensity except by the action of the piston, and they consequently accumulate in the system with great rapidity.

In from five to ten minutes from the time we commence magnetizing patients, the pores of the skin are generally opened by the action of these forces, and they begin to perspire. It is commonly only necessary for patients to hold the buttons in the hands, under a moderate power of the instrument, to obtain these results.

Nothing can be compared to the curative action of these machines in acute diseases, or in inflammations. The Lancet, Calomel, and Blue Pill, which entail diseases on millions of the human race every year, may now be laid aside with perfect safety to patients, and abiding benefit to their posterity.

Some physicians think these instruments are of greater importance in acute diseases than in those that are chronic, from the great rapidity of the cures in such cases. They should, however, never forget the fact, that chronic diseases are slow in their progress, and consequently necessarily so in the cure.

**ULCERATED EARS.**—R. Jamaica spirits, a wine glass. Honey, a tea-spoon full. Mix, and introduce a little into the ulcerated ear morning and evening, with a feather.—[Dr. Van Buren.

**RHEUMATISM.**—The nitrate of potash (salt petre) is far superior to the hydriodate or iodide of potash in rheumatism or tubercular disease of the muscles, as well as in other scrofulous affections, or tubercular disease of other parts of the system. Yet physicians will prescribe the hydriodate until it goes out of fashion.