

SOUTHERN
MEDICAL AND SURGICAL JOURNAL.
(NEW SERIES.)

Vol. XVI.

AUGUSTA, GEORGIA, JUNE, 1860.

NO. 6

ORIGINAL AND ECLECTIC.

ARTICLE XV.

The Endermic use of Animal Fat in Typhoid Fever. By
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It is a true philosophy which teaches us to take truth wherever it may be found. It is a philosophy, the object and tendency of which, is to render common things extensively useful, and useful things extensively common; and which teaches the medical man that instead of saying and doing things to make people stare and wonder, he should endeavor rather, to say and do those things that will hereafter prevent them from wondering and staring. It is a philosophy, the results of which prove that, in proportion as we approach to science, we shall attain to simplicity.

Actuated and encouraged, then, by the motto, "*Je prends le bien ou je le trouve*," I have determined to offer to the Profession some observations relative to the therapeutical value of the endermic application of animal fat, or oil, in fevers, especially those of the typhoid type.

Aware that the best way to secure for any remedy the consideration and confidence claimed for it, is to determine and explain its mode of action, my object will be to demonstrate that the value of the one I now propose, is of a two-fold nature. First, by acting, during its application, both by reason of its specific property and the friction employed,

as a topical diaphoretic, softening and relaxing the skin, exciting to action its secretory organs, and thereby restoring its often greatly impeded, if not wholly suppressed, important exhalent function. Secondly, having been absorbed from the skin into the system, it goes directly to the nourishment of the nervous tissue, and, also in a general way, exerts an eutrophic effect during the progress of the fever, by serving as fuel for its consuming fires, and thereby preventing the too rapid interstitial chemical change progressing under such circumstances, so destroying the tissues, so weakening and impoverishing the vital powers, that finally the entire organism gradually fails, and at last succumbs, an unresisting victim, to the incessant and insatiable ravages of a continued fever.

The explorer in the field of pathology or therapeutics, without the aid and guidance afforded by a knowledge of physiology, is like the voyager at sea without the compass to direct his way; therefore, in the attempt to show the importance of the indications claimed to be fulfilled by the remedy which is proposed, and in the effort to prove its *modus operandi* in meeting them, I will be compelled to draw largely from the treasury of physiological knowledge, which, at the present day, gives so much certainty, value and power to the science of medicine.

It is claimed, first, that the endermic application of fat, or animal oil, is beneficial in fever, by restoring the often greatly interrupted and important function of the skin, and keeping it in that soft, moist and pliant state peculiar to health. Now, without supposing, by any means, that an interruption of the transpiratory function of the skin is often a cause of fever, and having, as a general thing, very little faith in the efficacy of the ordinary diaphoretic agents of the *Materia Medica*, it would, nevertheless, be absurd to deny that, in the progress of fever, the function of the skin is often greatly interrupted, if not occasionally, wholly arrested, and that this consequent interruption often seriously aggravates the disturbing cause and greatly embarrasses

the treatment; and that therefore a restoration of this function is often an important indication to be fulfilled.

In order to ascertain satisfactorily the desirableness of preserving the function of the cutaneous surface in the treatment of disease, it will be necessary to inquire what the objects of that function are, and the means by which those objects are carried out. With a view to this end, let it be considered what an extensive excreting apparatus is formed by the aggregation of the cutaneous glandulæ. According to Erasmus Wilson, each glandule is formed by the convolutions of a single tube, which, when straightened out, is about a quarter of an inch in length, the average number of pores in each square inch throughout the body, is about 2,800—the number of square inches of surface, in a man of medium stature, is about 2,500; this gives seven millions as the whole number of pores, and, therefore, 1,750,000 inches of perspiratory tubing, which is 145,833 feet, or 48,600 yards, or nearly 28 miles! This extensive system of glandulæ subserves manifold and important purposes. It helps to regulate the temperature of the animal body; it acts vicariously with the urinary secretion when that apparatus is at fault; it assists in aerating the blood, and at the same time, in eliminating from it carbonic acid;* and, in addition, is also continually throwing off a large amount of effete matter, and thus preventing an accumulation of morbid materials in the blood. Hence, it is claimed

* Experiments leave no doubt but that such a process is effected, to a certain extent, through the medium of the cutaneous surface; for example, when a limb has been enclosed for some hours in an air-tight vessel containing atmospheric air freed from carbonic acid, a sensible amount of that gas is found to have been generated. Moreover, the livid hue of the surface resulting from asphyxia, has been observed to give place after death to the fresh color of health upon free exposure of the body to the air, owing to the interchange of gases between the air and the blood through the skin. It is, therefore, by no means improbable that when, from any cause, the function of the lungs is impeded, the introduction of oxygen and the exhalation of carbonic acid through the skin undergoes considerable increase. We therefore recognize the importance of such a vicarious action on the part of the skin in those diseases where there exists a rapid circulation with imperfectly performed respiration, producing, of course, an undue and injurious accumulation of carbonic acid within the system. Such a condition is frequently observed in pneumonia, and in those cases of scarlet fever in which, from the swelling of the cervical glands, respiration is greatly obstructed.

that in the treatment of fevers, attention to the function of the skin is a matter of great importance, for, in its healthy action, we have a vast channel for the elimination from the blood of the *materies morbi*. But, does experience and observation justify these views? The statement here of a few well known facts will, it is thought, prove that they do. It has been ascertained, by reliable and scientific observation, that persons who have been constantly, day and night, exposed to that morbid influence of the atmosphere existing during an epidemic of yellow fever, but who have kept their skins constantly bathed in perspiration by the employment of the most active and stimulating sudorifics, have either entirely escaped the disease, or taken it at a late period of the epidemic, in its mildest form.

In scarlet fever, a disease affecting at once the entire surface of the skin, we have, in the anasarca, so frequently occurring during the stage of desquamation, when the function of the skin is most interfered with, strikingly manifested the injurious consequences of such an interruption.

Again, in the operations of Nature, from the observation of which so much may be learned, it is found that a copious perspiration is frequently used for the purpose of removing the cause of the malady from the blood, thereby becoming the turning point or crisis of the disease. Thus, certain forms of rheumatism are characterized by copious acid perspirations, and these should doubtless be encouraged as a means of freeing from the blood the morbid matter, in the form of an undue accumulation of lactic acid. Upon such principles undoubtedly depends, to a great degree, the benefit resulting from the employment of the wet sheet as used by the Hydropathists, and which is one of the most powerful of all diaphoretics. Finally, laying aside all these facts, the vital importance of the cutaneous function is proven conclusively by the fact that, if in health, the exhalent action of the skin be completely checked by the application of an impermeable varnish, death ensues in a short time.

I have been induced thus to dwell upon the philosophy

of the cutaneous function, and the importance of maintaining it if possible, intact, in the treatment of febrile diseases, from the fact that a late and standard writer upon therapeutics, in his essay upon diaphoretics, has, I think, much underrated the importance of the function, the evil consequences of its interruption, the necessity for its restoration, and the value of the means employed for that purpose.

Having, I trust, succeeded by the collocation of the foregoing facts and circumstances, in showing that it is an important item in the treatment of disease, to keep in its normal activity the eliminating function of the skin, and that any therapeutical means capable of accomplishing this end, is valuable, and entitled to confidence, I come again to reiterate that I have uniformly found such a means in the endermic application of animal fat.*

I have for the past five years employed it in all cases where there existed a harsh and dry skin, with the unfailing effect of rendering it soft and pliant, just as it would an old piece of indurated leather. In scarlet fever, its application is especially indicated, both during the height of the fever, and in the subsequent stage of desquamation. I have found nothing so beneficial in softening the skin and soothing the irritation during the eruption; and I have also ascertained that its continued application during the period of convalescence, combined with the occasional use of the warm bath, tends, almost certainly, to prevent the subsequent and so much dreaded dropsical effusion.

* I will here state, that this method of softening the skin and restoring its healthy function, was first suggested to me in 1854, then just entering the practice, by Dr. E. L. Antony, of Waynesboro', Ga. I was at the time suffering from an attack of typhoid fever, with Dr. A. in attendance. He then declared inunction to be the best, and most reliable of all diaphoretics, and during the progress of the disease, had it practiced upon my skin to the extent of three pints of olive oil. He, however, at the time expressed his preference for an animal fat in the shape of a "bacon rind," referring its more efficient action to the fact of its containing salt. I have though, since, by observation and experiment, been taught that the bacon rind is preferable because it is an animal fat, and that the great benefit derived from its endermic use is attributable but in a small degree to its diaphoretic effects, compared with its vastly more important entropic property, and that the reason why, in this connection, animal fats are preferable to vegetable oils, is that the former are much more easily assimilated to the wants of the system.

In that dry, hot and husky condition of the skin so often observed during the first two weeks of typhoid fever, when the hand may be held in contact, for any length of time, with the patient's skin, without producing the slightest moisture, or changing in the least its dry and harsh state, inunction produces the most happy effect; the hot, dry, shriveled and harsh skin becoming cool, moist, smooth and pliant.

I come now to my second proposition relative to the endermic application of animal fat in fever, that which is by far its most important effect, and which is, indeed, the prime object of this communication, namely, that fat, or animal oil, having been introduced into the system by absorption from the skin, acts as a direct nourishment to the nervous tissue, and also by supplying material for combustion, prevents that destruction of tissues which otherwise would of necessity result in the course of a continued fever, or even, in health, without sufficient nourishment to supply the constant waste going on in the animal economy. I propose now to prove the practicability of the theory contained in this proposition, both by the evidences of observation and experiment, and by the corroboration of many well known facts and physiological truths.

To the satisfactory and successful accomplishment of this end, it will be necessary, first, to inquire into the nature and uses of the adipose tissue of the animal body, as well as of the fatty matters found in the circulating current. Physiology teaches that the adipose tissue is composed of cells which possess the power of appropriating fatty matter from the blood in the same manner in which the cells of other secreting apparatuses appropriate the elements necessary to the formation of the secretion they are destined to elaborate, and that each fatty mass must be regarded in the light of a gland, or, at least, an assemblage of secreting cells, which, however, in consequence of certain provisions existing in the peculiarity of their structure, retain, under normal states of the system, their contents without the least

change or transudation for an unlimited period. We are also taught, that it is not requisite to suppose that animals usually elaborate fatty matters from the elements of their ordinary food, but that the formation of adipose tissue depends directly upon the amount of fatty matter contained in the ingesta. There is, however, evidence that when there is an unusual deficiency of this material in their aliment, animals may produce it, by a process of chemical transformation, from the starch and sugar of their food; under these circumstances, however, the supply thus elaborated from such substances does not go to the formation of adipose tissue, since it exists only in such quantities that it cannot be spared by the circulating fluid from the *immediate* purposes to which it is to be applied. This unusual and extraordinary capacity tends, in the most forcible manner, to show of what vital importance is the existence of fatty matter in the blood.

As to the uses of the adipose tissue in the body, physiology teaches that it subserves several distinct purposes. In this communication, however, it is only requisite to notice its most important use, namely, of serving as a reservoir, if not of *nutritious* material, at least of combustible matter, at the expense of which, respiration and animal heat are maintained; and all the *vital* functions of the body thereby preserved and continued, when the ordinary materials subserving these purposes are deficient, or altogether wanting. In support of this view may be adduced many circumstances and observations bearing directly upon it. For example, in hybernating animals, we find that there takes place in autumn a great accumulation of fat within their bodies, and that from the consumption of this store of fat, the vital properties of the tissues are maintained during the period of inactivity, when they cease taking food. This is evident from the fact, that when the season is over, they emerge from their recesses healthy, and only exhibiting such a degree of emaciation as shows that the supply of fat has been consumed in the *vital* process. It is also a fact, that those herbivorous animals, whose supply of food through the

winter is scant, manifest a strong tendency, in the latter part of summer, to the accumulation of fat. Finally, all circumstances being equal, it is a fact, that the length of time which a warm-blooded animal can live without food, depends upon the supply of fat laid up within its body.

The accomplishment of the vital purposes thus subserved by the fat within animal bodies, is usually attributed, mainly, if not solely, to the fact that it is, as it were, a reservoir of combustible matter, supplying the carbon, which by union with the oxygen, introduced by means of respiration, evolves and maintains animal heat. There can be no question but that this is one of the chief uses of the fatty tissue, and that animal heat is evolved, in a great measure, at its expense; but, it is also highly probable, if not equally certain, that it performs other *vital* offices equally important. Mr. Carpenter, it is true, says: "There is no sufficient reason to believe that fatty matter can be converted, within the animal body, into a proteine compound, which can serve for the nutrition of muscular or other tissues." Now, it may be probable that it never is converted into a proteine compound, that is, an albuminous, azotized material; but, there are unmistakable evidences that it is, nevertheless, an element of *nutrition*, and does go to the sustenance, if not of muscular, at least, of other tissues. Indeed, Mr. Carpenter, himself, acknowledges as much; for, in speaking of the "Nature and objects of the circulation of nutrient fluid," he says: "That it (the circulation) furnishes all the tissues which are to derive nutriment from the blood, with a constantly renewed supply of the materials which they severally require; * * * that the different materials are drawn from the blood by the several tissues it supplies. Thus the nutrition of muscle requires fibrine, that of the *nerve requires fatty matter*,"* &c. Again, in speaking of the uses of the several constituents of the blood, he says: "There is reason to believe that oleaginous matter performs a most important part in the

* The italics my own.

incipient stages of animal nutrition, and that its presence is not less essential to the formation of cells, than is that of the albuminous matter which forms their chief component, all nuclei being observed to include fatty particles." Mr. Carpenter does not say, however, why it may not be just as important in the subsequent, as in the "incipient," stages of animal nutrition, thereby differing from all the other components of the nutritive fluid.

Muller says "Fat may be regarded as a deposit of nutriment, which, during fasting and during wasting of the body, enters the circulation, and is applied to the formation of other organic compounds." One of the strongest evidences that fat is necessary to the process of nutrition, is its invariable presence in the chyle and blood. In addition to this significant fact, it is found that the chyle, when examined near its entrance into the receptaculum chyli, presents very different characters, from that first absorbed by the lacteals; in the latter, the fluid contains albumen and a large proportion of oily matter, without fibrine; while in the former, fibrine begins to manifest itself in the coagulability of the fluid, while the quantity of albumen and oil globules is observed greatly to have diminished; proving, very conclusively, that during the passage of the chyle in the lacteals through the mesenteric glands, these substances have in a great measure been consumed in the elaboration of fibrine, the most vitalized material of the blood and the most completely prepared for organization, supplying, as it does, the larger portion of the solid tissues of the animal body.

Many remarkable facts might be adduced to support the belief that fatty matters are important to the assimilative process. That it is in some way intimately connected with that of nutrition, is evidenced by the following facts. It is always present in considerable amount in newly formed organized fabrics. It is a universal constituent of the nuclei of cells, both animal and vegetable. It is always largely present in embryotic structures. The plastic exudations of blood contain more fat than the non-plastic. Farther proof

is afforded by the fact that the secretion of milk contains a very large proportion of fatty matter, and that while the fluid goes to the maintenance and development of the offspring, the mother, on the contrary, is observed to become lean by reason of the consumption of the fat within her body by the milk secreting process.

Besides these evidences of the important part subserved by the fatty matters in the general nutritive process, there exists strong reasons for supposing it especially and absolutely requisite to the nutrition and maintenance of the nervous tissue. Upon analysis, one-third of the solid portion of this tissue is found to consist of fat, and while it is ascertained that the *walls* of the nerve cells and nerve tubes are composed chiefly of albuminous matter, the *contents* of these cells and tubes consist entirely of the phosphorized fats; and Mr Carpenter says, that *these* are the active agents in the operations of the nervous system. If, then, it be true, that fat does go to the nutrition of the nervous tissue, we see at once the imperative necessity of its constant supply, in the fact that it, more than any other tissue, is constantly undergoing decay and renewal, because, being the great superintending agent of all the operations of the entire organism, its life must be one of unceasing activity; and it is known that the disintegration of all the tissues is in direct proportion to the activity of their operations. If, then, the waste of the nervous tissue is in proportion to its exercise, its reparation must make a corresponding demand upon the nutritive process in order to maintain the system in a state capable of discharging its all-important function.

The uses of the fatty tissue having thus been considered, it remains now to be ascertained whether it is practicable to supply it to the wants of the system by inunction, when there is a deficiency of it within the animal body. Here, again, physiology teaches that the mucous membrane of the alimentary canal is not the only channel through which nutritive substances may be introduced into the circulating current; and though, in the higher animals, the cutaneous

function must be regarded one, more of exhalation than absorption, yet, when the system has been drained by the consumption of its store and a diminution of the regular supply, the imbibition of nutritive fluids through the skin occurs very vigorously. Many direct experiments have unquestionably established the fact that nutritious materials may be thus introduced into the circulation; and recently, the experiments instituted both upon man and the lower animals, with the endermic application of the different fish and animal oils, leaves no sort of room for doubt; the nutritive effects when used in this way, being identical with those resulting from the internal administration of those materials.

Here, the question might be asked, "how is it possible that fat, *alone*, afforded to the system in *any* way, could nourish the body while no aliment was being taken by the stomach?"

The subjoined extract from Carpenter's Physiology, tends satisfactorily to answer this question by conclusively showing, at least to a certain extent, whence originates the benefit of the endermic application of fat when the required amount of aliment is deficient from any cause. In his chapter upon "Absorption from the body in general," in speaking of the nature of lymph and the function of lymphatics, he says: "It seems not improbable that there may be another source for the contents of the lymphatics. We have already had to allude, on several occasions, to the disintegration which is continually taking place within the living body; whether as the result of the limited duration of the life of its component parts, or as a consequence of the decomposing action of oxygen. Now, the *death* of the tissues, by no means, involves their immediate and complete destruction; and there seems no more reason why an animal should not derive support from its own dead parts than from the dead body of another individual. Whilst, therefore, the matters which have undergone too complete a disintegration to be again employed as nutrient material, is carried off by the excreting process, that portion which is

capable of being again assimilated may be taken up by the lymphatic system. If this be the case, we may say, with Dr. Prout, that 'a sort of digestion is carried on in all parts of the body.' It may be stated, then, as a general proposition, that the function of the absorbent system is to take up and convey into the circulating apparatus such substances as are capable of appropriation to the *nutritive* process, whether these substances be directly furnished by the external world, or be derived from the disintegration of the organism itself."

Now, when it is remembered, that the chief difference between lymph and chyle is the presence in the latter of a considerable quantity of fatty matter, chemical analysis showing that there is an almost entire absence of fat in the former, we observe at once the necessity of supplying fatty materials in the "sort of digestion" above alluded to, when from any cause there is a deficiency of nutritive absorption by the lacteals from the alimentary canal.

We thus have seen how it is that an animal may subsist for a limited period upon the disintegration of its own tissues, and we also have seen how that period may be lengthened out to the longest possible duration, by supplying to this process of nutritive absorption the material which alone it is deficient in, and which goes directly to the sustenance of the nervous system, whose influence is, as it were, the very steam which propels the wonderfully wrought engine of animal life; and when, from a deficiency of material, its power ceases to be generated, the machinery of that engine must stop, and life must pass away.

Thus it is, that, in the course of a long continued fever, when the patient is taking no adequate amount of nourishment, and when the supply of fat is being rapidly, if not already completely, exhausted, the nervous system begins manifestly to flag, and its operations to be completely deranged, for the reason that the tissue is no longer sustained in a condition requisite for the discharge of its superintending function.

Whether the foregoing attempt to explain *why* the endermic application of fat is beneficial in wasting of the body, be correct or not, does not, in the least, affect the existence of the *truth* that it *is* advantageous. With me, the idea of its good effects did not originate in the theory of its action herein set forth; on the contrary, the facts long observed, lead me to the investigation of why it was so.

The reason why I have recommended animal fat in typhoid fever, originates in no idea of its exclusive adaptedness to that disease. Its good effects, when thus applied, are equally manifest in many other wasting and long continued diseases; and here, in passing, I will say, that it is especially advantageous in the *Tubercles Mesenterica* occurring in the second year of infancy. In such cases, the endermic application of cod-liver oil affords more promise of success than all other medication combined. Indeed, what medical practitioner in the Southern country has not heard the old nurses on plantations, boasting of the cures they have worked by "washing" some little weak-necked, scrawny-limbed, big-bellied infant in "pot-liquor!"

I have recommended the endermic supply of fat to the wants of the system in typhoid fever from several considerations. First, there is always little inclination, and often great repugnance, on the part of the patient, to take any nourishment at all. Secondly, the hurried respiration and rapid circulation, in all fevers, too quickly consume the store of fat previously laid up within the body, wasting that portion which, under more normal states of the system would, in time of need, have gone to the sustenance of those parts, in the nutrition of which, fat is absolutely required. Thirdly, besides this waste, common in all fevers, typhoid fever is a long continued and exhausting disease, especially affecting the nervous system, and that portion of it, too, presiding over secretion and nutrition. The system, even in health, is unceasingly active, and consequently, constantly wasting, both of which processes are correspondingly increased during the exaltation occurring in fever; therefore,

is its nourishment and maintenance continually and urgently demanded. Fourthly, this urgent demand and absolute necessity, is so often overlooked or neglected by the patient, his friends and physician, that I am firmly persuaded that a vast per cent of fatal cases, occurring in typhoid fever, results from actual starvation; OF COURSE, leaving out of the estimate, the victims of the *medical* treatment of those who attempt to "break the fever," either from ignorance of the nature of the disease, or from an overweening confidence in themselves, associated with the idea that it would be incompatible with a doctor's business and intelligence not to be drugging his patient; or, as is often the case, from timidly yielding to the entreaties and suggestions of friends "to do something;" through fear of being considered nonplused, and discharged from the case, or, at least, of having consultation advised. Fifthly, the endermic application of fat is a more certain and speedy way of introducing the material into the circulation, its internal administration being often contraindicated by the fastidiousness of the stomach and the impaired function of the intestinal canal. Sixthly, because, in the management of a case of typhoid fever, it is our business to *keep alive our patient and let him get well*, and I know of no surer plan of doing so, than by administering turpentine internally; or, what is better, combined with the fat or oil, and introduced endermically. By liberally supplying, *from the commencement*, to the demands of the body, the fat which the system *always* requires, and also by the *free* allowance, *from the beginning*, of good brandy. This last acting in concert with the fat, and amply supplying the carbon in the excessive combustion going on, and thereby allowing a certain proportion of the fat, *thus saved from the fire*, to be assimilated by the nutritive process. By these means, simple as they seem, a vast majority of these cases may unfailingly be conducted to a successful issue, without the internal use of one drop of *medicine*. I, of course, speak of uncomplicated cases.

In closing, I would remark that in selecting the fat to be

employed, it is best to take those richest in phosphorous, as such are the fats constituting a large portion of the nervous tissue, such doubtless is the cause of the superiority of cod-liver oil to almost any other fat.

Finally, in making these endermic applications in the latter stages of typhoid fever, extreme care should be used not to fatigue the patient, by causing him to undergo any physical exertion during the operation. The applications should be made twice a day and continued as long as the skin will freely imbibe the fat. The best effects are observed in children and negroes, because, in the one case, the application can readily and thoroughly be made, and in the other, the fastidiousness of the patient, if he has any, is not regarded, and we may be sure of having our directions carried out to the letter, at least, with respect to the *greasing*.

Such is my faith! May I be pardoned for saying, only with that degree of confidence with which the *truth* should be proclaimed, that I prove my faith by my works, in safely conducting, with these means, many patients through attacks of typhoid fever, and bringing them out in the end, emaciated to no great degree, but on the contrary, with such an integrity of tissue, as ensures a much more speedy convalescence than takes place in ordinary recoveries.

ARTICLE XVI.

*Report of the Proceedings of the Medical Association of Georgia,
for 1860.*

The Medical Association of Georgia, assembled in the City Hall in Rome, at eleven o'clock, April 11th, 1860.

The House being called to order by the President, Dr. F. S. Colley, the deliberations of the body were introduced with prayer, by Rev. Mr. Jones, of Rome.

The roll being called, the following regular members answered to their names:

J. G. Westmoreland, J. P. Logan, J. N. Simmons, Hayden Coe, W. F. Westmoreland, A. G. Thomas, H. W.

Brown, of Atlanta; Eben Hillyer, R. C. Word, T. J. Word, of Rome; DeSaussure Ford, Robert Southgate, of Augusta; A. M. Boyd, W. A. Culbertson, of Cave Spring; F. S. Colley, of Monroe; J. N. Coe, Flat Rock; S. W. Burney, of Forsyth; J. T. Banks, of Griffin; J. R. McAfee, of Dalton; W. C. Brandon, of McGuire's Store; W. P. Bond, of Lithonia; and Johnson Matthews, of Yellow River.

The minutes of the last meeting were then read and confirmed. Rules being, on motion, suspended, the following candidates were, on written application, accompanied with suitable vouchers, elected to membership in this Association: J. B. Underwood, John M. Gregory, A. B. Gregory, Wm. Terrell, J. King, J. B. W. Nowlin, J. C. Reese, T. F. Jones, of Rome; L. Price, D. F. Forman, — Wall, Z. L. Waters, of Calhoun; B. B. Brown, J. A. Black, of Dalton; M. F. Crumley, Atlanta; V. M. Hodgson, Villa Rica; E. A. Ware, Floyd county; D. R. Richardson, Monroe, Walton Co.; N. C. Mason, Cass county; E. L. Connally, Fulton county; G. M. McDowell, Pike county; J. N. Smith, Tilton; A. H. Shi, Newton Co.; M. R. Ballenger, Floyd Springs.

Election of officers being in order, the President ordered a ballot for President. Dr. Burney proposed the name of Dr. H. Coe, of Atlanta. Dr. T. J. Word proposed the name of Dr. Robert Southgate, of Augusta. Dr. Southgate's name being withdrawn, Dr. H. Coe was, on ballot, declared unanimously elected President for the current year. Dr. Logan proposed the name of Dr. T. J. Word, of Rome, for first Vice-President. On ballot, Dr. Word was declared unanimously elected 1st V. P. Dr. Hillyer proposed the name of Dr. Robert Southgate, of Augusta, for second Vice-President. On ballot, Dr. Southgate was declared unanimously elected 2d V. P. Dr. Banks proposed the name of Dr. A. G. Thomas, of Atlanta, for Cor. and Rec. Secretary and Treasurer. On ballot, Dr. Thomas was declared unanimously elected. Dr. Logan proposed the name of Dr. S. W. Burney, of Forsyth, for Orator at the

next meeting. On ballot, Dr. Burney was found to be unanimously elected next Orator. On ballot for Alternate Orator, Dr. W. F. Westmoreland was declared unanimously elected.

On motion, the President appointed as a committee, to induct the President elect into the Chair, Drs. Banks, Hill-
yer and A. M. Boyd.

Dr. Colley, on retiring from the Presidency, delivered a short, but beautiful and appropriate address—very strikingly marking some of the causes which tend to the lowering of the standard of the Medical Profession.

Dr. Coe was then inducted into the Chair, and assumed the duties of the office, by making a few chaste and happy remarks.

On motion, the Association adjourned till 3 o'clock, P. M.

AFTERNOON SESSION, 3 o'clock, P. M.

House was called to order by the President. The President called for the introduction of business requiring early action. Dr. Logan moved that the Association appoint 7½ o'clock, P. M., as the hour for the delivery of the Annual Oration—carried. Dr. Boyd moved that the President appoint a committee of five to nominate Delegates to the American Medical Association—motion carried. Committee, Drs. Colley, Logan, Burney, Southgate and Banks.

On motion of Dr. Colley, Association determined to send two Delegates to the Convention for revision of Pharmacopœia, to assemble in Washington, D. C., in May next. Dr. Logan proposed the names of Prof. I. P. Garvin, of Georgia Medical College, and Prof. J. G. Westmoreland, of Atlanta Medical College. On ballot, Drs. Garvin and Westmoreland were unanimously elected Delegates.

Dr. Burney offered the following resolution :

Resolved, That Dr. Colley be requested by this body, to furnish a copy of his address delivered this day, on retiring from the Presidency, to some one of the Medical Journals of the State, for publication.

Resolution unanimously adopted.

Reports of Auxiliary Societies being called for, no report

was offered. Rules being suspended, Dr. J. G. Westmoreland moved that the Committee on Nomination of Delegates to American Medical Association, be instructed to select eighteen names. Dr. Banks offered as a substitute, that as many be selected as this body is entitled to. Substitute being put to vote, was carried.

Order being resumed, Written Communications were called for—no report.

On motion of the Secretary, Voluntary Written Communications were called for.

Dr. Boyd presented a report of a case of Ulceration of Cervix Uteri.

Dr. Southgate then presented a very interesting Essay, entitled, The Tendency to Abandon the Practice of General Blood-letting in the Treatment of Disease—is it evidence of an advance or retrograde movement in Therapeutics?

On motion, Association adjourned till 9 o'clock, April 12th.

At 7½ P. M., Association listened to the very elegant Annual Address by Dr. H. W. De Ford, of Augusta.

SECOND DAY, 9 o'clock, A. M., April 12th.

Minutes of yesterday were read and confirmed.

Regular order being taken up, Dr. Burney presented a case of Laceration of Uterus.

Dr. T. J. Word moved that the authors of the papers presented to this meeting, be requested to furnish them for publication in some of the Medical Journals of the State—carried. Dr. R. C. Word offered the following resolution:

Resolved, That members of this Association, having unfinished Essays designed for this occasion, shall be allowed to complete them and have them published by order of this body.

Oral communications being called for, W. F. Westmoreland, M. D., Professor of Surgery in Atlanta Medical College, presented an instrument, of his own invention, for making a section of small strictures of the urethra without dilatation, with bad case successfully treated.

Prof. W. F. Westmoreland presented a report of various experiments upon animals, a brief synopsis of which is here introduced, with a view to determine the practicability of ligating arteries with silver wire, and the closure of wounds of the external surface and internal organs, as intestines, &c., with the silver suture.

Experiment 1.—Subject, a pup five or six months old. Left carotid artery ligated. Result—Death of the pup from severing the artery by scratching. Exp. 2.—Pup, six weeks old; right femoral artery ligated. Result successful, ligature encysted. Exp. 3.—Dog, two or three years old; right femoral artery ligated. Result successful, artery obliterated; ligature beautifully encysted. Exp. 4.—Dog, two or three years old; longitudinal incision in small intestine, two and a half inches in length. Result—Dog found dead in forty hours after operation, bowels protruding through external opening, wound united. Exp. 5.—Dog, very old; right femoral artery ligated. Result successful, artery obliterated, ligature encysted. Exp. 6.—Dog, two or three years old; incision one and a half inches long in intestine. Result successful, wound closed, suture encysted. Exp. 7.—Dog, two years old; right common iliac artery ligated. Result—Artery obliterated, ligature encysted. Exp. 8.—Spaniel, two or three years old; longitudinal incision, two inches, made in small intestine. Result—Bowel united, wire encysted. Exp. 9.—Dog, two years old; attempt to ligate abdominal aorta. Result—Rupture of aorta, ligated, lived only a few hours. Exp. 10.—Spaniel, young; abdominal aorta ligated. Result successful; aorta obliterated, ligature encysted. Exp. 11.—Bitch, supposed five or six years old; section of small intestines, one and a half inches, removed. Result—Lived forty hours, wound united.

In some of these cases, Chloroform was administered—in the others, Sulphuric Ether.

Dr. Dugas, through Dr. DeSaussure Ford, presented a report of a case of Episiorrhaphy, and also a report of a case of Staphylorrhaphy. Dr. Colley reported “an anomalous

case of delivery." Dr. W. F. Westmoreland reported success in restoring respiration in animals, when chloroformization had been carried too far, by artificial respiration, effected by the introduction into the trachea of a large elastic bougie through which air was forced by common hand bellows.

Report of Committees appointed at last meeting to report to this meeting, in order.

Report of Committee on revision of Constitution and By-Laws, called for. No report.

Report of Committee on Medical Literature, called for. No report.

On motion, both these Committees were continued, with instructions to report at next meeting.

Report of Committee on nomination of Delegates to American Medical Association, called for. Committee reported the following names: Drs. Southgate, T. B. Phinizy, L. D. Ford, H. H. Steiner, Augusta; Drs. J. P. Logan, H. Coe, J. N. Simmons, Atlanta; Drs. J. T. Banks, E. F. Knott, T. M. Darnall, Griffin; Drs. W. G. Bulloch, Juriah Harris, Savannah; Drs. Robt. Battey, T. J. Word, Rome; Drs. F. S. Colley, D. R. Richardson, Monroe; Dr. S. W. Burney, Forsyth; Dr. W. W. Flewellyn, Columbus; Dr. R. A. T. Ridley, LaGrange; Dr. J. R. McAfee, Dalton; Dr. G. L. McClesky, Athens; Dr. W. S. Meire, Madison; Dr. E. O. Ware, Cartersville; Dr. Alex. Means, Oxford; Dr. S. P. Lumpkin, Watkinsville.

On motion of Dr. Boyd, report was received and adopted.

Selection of place for next meeting being in order, Dr. J. N. Coe, proposed Atlanta; Dr. T. J. Word proposed Macon. Dr. J. G. Westmoreland moved that a Committee be appointed to report a place for next meeting. Dr. Hillyer moved, as a substitute, that a vote on that question be taken by ballot. Motion carried.

On ballot, Atlanta was declared the place chosen for holding next meeting of this Association.

On motion of Dr. Boyd, the Chair appointed a Commit-

tee of three to nominate Essayists for next meeting. Committee—Drs. Boyd, Logan and Southgate.

Dr. T. J. Word offered the following resolution:

Resolved, That the experiments of Prof. W. F. Westmoreland are highly commendable, and it is hoped they will be continued, and result in great good to the Profession.

Dr. T. J. Word moved that sections 3rd and 4th, Art. 1st, Chap. 2, of the code of Medical Ethics, be published with the minutes of this meeting. Carried.

Dr. W. F. Westmoreland moved that the Secretary be instructed to have 500 copies of the Constitution and By-Laws of this organization, published, and distribute them to its members.

Dr. Logan moved, as a substitute, that the Committee on Constitution and By-Laws be empowered to revise the same, and publish 500 copies.

Dr. Brown moved to amend, by adding that the Secretary be required to distribute the copies so published to members.

Dr. Colley moved to table the motion. Dr. Colley's motion lost.

The original motion, as amended, was then put to vote, when the vote resulted in a tie. The President voting in favor of the motion, it was carried.

On motion, the Treasurer was ordered to draw on the Treasury for funds to be furnished to Committee on Constitution and By-Laws, to pay for 500 copies, to be published as soon as practicable.

Dr. R. C. Word offered the following resolution:

Resolved, That notice be now given that at our next meeting a vote shall be taken to determine a place for the permanent location of this Association.

Dr. Ford offered as a substitute:

Resolved, That notice be now given that at our next meeting, this Association determine whether or not this Association shall be permanently located, and if decided to locate, the place shall be chosen.

The substitute being put to vote, was carried.

The Committee on Essayists reported the following list of names:

King, Battey, Hillyer, T. J. Word, Rome; W. F. Westmoreland, D. C. O'Keefe, Atlanta; Doughty, Augusta; B. B. Brown, Dalton; J. T. Banks, Griffin.

On motion, report was received and adopted.

Dr. Logan moved that the Committee on Constitution be required to revise the list of names of members. Carried.

On motion of the Secretary, that part of the proceedings continuing the Committee on Constitution was reconsidered.

On motion of the Secretary, the President was required to appoint a new Committee of five to revise Constitution and By-Laws.

Dr. Ford moved that the Committee be appointed from one place. Motion lost.

The President appointed as that Committee, Drs. A. G. Thomas, H. W. Brown, L. D. Ford, H. F. Campbell, J. T. Banks.

On motion of Dr. Boyd, the President appointed as the Committee of Arrangements for next meeting, Drs. H. W. Brown, J. G. Westmoreland, J. F. Alexander, D. C. O'Keefe, J. N. Simmons.

Dr. W. F. Westmoreland moved that a Committee on Finance be appointed to devise some means of raising funds for the use of this Associations, and to report at next meeting; carried. Committee—W. F. Westmoreland, F. S. Colley, R. C. Word.

Dr. R. C. Word offered the following Resolution:

Resolved, That the President appoint a Committee of five to memorialize the Legislature of Georgia, at its next session, to abolish the professional Tax upon Physicians, and to urge the passage of an act requiring the Inferior Court of each County to set apart such portion of the County Tax as the Grand Jury shall recommend, to purchase drugs for the benefit of the poor. Adopted.

Committee—Drs. R. C. Word, B. B. Brown, J. G. Westmoreland, Burney, Southgate.

Dr. Simmons offered the following Resolution:

Resolved, That the thanks of this Association be tendered to the city authorities of Rome for the use of their Hall, and to the Physicians and citizens of the city, for their kind attention to the members of this body during its present session.

Resolution adopted.

On motion, the Association adjourned to meet in the city of Atlanta, on the second Wednesday in April, 1861.

From the Code of Medical Ethics, Chapter Second.

SECTION 3.—It is derogatory to the dignity of the Profession to resort to public advertisements, or private cards, or handbills, inviting the attention of individuals affected with particular diseases—publicly offering advice and medicine to the poor, gratis; or promising radical cures; or to publish cases and operations in the daily prints, or to suffer such publications to be made; to invite laymen to be present at operations—to boast of cures and remedies—to adduce certificates of skill and success, or to perform any other similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician.

SECTION 4.—Equally derogatory to professional character, is it, for a physician to hold a patent for any surgical instrument or medicine; or to dispense a secret *nostrum*, whether it be the composition or exclusive property of himself or of others. For if such *nostrum* be of real efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality; and if mystery alone can give it value and importance, such craft either implies disgraceful ignorance or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret medicines, or in any way to promote the use of them.

A. G. THOMAS, Sec. M. A. of Ga.

ARTICLE XVII.

The Annual Address Delivered before the Georgia Medical Association, at their Meeting, held at Rome, April, 1860.

By DESAUSSURE FORD, M. D., Prosecutor to the Professor of Surgery in the Medical College of Georgia.

Mr. President and Gentlemen of the Association :

As an earnest of gratification, and sincere thanks, that you have appointed me orator, for this, our annual communion, my thoughts have been busy in arranging themselves, with a view to scatter a few seed thoughts, which, if they do not germinate and ripen into goodly fruit, may invite others to elaborate them more ably, that they may be amplified into the fulness of truth. Not long a member, yet I feel a youthful, buoyant, enthusiasm, whenever "leaden-footed, limping Time," seems to push forward, more rapidly, the opportunity of a closer intercourse of the members of our Association. Founded with a view to solicit and advance investigations in the science of Medicine—tending to complete it as such ; to refine and make its votaries more learned, more untiring, in scientific searches after truth, it has progressed right onward, bravely adding such truths ; wonderfully increasing in membership ; its deliberations no longer confined to the larger cities, but penetrating the less fortunate, until now we celebrate our convocation, right up in the mountains, whose pure and exhilarating atmospheres are tinctured with a laudable love for such beauties as are contained in, and burst, gushing forth from, the full and maternal heart of our common mother.

Beneath the sunny, and on the classic shores of Italy, now stands but the shadow of the "Mistress of the World"—

"See the wide waste of all devouring years!
How Rome, her own sad sepulchre appears!
With nodding arches, broken temples, spread!
The very tombs, now vanished like their dead!"

Not such here, in your modern mistress of the mountains; all is teeming with joyous hope and busy enterprise ; plenty

seems "to leap to laughing life"; beauty, in all her fair purity, lingers to gratify, and woman, typical ideal of that "sweet virgin type of Thought, pure, brave and high," appears before us, applauding with smiles her workings for many of us, having "prevented the necessary sternness of restraint, over sympathetic feeling, from falling into coarseness of soul, or loss of true, natural feeling, by being the witness to tenderness and sympathy." Magical the charms which attract to the side of woman, and grateful the sphere of these our fair visitants, whose radiant smiles are evidence of their tribute to our honored Association! Feign would we linger, to tell out our gratification, that you come to listen to our abtuse talks on medicine; but—oh may you continue to charm and fascinate; go hand in hand with us in our noble, charitable work, softening, ever refining, our natures, and imparting a portion of that inviting tenderness, whose ministration is first and last in the history of life!

The subject chosen is, Exclusives, with the intention to demonstrate that Rational Medicine is not to be placed in the category, but has as its motto, "*Je prend le bien ou je le trouve.*"

Hasty conceptions, formed at the mind's first glance—in the first impetuosity of the judgment—are termed opinions, conjectures, hypotheses; whence come systems:—this, an idea emanating from the mind of a good and noble philosopher, explains the origin of the legion-numbered specialities, in all the sciences around us, each exciting some notice, each imparting some additional strength. A zealous devotee, grasping at such opinions, conjectures, hypotheses—with avidity digesting them—his system may be characterized, *en masse*, as containing only errors, dilemmas, falsities; yet, the devotee of an opposite system, untrammled by bigoted prejudice, and petty rivalry, will discover through the apparent hypothetical jargon, such truths as labor always develops, thus crowning him with jewels from his own laboratory, which will shine with such brilliancy, as to demand the admiration, aye,

adoption, of the scientific. Thus mind aids mind, system system, until one sublime and fixed science is conceived from the united and combined opinions and conjectures given out from many pregnant sources: such "complimentary duelism" is unceasing, multiplying the science into various departments, each a promising child, growing to gladdening manhood, supporting and adorning it as a beautiful unity.

"The beginning of Philosophy is the study of *differences*, but we climb to that beautiful Olympus, where simple and essential truths reside—the heaven of all the other spheres of knowledge—by comparing and deducing resemblances; just as we rise in moral and religious life, by seeking and valuing Christianity above sectarianism." Imposing the force of this truism, in canvassing and observing the many and multiform subdivisions, which entice, so alluringly, the faithful student of the science of Medicine! Early in its history, exposed to superstitious objections of the church, the study of practical anatomy—the chief corner-stone of our temple—was denied, under pain of banishment; however, the massive intellect of the illustrious Galen was enabled, by comparative anatomy, to compare and deduce these resemblances; and, while aware of the insufficiency of a knowledge of this comparison, to convey an adequate idea of the delicate, exquisite, structure of the wonderful and fearful organism of the human, "regarded comparative anatomy merely an introduction to human dissection, without which, the latter could not be studied with sufficient advantages."

The study of differences could not be more potently illustrated than by Microscopical and Comparative Anatomy, a study founded upon the great fact, that "animal life and organization, throughout its prodigious varieties, is in imitation of the human form—the model form of all organization—each variety approaching as near that form as the objects and purposes and conditions of its being will possibly permit." What knew we of the tiniest of the

animal kingdom, their delicate structure, exquisite beauty, potent analogy to ourselves? Their generally nervous sensibility we saw, merely saw, but not until men dissected and appreciated the nice adaptation of means to ends, were we cognizant of ganglia, filaments of nerves, organs, their functions similar to man's; tentacles, vibrillæ, so minute, so perfect! Such inviting analogy, existing between man and all these little, almost fabulous creatures, who will for a moment doubt that the principles of human physiology have been greatly extended and certified by pursuing the study of organization along this descending gradation: and while we contemplate this successful searcher after mysteries, the microscope, how can we pass, without acknowledging, with proud, delighted exultation, its development of the cell growth, showing how such a "mere spark from the anvil of the creator," kindles into warmth and lustre, the brightest of his jewels, man!

Under the auspices of Iccus and Hierodicus—four hundred years before the Christian era—as an improvement to medical practice, the Gymnastic School of Medicine was founded—a system much respected, not only as remedial, for many diseases of debility and irregularity, but as strengthening and forming the muscular, and manly frames of the Greek youth. Surprising that until late ages, did a system so universally practiced, and so extolled by the ancients—giving the world instances of magnificent bodily bravery, whose heroes astonished the effeminaey of the world, with their athletic arms—disappear from notice! Ling, a Swedish poet, a man of versatile genius, stern and inflexible resolve, "read in the acient lore of his country, the record of a mental and bodily prowess of uncommon virtue; the doings of kings, jarls and vikings in the olden time;" inspired by royal thoughts, he endeavored "to combine the muscles of ancient heroism with the civilization of to-day, and in the physical frames of the Swedes, to re-enact the days of Snorro and Hakon-Jarl, in those of the 14th Charles. In criticising him further, the writer quoted,

says: "His verse breathes with a Homeric spirit of combat, with a delight in the good science of the strokes, as well as in the death of the foe: it has the harshness and boldness of a muscular rhyme."

Kinesipathy, or "the muscles of medicine," is a system whose art consists in the external administration of forces: posture, friction and numerous movements and modulations of the body and limbs, even organs, tending to counteract the wastings of chronic diseases, by re-animating the atomic feebleness of the functions. Graphically it is styled: "admonition, contact, exercise, pursued into details, whereby disease is literally handled." An enemy to acute disease, where motion would cruelly torture the pain into damascene keenness, yet a precious friend to the weakness and almost second babyhood of the muscular system, who, by gentle exercise, well and judiciously directed, teaches them anew their forgotten lessons.

- Emphatically not medicinal, but hygienic, yet the followers of Preissnitz proclaim Hydropathy equal to, if not pre-eminent over, all other remedial arts. The water cure operates by alternately stimulating or depressing the natural powers of the system, through the mediation, specially of the universal skin system. If perspiration, a relaxant, would be indicated, no plan of treatment would be so rapidly and powerfully efficacious. If the economy, atonic and feeble, needs tonicity and instaneous activity, the douche, plunge bath or wet sheet, advocate with eloquence their long acknowledged active power in producing such results. If calmness and coolness, from febrile excitement, is longed for, it is discovered in the refreshing quietude of the sitz bath. Though not remedial, in the drug sense, yet statistical and personal experience, compel the acceptance of many cures effected, either by the water, exercise or regimen, which the proprietors of such establishments rigidly enforce; at the same time, however, many have fallen victims to the *continued* influence of such rigorous observances, when at the *first* resort, they were buoyed up

with elastic health. In speaking of the continued resort to water cure establishments, an eminent writer says: "Such penances kept up, they become severe mascerations; the faculties are not roused, but chilled, and the lamp which might have lasted for a quiet while, is besieged by cold to death." The therapeutic action of cold water, might be styled "energizing," while that of warm "enervating." By reaction the cold produces an excited glow and heat; the sweat breaks out with drenching force. Pack a man in the wet sheet; at first the body is braced up, excited; soon he is soothed, goes to sleep, and when the reaction supervenes, he is taken out of his vapor bath wet and dripping, and as red and ruddy as a lobster. The warm water, on the other hand, depresses; a sense of coldness results, and though the sweats are slow and languid, they are still profuse and exhausting.

To those long accustomed to press their beds of down; long acquainted with indulgences which wealth and affluence unfortunately entail; suffering ennui from breaking down of energy; too feeble and irresolute, physically and mentally, to throw prostrate such pertinacious visitors—to such the water cure is invaluable. "They go, and the axe is laid to their tree of evils," branch by branch cut away, until, in a flood of fruition, the trunk puts forth new and healthful shoots: in the language of another, "their impossibilities are made possible for them, by the exacting physician, who endures no remonstrances; in an hour they throw down the accumulated baggage of years—early hours, long walks, long forgotten beauties of nature, re-acquaintance with the crystal springs, whose naiads had been neglected for old Port, sweet sleep hours before midnight, and the sense that they are clean human beings, or on the way to such—all these means carry health to the men who are jaded with business or pleasure, but not yet struck for death." It is the "central mortification of the flesh," and much of its potency is owing to "the frigid morality which it inculcates, and to the shock it gives to the dreaming man and his lazy organs."

Antagonistic to the hippocratic aphorism: "contraries, or opposites, are remedies for each other, the *similia similibus curantur*, of Hahnemann, has claimed much interest and excitement. His wonderful genius and uninterrupted experiments will ever be lauded with genuine admiration, yet his whole system, although founded upon a few isolated facts, furnished by some of the most learned and celebrated practitioners, is so tinctured with a false medical philosophy, that it can never stand the test of experience. An English physician, though scientific, and with large and cultivated understanding, advocates Homeopathy so triumphantly, that I quote from him: "Fact shows, that the attenuation of medicines may go on to such a point, and yet, their curative properties be preserved, nay heightened, that we are obliged to desert the hypothesis of their *material* action, and to presume that they take rank as dynamical things." "A drop of aconite may be put into a glass of spirit, a drop of this latter into another glass of spirit, and so on to the hundredth or the thousandth time, and still the aconite property shall be available for cure." "Here, then," he continues, "we enter another field, and deal with the *spirits* of things, which are their potential forms, gradually refining massy drugs, until they are likened to those *sightless* agents, which we know to be the roots of nature, and feel as the most powerful in ourselves." A spiritualistic sort of pathological anatomical knowledge, then, must be absolutely necessary for the successful Homeopath, and these attenuated millionths, mysteriously permeate through the materialistic morbid phenomena, compelling the *spirit* to put on a spiritual disease, similar to the original one, thus seeming to be the great remedial agent, for that part of the economy known as the spiritual body, and excluding the idea of the material body being sick, unless the mind, or soul, or "*sightless agent*," invites or rather poisons it. Often, I believe, "*mens sana in corpore sane*" is true, but not universally; hence we are tempted, when it is so, to prescribe colored *inert* water to quench the imaginative morbid thirst, sternly "insisting

they must avoid that noxious article, camphor, the antidotal ordium of the pharmaceutical vineyard!" "Supremely ridiculous and unphilosophical, such a proposition as this—that the utmost triturating refinement, kept up until doomsday, to destroy the *material*, in order to arrive the spiritual essences of their medicines, even supposing the absurdity of such independent existence. Well might they put a drop of aconite at the source of the Savannah river, then take a drop of the water at its mouth, and put this in the Atlantic ocean, and "still the aconite property be available for cure," since they add more importance to divisibility, carried *ad infinitum*, than to the drug in its natural state.

Hahnemann's disciples soon involved him in their exaggerations, and shrouded in the German mysticism, the homeopathic therapeutics numbered many admiring partisans; for, it is said, "no idea in medicine, however absurd, but will find advocates, both among physicians and patients." Like all sudden innovations, its meteoric lights shown forth brilliantly, dazzling, however, even the worthy innovator, blinding him from appreciating long established facts, but imparting a kind of spiritual sight for the mysterious, infinitesimal and heterogeneous farrago of useless simples, which so characterize his system. Indeed, meteoric-like, it has passed rapidly through the spheres of critical analytics, not dropping the philosopher's stone, but possibly a few pebbles, which may adorn the cabinet of rationalistic practice! Hahnemann's Organon—that regulating governor of his triturating machinery—reminds me of the "Embre," the text book of the ancients, who felt certain of impunity, whatever might be the result, so long as they scrupulously adhered to its prescriptions; "thinking it better ninety and nine should fall victims to an erroneous practice, than that the validity of the precepts, delivered by the mighty Thouth, should be called in question, or one heretical patient recover in contradiction to them." Homeopathy had its day in the world, but the infatuation and therapeutic reveries have been dissipated, and dispersed by the com-

bined influences of ridicule and want of success; and now, the successors and worshippers of Hahnemann, like the prophets of Baal, in their extremity, cry from morning even until noon, O, Baal, hear us! But there is no voice, nor any that answer. Elijah-like, we mock them, saying, cry aloud, for he is a god; either he is talking, or he is pursuing, or he is in a journey, or, peradventure, he sleepeth, and must be awaked. And they cry aloud, and have "blown their own trumpets, abused their neighbors, and entreated belief in monstrous and unproven assertions, until even that exceeding personal impudence, essential to a successful homeopath—*nil conscire sibi, nulla pallescere culpa*—avails no longer."

So perfectly and supremely ridiculous the tom foolery of Thomsonianism, and so futile—except as murdering wholesale—that, with Dr. Smith, of Macon, Ga., we dignify it by this notice: it is *von gran umbug*.

Though termed the "chaotic mother of children fairer than itself," and condemned as "cumbering the earth with its age and infirmities," yet we laud and celebrate, aye, magnify the Allopathic School of Medicine, not merely as its disciples, but because it is founded upon a scientific inductive philosophy, having considered particulars, and individual cases, and employed them for generals, which are intimately related to such particulars.—From the days when an appetite for knowledge was first evinced, the minds of an illustrious galaxy of brilliant men have searched after certain and evident facts, collecting them from numerous quarters, and reducing them to a certain degree of order, which systematic order manifests itself through the practice of an intelligent and devoted Allopath. Our system imbibes all the sciences wherewith Nature has inspired and assisted the human intellect; penetrates the universal and beautiful arcana of the animal, vegetable and mineral kingdom—each containing wonderful truths, and giving some support—and, by an empirical experimental synthesis, intimately joined with the experi-

ences of many, has contributed remedies for nearly every malady by which we are visited. Accused, by the strictly routinist systems of experimenting with the valuable lives of humanity, we might be expected to blush, timidly, for our system; not so, but, in the language of another, we "glory in the thought, that time honored Allopathy has been founded on empirical philosophy." If our usual remedies fail, in obstinate cases, and we have been imbued with a thorough knowledge of the fundamental principles of medicine, it would be culpable if we did not resort to experimentation, on such scientific inductions as our educated minds could dictate; thus unlike the Homeopath, who, when his remedies fail, is compelled to fall back upon *chaotic* allopathy to shield him from the anathemas his wanton ignorance so justly merits.

Anatomical knowledge—a study of the human economy, in health, the relation of organ to organ, artery to artery, and so on; Pathological Anatomy—the genius of our system—a study of morbid phenomena; Chemistry, the science of qualities, with a study of the material bodies and gases of the universe, and the knowledge that certain medicines produce certain effects, acting through different media—some upon the nervous tissue exclusively, some upon the blood, some upon the absorbents, some upon the secretory system—all these facts form a nucleus, from whence our knowledge of physical and material laws, and their intimate relation, and mutual dependence, are derived, and from whence have been established all those first principles, which are now arranged and classified so systematically, and which ever guide safely the intelligent Allopath.

Hating insolation, the Allopathic school we proclaim as being founded upon the philosophic idea of eclecticism, which very eclecticism has developed it into the proportions of colossal beauty, force and grace. Nothing can be more naturally true and scientific, that in order to strengthen any particular or individual thing, we must, like the industrious bee, fly from place to place, beauty to beauty, extracting

only the good and pure from the mass, in order to erect a complete and perfect fabric. Thus we are benefitted by, and borrow from, the Kinesipath, in old paralytic cases, where the nervous derangement is merely functional, their system of friction, exercise, &c., soon teaching the feeble muscles to grow strong, and, in the language of another, "the mind and will which had alienated themselves, are coaxed back into the arms and legs." A case treated in the hospital at Augusta, where the patient had been bed-ridden for months with rheumatism—the disease itself cured, but the patient too timid to use his emaciated limbs—was materially benefitted by friction and gradual exercise, and the importunate necessity of action, that in two weeks time he acknowledged the benefit as almost miraculous. Even we experience happy results by this handling, in diseases of the organs themselves; e. g. the secretions of the liver may be excited by frequent nudgings, and exercise of the abdomen, immediately over the organ. On this principle, too, the dyspeptic is often relieved, manifestly, by horseback exercise. With these few facts before us, we commend this system to the investigations and practice of the scientific, as precluding the necessity oftentimes of crowding their patients with tonics, and as a luxuriant field which will yield a healthful harvest.

Hydrotherapy we practice in the warm and cold baths, aye, even wet sheets, and considering the one instance of the parching fevers of our Southern districts, how can we applaud too loudly the Hydropathist, in that he has taught us, by his special observation and study, the soothing and cooling effects of effusions of water, when, not long ago, our patients writhed with restless agony, and yielding to natural instincts, cried for a single drop to wash their seething tongues; yet it was denied, thus subjected to the tortures of Tantalus. Now, our chills are cut short by large and copious draughts of warm, while fevers are cooled down, if not in many instances terminated, by cold water. In violent inflammations of the brain, who has not witnessed the

quietude following the douche of cold water to the head ! On the principles inculcated by this system, we substantiate the advice of change of climate, feeling that, independent of variety of scenery, which of itself is remedial in many instances, patients are benefitted by breathing more dry, or more moist atmospheres, or the bodies exposed to colder or warmer blasts.

Through the dark cloud hanging about their exclusiveness, we perceive many philosophical ideas, which we eagerly appropriate for our already brilliant coronet, and only pity those proprietors of water-cure establishments who, having the opportunity, do not practice, as an adjuvant to their system, the Allopathic teachings.

An Allopath may deplore "that the human intellect should ever fall from its high estate, to fatuitously play with straws, and herd with fool, and idiot, like the poor broken-minded Lear," yet, he is indebted to Homœopathy for a few more rational ideas than his system inculcated before its advent. The more careful investigation of the natural history of diseases, it has truly incited ; diminished, silently, the amount of massy drugs, and, mayhap, was the channel through which the inordinate use of the lancet was drifted far away. Scarlatina and the other exanthemata, pneumonia and delirium tremens, diseases which homœopaths harp about as being more successfully treated by them. The traditional treatment of these has been greatly modified, and now the intelligent Allopath is obliged to acknowledge the expectant plan the rational one, cheerfully according to the Homœopath the credit of directing his mind to more careful study. Even if, on the other hand, the Homœopath will allow a malignant paroxysmal fever to terminate fatally, in ignorantly waiting to treat symptoms as they arise, while we would jugulate the disease, by our empirical specific, yet, we must give him some credit for his reasonable, exclusive expectancy, since many affections, under his notice, recover from his infinitesimal nothings—Dame Nature, in other words—all of which facts impel us,

as scientific men, to scrutinize more closely, and study more critically the *natural history* of all diseases.

You perceive, Mr. President and gentlemen, that I am governed by the saying—

“Take the truth wherever it is found,
Whether on native or foreign ground—”

and, unlike many critics before me, while considering exclusive systems, have discovered some merit, even though it may be obscured by the most gross and unscientific tenets, which they claim as fundamental principles. Careful and unbiased scrutiny of their practice, however, though unphilosophical, *as explained by them*, recommends itself to us, and has undoubtedly assisted in instilling that love of more careful and patient investigation, which so characterizes all our excellent and eminent searchers after truth, of this century. Yielding to honest convictions, not allowing the possibility of the orthodox voting me heretic, to have any influence, I have endeavored to award “honor to whom honor is due.” I cannot close, however, before recommending the exalted position of Allopathy to public criticism—from time immemorial respected by sages; practiced by the learned; sung of in the thrilling ecstasies of poesy; and “surviving all heretical opposition, it stands, to-day, as a mountain rearing its majestic summit through the pestiferous fogs, and petty *isms*, far into the ethereal regions of truth.” Aye, indeed, we are wedded to it—this, our united band, an evidence; this, our meeting, a touching thank-offering—and we view it as a luxuriant field, where our sickles may reap an abundant harvest: a table, where we may enjoy the most sumptuous banquets!

Metallic Ligatures.

On the 21st of March, 1829, Mr. Henry S. Levert, of Alabama, now Dr. Levert, of Mobile, in the same State, graduated in medicine in the University of Pennsylvania, having presented a thesis entitled “*Experiments on the use of Metallic Ligatures as applied to arteries.*” This paper was

published as the leading article of *The American Journal of the Medical Sciences* for May, 1829, the experimental portion of which will be found below. This paper, simple, unpretending, and conclusive in its experimental character, and significant in its physiological and surgical import, was altogether demonstrative, so far as the analogical evidence derived from surgical operations upon dogs is applicable to man. These experiments excited much attention, but made no converts. Surgeons, biased in favor of silk and similar ligatures, did not choose those of metal, but sought for arguments which cast doubts upon the superiority of the latter. If they failed to verify the new experiments, they did not fail in defending themselves against even an appearance of favoring an innovation, which virtually proved that an important branch of operative surgery was not practiced in the best manner. Each defended himself, as far as was prudent, until, at length, the subject was almost wholly forgotten.

Let us look at a few text-books—the first which come to hand—in order to ascertain what was said, for nothing was done, in relation to Dr. Levert's experimental investigations:

In his *Principles of Surgery*, Prof. Miller says, nature regards metallic, as well as other forms of ligature, as “foreign substances to be extruded by suppuration.”

Prof. Fergusson, in his *Practical Surgery*, says: “The ligature which I generally make use of is small, smooth, and well-spun twine. * * * Some practical surgeons have been far too nice regarding the size and material of ligatures,” etc.

M. Velpeau sums up the various kinds of ligatures, including those of Dr. Levert, in the following words: “From these inquiries it results, as I conceive, that the nature and the form of ligatures in the treatment of aneurisms, are not so important as they have been generally thought,” etc. (*Operative Surgery*.)

In the 11th vol. of the *Dict. de Med. et de Chir.*, M. Begin (*art. ligature*) notices Dr. Levert's experiments upon animals with metallic ligatures. But M. Begin throws into his appreciation doubt and dissent, thinking that man and animals *differ*, and that metallic ligatures are not so good as some other kinds, especially those of animal substances.

In his *Surgical Dictionary*, S. Cooper, *art. ligature*, no mention is made of Dr. Levert's experiments, or of metallic ligatures. Prof. Henry H. Smith, of Philadelphia, in his

treatise on Practical Surgery (1856), says: "Experience has shown that any ligature that is strong enough, and that is properly applied, answers equally well."

Lisfranc, a great, though somewhat eccentric surgeon, in the second volume of his surgery (*Médecine Opératoire*, Paris: 1846), after giving a summary of Dr. Levert's experiments with ligatures of lead, gold, platina, and silver, virtually rejects them, because he had neither seen metallic ligatures employed, nor did he know that they had ever been applied directly upon the human subject. ("*Je n'ai pas vu employer ces ligatures ; je ne sache même pas qu'on les ait appliquées sur l'homme.*" 805.)

Tacitus has somewhere said, that if the reward of investigation be taken away, study will be neglected: "*Sublatis studiorum pretiis, etiam studia peritura.*" Now, without having either a personal acquaintance with Dr. Levert, or any information as to his own attitude in regard to his claims, it is reasonable to assume that he expected his experiments should be tested, and if found to be a great step towards the advancement of surgery, that he should have the satisfaction of a just recognition in the Republic of science, and the more so, because, at the present moment, the silver suture which he had so fully tested as being upon an experimental basis "free from danger, and productive of peculiar advantages," is proclaimed and otherwise appropriated, as the greatest discovery of the nineteenth century. This is what has been called playing Hamlet with the part of Hamlet left out altogether. If even the half of the merits now claimed for the silver suture be conceded, Dr. Levert did not write in the sands; nor will the waves of the third of a century wash out his record. Documents and dates, thanks to the art of printing, are more powerful than the Roman Lictors, who, bearing *fascēs* and axes, marched before Kings and Consuls, enforcing respect and punishing the refractory. It is the pen of history "which is mightier than the sword" or the Lictor's axe.

Without affirming that the suture of silver, or other metal, is what its advocates have recently claimed for it, the greatest discovery of this century, there seems to be already extant considerable evidence, which daily increases, in favor of its superiority over those ligatures which have been, and are still usually employed. Hence, whatever merit the former may possess attaches itself chiefly to the experimental investigations of Dr. Levert, as the following document will show.

B. DOWLER.

Experiment I.—On the 16th of May, 1828, I laid bare the right carotid artery of a dog, and after separating it carefully from its accompanying nerve and vein, I passed under it a lead wire, and tied it firmly. Both ends of the wire were then cut off with a pair of scissors, and the sharp points bent down with a common dissecting forceps. The wound was now drawn together with a few stitches of the interrupted suture, and over these were laid some adhesive strips. This animal was not confined, but suffered to run at large: when I examined him several days after, I found the stitches ulcerated out, and the wound open; it had filled up from the bottom with granulations, but the edges of the skin were separated to a considerable distance: with light dressings it healed entirely by the 5th of June.

June 28th.—I killed this animal and dissected with care the neck. A small cicatrix existed in the skin; the lead was found in the situation in which I had placed it, by the side of the vein and nerve, perfectly encysted; the artery at this place had been removed entirely, for the space of half an inch.

Both ends of the vessel, caused by this removal of its central portion, adhered by loose cellular substance to the surrounding parts, which appeared to be in a perfectly natural state. The end towards the heart was not at all increased or diminished in size; it was sealed up for three-eighths of an inch in extent, by an organized substance, resembling a coagulum of blood in color, but not in consistence, it being much firmer. The end towards the head resembled the one just described, in all particulars: the substance, however, which filled its extremity, was of greater extent, and occupied the whole space up to the next branch, which was rather more than half an inch.

Not the slightest trace of inflammation existed in the neighboring parts; on the contrary, they appeared perfectly natural. The lead itself was enclosed in a dense cellular substance, which formed for it a complete cyst.

Experiment II.—The right carotid artery of another dog was separated from its contiguous parts on the 17th of May, and a lead wire placed around it, as in Experiment 1. The lips of the wound were kept in contact with sutures and adhesive strips. I examined it three days after, and found that it had united by the first intention, in the whole of its course, except in those points included by the stitches; these I cut loose and dressed it simply with adhesive strips. When I looked at this dog again, I found that from the

itching of the wound the animal had scratched off the dressings, and broken up the new adhesions; I washed it carefully to remove the dirt, and dressed it with simple dressings. It healed kindly, and was entirely well on the 6th of June, at which time I killed the dog, and made a careful dissection of the parts. The cellular substance here was much thickened and indurated, forming a strong bond of union between the nerve, vein, and artery. The two former were in their natural condition; the artery was pervious its whole extent, to within three-eighths of an inch of the wire; at this place the calibre was entirely obliterated; a firm substance, resembling bruised muscle, filled its cavity; between the ligature and the head the artery was impervious, and much diminished in size, having the appearance of a mere cord, not exceeding one-fourth the original dimensions of the vessel. The lead preserved its situation around the artery; it had become entirely encysted, and not the slightest remains of inflammation existed.

Experiment III.—I cut down on the left carotid of a third dog, on the 29th of May, and proceeded as in Experiments I. and II., differing in no respect, except in dressing the wound; I used no stitches, but merely adhesive plasters.

June 1st.—I examined the wound, and found that it had united through its whole extent; but as I supposed the union not to be very firm, the strips were re-applied, and suffered to remain on until the 5th, when they were removed altogether.

June 27th.—The animal was killed, and a minute examination made. The lead wire was found around the vessel, which was impervious for an inch or more, as in the former experiments. The surrounding parts healthy.

Experiment IV. June 9th.—The dog which was the subject of the last experiment, having entirely recovered from the first operation, now became the subject of a second, which was performed on the carotid of the opposite side. This was conducted exactly as the preceding; the wound united by the first intention without the least difficulty; no constitutional symptoms manifested themselves. On the 27th, at which time this dog was killed, an examination was likewise made of this side of the neck; the appearances corresponded exactly with those of the preceding experiments.

Experiment V. August 5th.—I performed a similar experiment on the carotid of another dog. I killed him on the

3d of September, and found that the appearances differed in no respect from the foregoing.

The lead having answered my expectations so well in these cases, I felt a great inclination to ascertain whether that substance alone possessed the property of remaining in contact with the living tissues, without exciting irritation or any unpleasant consequences, or whether similar results might not be obtained by using other metals. I accordingly continued the subject, using gold, silver, and platinum, instead of lead.

Experiment VI. August 12th.—The right carotid of a dog was separated neatly from its surrounding parts, and tied firmly with a small gold wire; the wound was kept closed with adhesive strips, and by the third day had united firmly. *September 2d.*—The dog was killed, and I examined his neck; I could perceive no difference in the appearances exhibited here from those produced by the lead.

Experiment VII. October 13th.—I exposed the left femoral artery of a dog, and placed around it a gold wire. *15th.*—I examined this dog, and found that from his restlessness he had removed the dressings, and had torn open the wound; I replaced them, and he recovered in a short time. *October 30th.*—I examined the subject of this experiment, and found that the results corresponded in every particular with those above related.

Experiment VIII. October 16th.—The above experiment was repeated on this dog; the wound healed very kindly by the first intention, etc. *Oct. 30th.*—I found the result to coincide with the last in all particulars; there was a slight appearance of ecchymosis around this ligature, which, no doubt, would have been removed in a few days more, only fourteen days having elapsed between the operation and the examination of the result.

Experiment IX. October 5th.—I passed around the carotid of a dog a piece of silver wire, and united the wound by the first intention, which had taken place on the 9th, at which time I examined it. *Oct. 30th.*—I found that the silver had become encysted, and had left no remains of irritation.

Experiment X. October 5th.—The same experiment on another dog. *30th.*—The results the same.

Experiment XI. October 13th.—I passed a silver wire around the right femoral artery of a dog. *15th.*—Wound healed. *30th.*—Wire encysted. No traces of inflammation remaining.

Experiment XII. August 29th.—I cut down on the left carotid of a dog, and passed around it a platinum wire. This animal made his escape, and I did not see him again until the 16th of October, when I examined his neck; the wound had united so nicely that its former situation could scarcely be recognised; the cellular substance beneath was slightly thickened and indurated; the artery was obliterated for an inch and a half or two inches; the middle portion resembled a small cord, around the center of which I found the platinum wire enclosed in a mass of condensed cellular substance, which formed for it a cyst; the inside of this cyst was smooth, and adhered closely to the platinum; no traces of inflammation remained.

Experiment XIII. October 15th.—Another dog was subjected to an experiment resembling the above in all particulars. *Oct. 30th.*—I killed him, and found no other difference in the appearances than that the cyst which enclosed the platinum was not so perfectly formed; it however existed.

Experiment XIV. October 16th.—This experiment was conducted precisely as the two last; the appearances upon examination were the same. This dog was the subject of Experiment VII, and was examined on the 30th of October.

Experiment XV. June 15th.—I enclosed the humeral artery of a dog in a ligature made of a single strand of silk, previously waxed. In applying the ligature I drew it barely tight enough to place the opposite sides of the vessel in contact, without dividing the internal and middle coats. Both ends were then cut off, and the lips of the wound placed in apposition; it did not unite, however, by the first intention, the dressings having been removed by the animal; it was now dressed in the usual way, and soon healed perfectly by granulations. On the fourteenth day after the operation I made a dissection of the parts; the artery was filled with a firm coagulum, both above and below the place of the ligature, which prevented the possibility of hæmorrhage, so firmly did these coagula adhere to the parietes of the vessel.

The ligature was found in the center of a small abscess, loose and detached from the surrounding parts; the artery was ulcerated through, the ends being separated a short distance.

Experiment XVI. August 15th.—I repeated this experiment on the femoral artery of another dog; the wound was united by the first intention. *Sept. 2d.*—Upon dissection,

an abscess as large as a pea was discovered immediately under the skin and above the artery; the loop of silk was found in its center, and offered no resistance when I attempted to remove it.

Experiment XVII.—I passed under the femoral artery of a dog a piece of gum-elastic, previously stretched and rolled to render it of a proper size, and tied it with a single knot. This operation was performed on the 15th of August; the wound united by the first intention. *Sept. 3d.*—An examination was made of the result of this experiment. The ligature was found encysted; the inner side of the cyst was uneven, and not in close contact with the gum-elastic; from its appearance I thought that pus had existed, but was now absorbed; the artery was obliterated to the next branch, both above and below.

Experiment XVIII. *August 20th.*—The same experiment repeated on the right carotid of another dog. *23d.*—Perfectly united by the first intention. *Sept. 2d.*—The gum-elastic was found contained in an abscess as large as half a nutmeg; the artery was impervious both above and below the ligature, and ulcerated through at the place of its application.

Experiment XIX. *September 1st.*—The experiment with gum-elastic was repeated on the femoral artery of another dog, and the wound united in the usual manner. This dog was the subject of Experiment XII; consequently I had not an opportunity of examining him until the 16th of October, when he was again caught. The cicatrix in the skin was to be seen plainly. On making an incision at this place, I perceived a small lump about the size of a pea, immediately under the skin, and at the lower angle of the wound. I opened this, and found it to contain the gum-elastic ligature, surrounded by a small quantity of yellowish looking pus; the vessel was removed for the space of an inch and a half, both ends obliterated. Just above the place of the ligature, several small arteries, not distinguishable in the healthy condition of these parts, were observable, and appeared to be spent upon the contiguous muscles.

Experiment XX. *August 25th.*—I cut down on the left femoral artery of a dog, and tied it firmly with a grass ligature, such as is used for fishing-lines. *27th.*—It had healed by the first intention. *Sept. 2d.*—The grass was found encysted, but the inner side of the cyst was moist and uneven, and did not appear to embrace the ligature closely; no appearance of inflammation.

Experiment XXI. August 25th.—The same operation performed on another dog. *Sept 3d.*—It was examined, and found to correspond with the twentieth in every particular.

From the experiments now detailed, we may, I think, conclude that the plan of tying arteries with lead and the other metals is free from danger, and may be productive of some peculiar advantages; more experience and a greater number of experiments are necessary to establish this point thoroughly, and it is to be hoped that some one fully competent to the task will prosecute the subject.

Electricity in the Treatment of the Diseases of the Ear. By
DE COURCILLON, M. D.

Of all the local agents employed in the treatment of the diseases of the ear, electricity is, undoubtedly, the least efficacious, although, perhaps, the most praised, not only by physicians, but by patients who seem to expect every thing from it. Of course, charlatanism takes advantage of the popular credulity upon that point as upon every other, and electric batteries are busy working, if not the cure, at least the money out of too plethorous pockets.

Great things, it is true, may be expected of electricity for the relief of deafness; still, I am afraid our knowledge of its therapeutic application and effects upon the organ of hearing is so limited, that it must take some time before it be made to work the wonderful cures so much wished for.

They have endeavored to establish an analogy between the electric fluid and the nervous influx, and hence, the therapeutic effects of this powerful remedy have been praised without measure. The Abbe Nollet (1) struggled against such an unfounded induction, and the propagators of the contrary opinion, Bertholen, (2) Manduyt, (3) Comus, (4) Poma and Brainard, (5) could not countenance their assertions with good substantiating reasons. Relatively to deafness, it cannot be denied that electricity has a very marked action upon the acoustic nerve. It has been inferred that it ought to contribute to restore the sensibility of the ear,

1. *Encycl. art. Electricit.*, 1755.

2. *De l'elect. du corps humain.*

3. *Mem. de la Societe Royale de Med.*, 1778.

4. *Journ. de Phisique*, 1775.

5. *Journ. de Med.*, November, 1787.

and it has particularly been used in cases of nervous deafness.

Manduyt (6) treated ten deaf patients with this means, considered heroic, and only one seems to have been slightly benefitted. Cavallo (7) asserts that electricity cures every kind of deafness, but he gives no proof for his assertion. Lebourrier Desmoutiers (8) says that by this means he has restored the hearing to a deaf and dumb girl, but a short time after the cure the child was in as bad a condition as before the treatment. Hufeland (9) published in his *Journal* a great number of cures of deafness, but most of them could not stand a minute and severe criticism; for with some the deafness was but intermittent, and with the others the disease was but recent. Busch, of Marbourg, (10) has treated with electricity a man sixty years old, and after ten sittings, the disease appeared to be destroyed. It is very probable that in that case there was but a simple obstruction of the Eustachian tube. There remains to be known how far the electric fluid can liquify the mucosity accumulated in that passage. So far, nothing proves that it does. Lentin speaks of the advantages which can be derived from electricity combined with stimulating injections, but he confesses to his not having had the opportunity to make the necessary experiments.

The French aurists of our times have taken but very little notice of these fine promises. Saissy (11) thinks that this therapeutic means is applicable but in cases of deafness from partial palsy. Itard (12) says that electricity is not of the least use in the diseases of the ear, and Deleau is of the same opinion.

Most of the aurists who believe in the efficacy of electricity against deafness, agree in saying that this agent ought particularly to be employed against the form known as "torpid," that is, from want of nervous action. But this species of deafness is rare, for Kramer during his long career reports only four or five such, of a hundred cases. The result of it is, that in the greater number of cases treated by electricity, the disease ought to be increased in

6. Dict. des Sc. Med. art. Electricite.

7. A Complete Treatise on Elect., Vol. 9.

8. Consid. sur les sourds muets de naissance.

9. Journal vii.

10. Aseitrage zur ausübenden Arzneiwissenschaft.

11. Essai, etc., p. 272.

12. Traite, etc., b. y.

the ratio of the violence of the excitement produced by that fluid upon an already over excited system. Kramer has constated the insufficiency of such a treatment upon two hundred and two patients affected with nervous deafness, and he adds, "I do not advise anybody to try that remedy."

Considering electricity, galvanism and animal magnetism as emanations of the same power, it has been tried to render useful the properties of these different agents to ameliorate deafness. It has even been thought that mineral magnetism could be advantageous in such cases, but no fact justifies such an opinion. The introduction of a magnet in the meatus, or its application concentrated upon the pavillon, do not act otherwise than by the sensation of the metallic cold it imparts to the parts, and this can prove injurious.

As to galvanism and magnetism, they are very active agents, which have of late been of great repute in Europe. Magnetism and electricity have particularly been praised beyond measure. Here are the results constated by Kramer's experiments:

Generally the deafness to be attended was "nervous with noises." In such cases electro-magnetism has a very active, very irritating action upon the acoustic nerves. These effects are still more marked when the current is directed from the Eustachian tube to the meatus externus. The immediate effect of such a current is to produce acute pains in the ear, convulsive motions in the surrounding parts, and an increase of the faculty of hearing; but such a happy change lasts but a few moments. If the same experiments are continued for a while, there is almost invariably increase of the noise and augmentation of the disease. It is plain to every careful observer that electro-magnetism does not act as a tonic, but as an irritant; the acoustic nerves are violently over excited, and one can readily understand the result of such a medication. It is, then, of the utmost importance to use but sparingly and cautiously of such a therapeutic agent.

Mineral magnetism has been considered as a powerful means of cure of the deaf and dumb, whether their affection was congenital or acquired. Doctor Barrils, of Hamburg, who has experimented upon the deaf and dumb of the Berlin Institute, had signalled fourteen cures of fifty-eight patients, but I was enabled to constate (it is Kramer who speaks) that my watch was not at all heard, even applying it upon the ear of the two children which were reported as the brightest examples of such an astonishing success; and, however, my watch is heard from a distance of thirty feet by people enjoy-

ing a healthy hearing. Baldinger, (1) Audrey, (2) and Thonret, have published nothing authentic on the subject. Becker, Bulmering, Schmidt, and Bahrdr, have experimented with the same means, but with the most complete failure.

Magendie, Jobert de Lamballe, Mesniere, have often employed electro-magnetism in certain forms of nervous deafness, but they never derived any good advantage from it. M. Dupotet, a celebrated magnetizer, was allowed to experiment upon the subjects of the Royal institute of the deaf and dumb in Paris, and the report of Magendie before the Academy of Sciences demonstrated the uselessness of the efforts of that individual.

Galvanism has been prized with enthusiasm by a certain number of learned men, who most of them have acted under the influence of a momentary impulse, without knowing what kind of deafness they intended to cure. Of course, their assertions do not deserve the least confidence. It is true that galvanism produces upon the acoustic nerves a very active stimulation, and Schubert explains thus the ease with which certain patients perceive a few sounds to them new. But such an improvement does not sustain itself; besides, it often happens that such a shock, repeated, aggravates the disease very rapidly. Itard speaks in about the same way upon that subject. Hence, it is safe to conclude that galvanism has never been of any authentic service in the treatment of the affections of the ear, while it is beyond doubt that it has frequently proved very injurious to the patients subjected to its influence.

Since practicing in San Francisco, we have collected a certain number of facts illustrating the ideas as advanced in the above paper. At the next opportunity we will publish them, and thus show the ill results of the abuse of electricity, etc., in California.

Do Bad Smells Cause Disease?

The tendency of the human mind to rest satisfied with any belief that is authoritatively asserted, is too well known to require any comment. Philosophers of all kinds are no more exempt than other people from this easy style of dealing with difficult problems. Medicine is, we think especially chargeable with cherishing pet answers to questions that force

1. Opusc. Medic.

2. Beobachtungen und Untersuchungen über den Gebrauch des Magnets, etc.

themselves unkindly on her; and we think that the way in which she has made up her mind as to the causes of various kinds of fevers, is an example of this style of cutting the Gordian knot.

Of late years, it must have struck all our readers that pig-styes, dirty pools of water, open privies, ash heaps, etc., have been declared highly criminal, and on all occasions even adjudged guilty of producing any kind of fever or bowel complaint that may have broken out in the neighborhood. If a child happen to suffer typhus in a farmhouse, it is the mixen at the end of the barton that caused it. If an epidemic of English cholera befall a village, it is traced to the duck-pond by the road-side. If in a wealthy household the inmates are stricken with diphtheria, some open sewer, close at hand, has, as a matter of course, been the cause. So accustomed are we to hear this sort of reasoning resorted to on all occasions, that one feels a little difficulty in expressing doubts as to the certainty with which the effect is unhesitatingly traced to its cause. Nevertheless, we think there is at least sufficient evidence to cause reflecting minds to pause ere they give in their adhesion to the general opinion, and thus shut their eyes to further research and inquiry. Dr. Watson has, we know, stated it as his distinct opinion, "*that neither animal nor vegetable decomposition is sufficient to generate fever of any kind;*" and the researches of Dr. Guy, and other observers, have certainly gone some way to support that opinion.

Dr. Guy, in his very interesting contribution to the Journal of the Statistical Society, on the health of Nightmen, Scavengers and Dustmen, gives us a mass of statistical facts, which, it must be confessed, run counter to the generally received opinion, that foul animal or vegetable emanations are the fruitful source of disease. This class of men, without doubt, spend their days in the very midst of filth of all kinds. He says:

"In most of the lay-stalls or dustmen's yards, every species of refuse matter is collected and deposited—night-soil, the decomposing refuse of markets, the sweepings of narrow streets and courts, the sour-smelling grains from breweries, the surface soil of the thoroughfares, and the ashes from the houses."

This heterogeneous mass the scavengers or "hill" people have to sort or to pass through sieves, so that the emanations arising therefrom must be brought into intimate relation with their lungs and skin. If fever and diarrhœa are so clearly traceable to the vicinity of these so-called noxious materials, surely the scavengers ought to be a poor, fever-stricken race.

A medical examination, however, of this class of workmen as compared with brickmakers and bricklayers' laborers, proves that the scavenger is comparatively exempt from disease. Thus, among a number of men examined in each of the three classes, it appeared that the numbers attacked by fever were, among the scavengers, 8 per cent.; among the bricklayers' laborers, 35.5 per cent.; and among brickmakers, 21.5 per cent.

This result seems extraordinary enough; but it may be argued that these men do not live in the laystalls or dustyards, and therefore that their exemption from fever may be attributable to this; but what can be said if the master dustmen and their families, who live all their lives in the midst of these heaps of so-called fever-nests, are healthy. Dr. Guy says:

"I do not think that, whether in town or country, such another body of men (as master dustmen) could be brought together, except by selection; and it is not going too far to assert of them, that, if the comparisons were limited to the inhabitants of London, or our large towns, no score of selected tradesmen could be found to match the same number of scavengers brought casually together."

Unless we suppose that the scavengers get used to this so-called miasmatic atmosphere, or that after a time it no longer affects them, we cannot see how the foul emanation theory can hold water. Nature cannot work in one place differently from another. Night-soil must be just as deadly in an open yard in London as in the country. But here we have the experiment tried on a larger scale, of a whole class of men subjected to foul emanations, and yet they are far from being an unhealthy race, and are not nearly so prone to fever or bowel disease as the bricklayers' laborers.

We are far from wishing it to be understood, however, that we do not consider foul emanations as dangerous or baneful under any circumstances. In our opinion, they become noxious when much concentrated. Our houses, for instance, are built on the principle of a bell-glass; and our drains and privies, and all other impurities, if allowed to give off a deleterious miasma, most certainly do become most virulent sources of disease. But, in the open air, we think it very doubtful whether these emanations are ever the cause of injury to man.

Let us watch with Dr. McWilliam a still more gigantic experiment on the health of the Thames waterside people, which has been going on for years, and is still proceeding. The whole sewerage of two and a half millions of people, has, within the last ten years, been turned into the metropolitan

stream. Year by year its waters have become more contaminated, and its smell more disgusting. It should follow that the health of the waterside community is proportionally decreasing; that febrile complaints, cholera and diarrhœa are alarmingly on the advance. But what is the real state of the case? Dr. McWilliam in his Report for the year 1858, on the health of the Water Guard and Waterside Officers of her Majesty's Customs, says:

"As respects bowel affections, to which I include diarrhœa, choleraic diarrhœa, dysentery, etc., the types of those forms of disease, which, in this country, noxious exhalations are commonly supposed to originate, we find the additions during the four hot months of the past year from this class of complaints 26.3 below the average of the corresponding period of the three previous years, and 73 less than those of 1857.

The quantity of putrescent animal and vegetable matter in the Thames has been going on increasing; but the illness generally attributed to the emanations arising therefrom has been decreasing! We know that many will urge that all the combustibles (if we may use the term) being thus accumulated, it only requires the match to be applied, to find epidemics raging like wildfire. But the year before last, cholera did break out on the banks of the Lea, and there died out, apparently from want of sustenance. This year, according to the *Lancet*, cholera, veritable Asiatic cholera, has been on board the Dreadnaught; yet it has not spread, and there seems no likelihood of its doing so, for this season at least. As Dr. McWilliam truly says, "It is nowhere sustained by evidence, that the stench from the river or docks, however noisome, was in any way productive of disease." It is true that one waterman, in June last, was said to have died of Asiatic cholera, and that his death was ascribed to river poison; but, as the eminent observer, whom we have just quoted, correctly remarks, "it is opposed to all analogy, and to the usual order of nature, and therefore unphilosophical, to suppose that a cause so extensively diffused should have been so singularly limited in its effect."

Greatly doubting, as we do, the alleged ill effects of foul emanations in the open air upon human life, we nevertheless do not think that the crusade against filth should for one moment be relaxed. A bad smell may be no more unhealthy than a bad taste, but we should, if possible, avoid the one as much as the other. What we should, above all things avoid, however, is the falling into the error of supposing that bad smells are the indubitable sources of many puzzling diseases, and of thus hardening our minds against investigations of the

kind which were instituted a year or two ago by Dr. Barker, and which, when completely carried out, will enable us to decide what the noxious principles are which make all the difference between an unpleasant and a malarious odor.

Treatment of Dyspepsia. By M. BEAU, Hospital of La Charite.

The disturbances of digestion comprised under the appellation of *dyspepsia* constitute a morbid state extremely various in its forms. However these may be, two indications only require to be satisfied, namely, to contend with the cause of the disease, and to check the latter by the course of treatment most appropriate to its leading symptoms.

When, as it frequently happens, *dyspepsia* is connected with the persisting agency of some mental cause, it is difficult to find any remedy but diversion of the mind. *Dyspepsia* is, however, sometimes expressive of a foul condition of the *primæ viæ*, in which case M. Beau prescribes :

R. Pulv. ipecac.	-	-	-	-	15 gr.
Antimon. potassia-tartratis	-	-	-	-	2 gr.
Aquæ.	-	-	-	-	5 oz.

To be taken in two doses, at an interval of ten minutes. This practitioner even usually begins the treatment of *dyspepsia* in general by the exhibition of the above emetic mixture. It is his touchstone for the discrimination of gastric derangement from certain forms of *dyspepsia* which closely resemble that indisposition. If gastric derangement be really present, it promptly yields to the remedy, and, in the contrary case, no more severe symptom is induced than nausea and slight vomiting. In a young girl, under Mr. Beau's care, *dyspepsia* was due to the presence of tape-worm, which, being expelled by a single dose of kousso, the derangement of the digestive organs was at once relieved. If the malady is referable to the abuse of tobacco, tea, coffee, fermented fluids, etc., a cure can be looked forward to only from abandonment of the injurious habits. When the difficulty of digestion is under the influence of some internal disease, it is towards this the practitioner's attention should first be directed.

As to the special treatment of *dyspepsia*, Mr. Beau begins by banishing from it, almost altogether, narcotics which, according to Mr. Pidoux's graphic expression, are the knot of pain.

Opium and belladonna silence pain, it is true, but they frequently mask its cause, and have, in *dyspepsia*, the further

disadvantage of destroying the appetite, and interfering with the digestive functions. Mr. Beau likewise denounces abstinence from food and repose in bed as highly improper, and is even more stringent in his interdiction of blood-letting which may induce anemia. The patient should eat despite the pain which must follow, abstinence being in dyspepsia more dangerous than excessive feeding. He must also take exercise. Mr. Beau, on one occasion, attended a patient who, believing himself to be suffering from disease of the liver, kept his bed, and, of course, digested his food with much difficulty. The professor ascertained that the supposed hepatic affection consisted merely in intercostal neuralgia, which is so common in dyspepsia. He obliged the patient to get up and take exercise; on the very next day digestion was attended with less pain, and a complete cure was effected in a fortnight. In short, it is necessary that dyspeptic subjects should not lead an eccentric life.

In dyspepsia each case stands alone, and, therefore, the practitioner has to deal with individual predispositions; hence a necessity for feeling his way, in order to discover the really effective treatment. Among the remedies which are daily prescribed in Mr. Beau's wards for the primary symptoms of dyspepsia, none, in our opinion, are so useful as cool sulphur baths. In summer, and during the warm season, cold river-baths or cold water affusions, repeated twice or thrice in the day, are also a powerful medication. Next in order of utility, we may mention a succession of as many as seven or eight blisters applied to the epigastric region. As to internal medicine, trisnitrate of bismuth (half a drachm daily,) magnesia, tonics, bitters, such as wild endive, or camomile, pepsine, or Belloc's charcoal, are also found advantageous. The latter preparation consists of charred poplar wood, and is taken at the dose of one table spoonful after each meal; it is more successful with men than with women, without any assignable cause.

It will be readily conceived that a properly regulated diet promotes the efficacy of these various remedies. Mr. Beau's patients make three or four meals daily, consisting in soups, meat, vegetables, raw and very ripe fruit. Wine and water is allowed to some, to others, beer, cider, or even water, according to the effects of either upon the digestive functions. Mr. Beau has observed that, more especially in women, wine and water often keeps up dyspepsia, and that many persons suffer merely from the very copious drink they indulge in. Whatever beverage be adopted, it should be taken sparingly. Mental diversion, when possible, is often of the greatest assist-

ance in the treatment: for instance, it is not unusual to find that persons, who digest with difficulty their meals at home, will dine out and eat with appetite and perfect impunity all sorts of dishes. Gymnastics, walking, riding or carriage exercise, constitute hygienic adjuvants of unquestionable value in the treatment of this disease.

Turning to some of the leading symptoms of dyspepsia, we find that loss of appetite, gastralgia, intercostal neuralgia, flatulency, constipation, vomiting, are those which more especially claim attention.

For loss of appetite, Mr. Beau prescribes bitters, seltzer water, spices, iced drinks, and to convalescents he even sometimes permits anchovies, oysters, salad, fruit, and these articles of food are digested without difficulty. Gastralgic pains are removed by blisters and ice internally; both these remedies are likewise applicable to obstinate vomiting. In certain cases, however, vomiting is induced by abstinence, in others, it depends upon the capriciousness of the stomach, and yields when the food is changed. Some two years ago, a patient at the hospital Cochin every day vomited his broth and soup; Mr. Beau altered this for a more nutritious diet of meat and bread, and the vomiting ceased at once. The same result was obtained in the case of a young man whose stomach, in spite of the use of narcotics, rejected every thing, even ice; his food was modified, and the very next day convalescence set in. As to flatulency, it may be removed by charcoal, or calcined magnesia; constipation, by aloetic pills or cool enemas; warm injections should by no means be resorted to, inasmuch as they relax the intestinal fibres, and, therefore, operate in a manner exactly opposite to the required object.

Besides the above, which Mr. Beau designates as the usual remedies, there are others of a more or less expensive description, such as traveling, hydropathy and mineral waters; these are attainable by privileged patients only, and their efficacy cannot be disputed. Mere change of place, irrespective of any consideration of the nature of the air, is a most useful resource in dyspepsia. Traveling breaks the habits of life, alters the mental pre-occupations of the patient, and exercises upon the digestive powers a still greater influence; sea-voyages present, over land-journeys, the advantage of meeting the double indication of inducing vomiting and submitting the subject to the tonic inhalation of sea air.

It is highly probable that the mere change of place has a considerable share in the effects attributed to mineral waters. Those of Vichy and Plombières, however, taken on the spot, seem, in many instances, beneficial, but they enjoy no exclu

sive influence, and Mr. Beau considers it a very difficult matter to point out the peculiar spa which will cure the patient. The water-cure is another valuable mode of treatment, particularly for persons in easy circumstances, who eat too much and exercise too little. It is not so useful for the poor, and it operates much in the same manner as bracing mountain air, by stimulating the appetite and reviving the digestive powers.

Forcible ingestion of food is a singular medication, which worked wonders in Paris in the hands of Benech. Instead of the gun-water, broth or milk, recommended by Broussais, Benech suddenly prescribed beefsteaks, slices of sausage highly flavored with garlic, strong soups and claret. The patients were, of course, terrified by this complete subversion of all their previous diet regulations, but it must be acknowledged that many derived much advantage from this new system.

So much for the main features of dyspepsia. We now turn to the secondary symptoms, the first of which requiring the practitioner's attention is anemia from destruction of the blood-corpuscles. Iron is the classical remedy with which this symptom is usually met, but it succeeds less frequently than is generally supposed. The ingredients of the blood are best restored by healthy digestion. This should, if possible, be re-established by bitters, tonics, exercise, change of air, and the desired object is thus attained with far more certainty than by the exhibition of metallic iron. Scorbutic anemia yields to vegetable acids, water-cresses, and horse-radish; and deficiency of albumen in the blood will be remedied by drastics and hydragogue aperients.

The nervous element of the disease, the nervosism of dyspepsia, should also be taken into account. This condition being one which sorely tries the powers of endurance of both patient and physician; the medical attendant often endeavors to soothe nervous irritation by ether drops, orange flower water, infusion of lime flowers, and sometimes even with opium or belladonna; but, as we have stated above, these are but palliatives, from which none but temporary relief can be expected. It is not the branches, says Mr. Beau, but the tree that must be felled. In such cases, therefore, cold affusions, tonic diet, and exercise should be resorted to, and the method instituted a hundred years ago by Tronchin may again be adopted with advantage. From the habits of luxurious idleness indulged in, at that time, all ladies complained of *vapors*; Tronchin ordered them to make their own bed and sweep out their own rooms; being a fashionable practitioner he was listened to, and the success of his prescriptions was such as ultimately to lead to his fortune.

Valerinate of Strychnia. By R. WYSONG, M. D., of Charlotte, N. C.

The above compound, so far as my knowledge goes, has never been introduced into the pharmacopœias, either of this country or of Europe; I feel, therefore, some delicacy in bringing it before the profession; but believing, as I do, that it will prove an acquisition to the already long list of medical preparations, and trusting to the liberality of the members of the profession for a fair trial of this new preparation before they condemn it, I will give my limited experience with it.

I have been using the Val. Strych. some ten months, and find that it is more particularly adapted to those cases where there is general debility, accompanied with nervous excitability, loss of appetite, indigestion, constipation, depression of spirits, and all the symptoms following more or less on the want of tone in the nervous system. Heretofore, in many of such cases, I have used strychnia, and although they generally improved under this treatment, yet I never met with as complete success with it as I have in similar cases with the val. stryeh.; hence I am led to believe that, in all such cases as above mentioned, we have in this preparation a very reliable and useful remedy.

The preparation I have been using is prepared by dissolving sulp. stryeh. in valerianic acid. So simple a preparation can be put up by any physician or druggist. I have been using it in the following proportions:

Sulp. stryeh.	-	-	-	-	gr. viij;
Val. acid.	-	-	-	-	ʒ i;

but this quantity may be altered to suit particular cases.

The following are some of the cases in which, among others, I have used it with entire satisfaction:

May, 1859.—Mr. E., aged 45—has suffered with asthma for fourteen years; has tried various remedies without the least benefit. The paroxysms came on about once a week, he never passing two consecutive weeks without having one; is very nervous, and suffers from general debility.

Jan. 19th, '59.—Prescribed

R—Of Sulphate of strychnia.	-	-	-	gr. i;
“ Pure water,	-	-	-	ʒ i;
“ Acetic acid, suf. quan.				

Directed ten drops, three times per day, to be increased one drop per day until the dose reached thirty drops. Kept

him on this prescription one month without any apparent benefit.

Feb. 20th.—Prescribed

R—Of Val. strych.	-	-	-	-	5 i;
“ Water.	-	-	-	-	3 i.

Directed ten drops, three times per day, to be increased as above. Has never had but one paroxysm since he commenced with this prescription, and is now, to all appearances, in good health. The medicine was kept up about one month.

Sept. 20th.—Has continued free from asthma; occasionally, during damp or rainy weather, experiences slight hoarseness, with disposition to clear the throat; this is generally relieved by a few doses of the sol. val. strych.

May, 1859.—Mr. R., aged 60—has had asthma since July, 1858, the paroxysms increasing in frequency each week. He now has one nearly every day, and sometimes two per day. In conjunction with asthma, he has bronchitis, also indigestion, torpor of the liver, as indicated by decided yellow hue of the skin, constipation, and ashy stools, he never having an evacuation without taking some purgative; at times there is decided stranguary; this seems to be superinduced by constipation, as it is always relieved by free action of the bowels. Pulse over 100, small, and at times can scarce be counted; great general debility—spends more than half the day in bed; very nervous, so much so, that by reading the least exciting newspaper article, or even conversing with a friend, will at times bring on a paroxysm. Cannot sleep in the recumbent posture, but is compelled to be propped up nearly straight in bed. The paroxysms come on generally about 3 P. M., but may be brought on any hour, by the least excitement. Has been in the habit of taking nauseants when he feels an attack coming on, which, after several hours, relieves him for the time.

May 13th.—Prescribed

R—Of Val. strych.	-	-	-	-	5 i; *
“ Water.	-	-	-	-	3 i.

Directed to commence with five drops, three times per day—to be increased three drops per day until the dose reached thirty drops. For several weeks had no sensible effect, owing to the dose being too small, and very irregularly taken; in fact, he seemed to be growing worse.

May 31st.—Prescribed

R—Of Acetate of squills.	-	-	-	5 i;
“ Tar. ant.	-	-	-	gr. ij.

Directed to begin one hour before the usual time for attack, teaspoonful every fifteen minutes until nausea was produced; at the same time prescribed

R—Of Val. strych.	-	-	-	5 ij;
“ Water.	-	-	-	5 i.

Directed fifteen drops, three times per day, to be increased one drop per day, as above. After the fourth day, as there had been no paroxysm, directed the nauseous mixture to be left off.

June 11th.—Has had no return of paroxysm; no sign of bronchitis; bowels regular; skin greatly cleared up; pulse 70, rather full and strong; general health improved in every respect, so much so, that he drives out several miles every clear day, and sleeps without inconvenience in a recumbent posture. Continued the valerian, thirty drops three times per day.

July 1st.—No return of asthma; health very much improved; seems quite free from nervous excitability. Continued the val. strych., as before.

Sept. 20th.—Continued free from asthma up to the latter part of August; had not been taking the medicine regularly for some weeks. About this time, during a very damp day, drove several miles to see a neighbor; upon reaching there, sat down in a draft until completely chilled, which brought on his asthma. Since that time has had one paroxysm. Saw him September 8th; prescribed val. strych. as before. He is now enjoying his usual health.

I have given the above case at some length, in order to show more fully what I conceived to be the effect of the medicine. I doubt very much whether the case will ever be permanently cured, but by the use of the above preparation the disease has evidently been kept at bay, and the patient's general health very much improved; and by long continued use of the remedy, he may possibly break up all tendency to asthma.

I have used val. strych. with very great success in the treatment of females. One case of inflammation of the ovarian gland followed by suppuration, in leucorrhœa; of course, in such cases, I also applied local means.

“*The Vegetable Parasites of the Human Skin*,” by Jabez Hogg.*
By V. Translated by O. D. PALMER, Zelenople, Pa.

The first researches on Vegetable Parasites, in general, are due to Bassi, of Milan. He discovered, some twenty years since, the vegetable character of a disease that produced great ravages among the silkworms. About the same time, Schonlein discovered vegetables of the class *Cryptogamia*, order *Fungi*; the appearance and development of which accompanied certain diseases of the skin. Since that time, the observations of Schonlein have been repeated and extended by a great number of authors, such as Messrs. Remak, Gruby, Lagenbeck, Robin, Hughes, Bennett, Kuchenneister, Bazin, Jenner, Gall and many others.

Do the cryptogamic productions of the skin play the part of determining cause, or are they not merely accidental epiphenomena of the affections denominated parasitic? This is the question propounded by Jabez Hogg, and which he seeks to investigate. Each side of the question has grave authority to sustain it. Dr. Bennett maintains that these vegetable formations are secondary, and are only found on animals previously diseased. Drs. Robin, Gall, Jenner, Bazin, and others, on the other side, affirm that the parasite is the sole cause of the disease. Dr. Jabez Hogg inclines to the opinion of Bennett; and here follows an epitome of the arguments on which he is supported:

1st. The vegetables of the order *Fungus* invariably derive their nutritive elements from matter, the vitality of which is diminished, and in the way of being decomposed, or already partly decomposed.

2d. These vegetables have nothing characteristic, for they have been observed in almost every species of chronic disease of the skin. Thus, in twenty cases of Leprosy and Psoriasis, evident traces of vegetables were found in ten. The same production was noticed, in two out of three cases of Lichen, four times out of six cases of Eczema, in one case of Ichthyosis, and in one of Spilus. None of these cases passed for being caused by *fungi*, according to Jabez Hogg.

3d. Other observers have not been able to find *fungi* in the diseases that have been attributed to their development; and Dr. Hogg cites in support of this allegation, and as competent authority, Malherle, Cazenane and Wilson.

*From *Gazette Hebdomadaire de Medicine et de Chirurgie*, July, 1859.

Among the disease passed in review by Dr. Hogg, *Faris* is found in the first rank; but the singularity of the matter is, that in a goodly number of cutaneous affections, he has encountered not one single case of this disease; which, it is true is very rare in England.

The preceding considerations induce the author to conclude that there does not exist parasites characteristic of such and such diseases, and constituting their determining cause. He adds to the proofs he has given, that the inoculation tried by Remak and others, repeatedly, on sound individuals, always failed, and that cutaneous diseases are rarely, if they are ever, cured by the destruction of the parasites; whilst they may be remedied by the suitable administration of alteratives and tonics, such as are susceptible of correcting the dyscrasia of the blood, the true source of the disease.

The memoir of Dr. Hogg, of which we have given but a very concise summary is quite extended. It has required very considerable research, and therefore deserves to be held in consideration. Notwithstanding it is very easy to be convinced, in reading it, that the author is not perfectly posted in the science appertaining to this subject. Many of the arguments employed by him are valueless.

It were necessary, in order that we should comprehend the result at which he arrives, by an examination of many cutaneous affections, that he should have specified well, *Lichen*, *Eczema*, etc., instead of assuming, as Dr. Bazin has done, that certain varieties of these eruptions ought to enter into the group of parasitic affections.

No one will dispute but there may be conditions of the soil that favor the development of the cryptogamia. Without this, it would be very difficult to explain why the *Acarion Schoncinii*, or *Fungus of the faris*, vegetates, in preference, on the hairy scalp of infants; why the *Tricophyton tonsurans* should occupy, by predilection, the same seat in children, and the parts of the face covered by the beard in man (*Mentagra*.) But we must not attribute to these conditions of the soil more importance than they deserve, whilst they exert only a pre-disposing influence.

Dr. Hogg still invokes, in favor of his opinion, facts that can lend him no aid. He cites the experiments of Remak, and says the inoculations tried by him did not succeed. Now, the inoculation, or rather transplantation, practiced by Remak on himself did succeed perfectly. Bazin, moreover, has been successful not only in inoculating the *faris*, but also the *Tricophyton tonsurans*.

Finally, Dr. Hogg contends that the destruction of the parasite but rarely cures the cutaneous affections called parasitic, if indeed it ever cures them. And further, according to him, these affections may be cured, by a system of medication, directed solely against the dyscrasia that causes the disease.

In order to express as exactly as possible, the truth on these two points, we must take the counterpart of Dr. Hogg's proposition. The beautiful experiments of Dr. Bazin have established irrefutably—and this is one of the greatest progresses in pathology in modern times—that the radical destruction of parasites, such as is made by epilation, is the sole efficacious means of treating parasitic affections, having a vegetable cause.

Of all the arguments of Dr. Hogg, there remains only one sole assertion—*i. e.* That fungi have been found in many diseases, not hitherto ascribed to cryptogamic productions as a cause. We have already made reservations in regard to certain facts. As to others, what do they prove? We should not, in any manner, be surprised, if there should be found spores, after an assiduous search, in the products of various eruptions. But how can any comparison be established between these cases and those where the *spores*, either alone, or accompanied by *sporidies* and by *mycelium*, are in considerable quantity, and have penetrated to the midst of all the elements they enter. It is enough to examine, by the aid of a microscope, a small portion of a cell in *Farus*, a hair torn from a part affected with *Mentagra*, a parcel of the scales in *Pityriasis versicolor*, to be convinced of the importance exerted by the *Cryptogamia* in these affections—importance demonstrated in a manner altogether peremptory, by the effects of the parasiticide treatment.

This new war, very benign to be sure, against the conquests of the microscope, in the field of cutaneous pathology, will have no better success than the others. Whatever may be said to the contrary, the microscope, in all these affections, has rendered an immense service. It has thrown light upon these affections, previously so little understood. It has led Dr. Bazin to establish a rational and methodical treatment for them, and to substitute for the secret remedies vaunted by the successors of the Mahans, a more simple and efficacious medication. The argument appearing most in fashion at present, consists in saying that the parasitic diseases were cured before these new researches were made. We will say nothing of the *Itch*, but as regards the

cutaneous affections produced by the *cryptogamia*, they were not cured certainly but in a very small minority of cases. This is proved by the physicians sending their patients to the brothers Mahan, in despair of healing them by their own means; proclaiming thereby their proper inability. I speak here of the *Plica* only. The *Mentagra* may rightfully pass, in certain cases as altogether incurable; and the *Itch* itself, although the method of general friction had been employed, we were so little instructed in its effects previous to the investigations of Dr. Bazin, that we daily resorted to some new mode of medication, either externally or internally. Now, it is the microscope that has brought us to understand the utility of general frictions; and since that time this method is nearly the only one put in requisition. It is to the microscope that we are indebted for the disembarassment of that incessant and deplorable *hatching-out*, still-born therapeutic means of cure. This most precious instrument has taught us *why* the epilation and the parasticide lotions, general frictions, and parasite-destroying unctions, heal the cutaneous eruptions caused by parasites.

If we call medicine an Art, it is a Science also. To know how to cure a disease is evidently the supreme aim of the Art. To know the *wherefore* of the curing of this disease is almost the last words of Science.

On Cold Affusion in Narcotic Poisoning. By Dr. REEVES JACKSON.

“Under the impression,” says the author, that the value of cold affusion as a convenient and most effectual remedy in cases of narcotic poisoning, is not so highly appreciated by the Profession as it should be, I am induced to relate the following cases:—Every Practitioner who has had experience in such cases, must have been painfully sensible of the impotency and impracticability of many of the ordinary means. When the degree of narcotism is very great, emetics cannot be swallowed, the stomach-pump is frequently not at hand, and galvanism, although a remedy of undoubted power, usually cannot be resorted to from want of the necessary apparatus. In view of the difficulties which surround the treatment of these cases, it is fortunate that there is a remedy always at hand, and one that in nearly every case in which recovery is possible by any means, is promptly effectual.”

Three cases are related in exemplification of these observations. The first was a child eight months old, to which a large dose of Godfrey's cordial had been given five hours before the author saw it. Intense stupor and rapid sinking were present, and the case seemed hopeless. The head being turned downwards, a steady stream of cold water was poured from a coffee-pot over the occiput. When two or three gallons had thus been poured, the child made a long gasping inspiration, and opened its eyes. They were soon closed again, but after the affusion had been continued awhile longer, the breathing became more distinct, and the child uttered a feeble cry. Suspension of the affusion was attended with complete reproduction of the sopor, which, however, soon yielded on its resumption, and after awhile the child having been got to cry lustily, vomiting was produced by means of an emetic and tickling the fauces. In two or three days the child had regained its usual health.

2. A lad, aged 19, suffering from facial neuralgia, drank a large tablespoonful of laudanum. The author was called to him seven hours after, and found him under the full poisonous effects of opium; the surface cold and clammy; the breathing irregular, slow and stertorous; the respirations eight in the minute; the pulse full, slow and very irregular, the pupils very contracted and insensible to light, the countenance calm and pale. Various means of arousing and exciting him were tried in vain, when cold water was poured upon the head from a large pitcher, held at a height of about eighteen inches. The effect was almost magical in arousing his sensibility; and, after awhile, violent vomiting ensued, all symptoms of drowsiness disappearing afterwards, under the use of a cup of strong coffee.

3. This was an example of poisoning by belladonna, occurring in a lady, to whom it had been administered in an enema for the relief of neuralgia of the rectum. She was found by the author completely insensible, with a swollen, flushed face, slow, unstertorous breathing, and a small, hard (130) pulse. Various means were employed to arouse her without any effect. A large enema of thin gruel was first administered, in order to clear out any of the poison that might remain in the bowel; and a steady stream of water was then poured upon the back of the head and neck. In about five minutes she made an attempt to articulate; and the use of the affusion was suspended, as the patient was cold. Placed in bed, and lightly covered, in ten or fifteen minutes her face became flushed, and she again fell into a deep sleep. The

cold affusion was re-applied, and she soon regained consciousness. Although she continued drowsy for some hours, she recovered without the use of any other remedy, her vision remaining dim and confused for about three weeks.

Dr. Jackson observes that although the efficacy of cold affusion in opium-poisoning has been proved before, he is not aware of its employment in the case of belladonna. "Toxicologists agree in stating that where an overdose of belladonna has been taken, the stomach and intestines are peculiarly insensible to impressions; and, in fact, the whole nervous system is temporarily paralysed. This fact, of course, detracts very much from the amount of dependence to be placed on emetics and purgatives, even when they can be swallowed, and obviously enhances the value of a remedy so simple and convenient, and which promises to be so useful, as cold affusion to the head. Evacuants, even admitting that they produce their full therapeutic action, can do little more than rid the system of that portion of the poisonous substance, which is still unabsorbed, and although highly useful for this purpose, and not to be neglected, yet, as remedies to relieve the narcotism already produced, and which forms the real source of danger, they are comparatively worthless. Hence the necessity of a remedy which has the power to stimulate the nervous system to a sufficient degree of action to maintain the vital functions, while labouring under the prostrating influence of a narcotic poison."—*American Journal of Medical Science*, July, p. 77.

On the Treatment of Corns on the Sole of the Foot. By
HOLMES COOTE, Esq., F. R. C. S., Assistant Surgeon to
St. Bartholomew's and to the Royal Orthopædic Hospitals.

I have lately had under my care some cases illustrating the nature of this painful affection and its treatment. It may be necessary to remark that corns are technically termed "clavi," from a fancied resemblance to the head of a nail; but most persons know that they consist of thickened epithelium or cuticle," and that a small bursa is sometimes found between them and the subjacent parts. They proceed entirely from undue pressure; hence they appear on whatever parts of the feet a pair of badly fitting boots or shoes press unequally and unpleasantly. The remedy is simple, and consists in the person so affected wearing boots with a sole as wide as the sole of

the foot, of ample length, square at the toes, and with the upper leather soft and moderately loose. But this advice is rarely followed, fashion exerting a more powerful influence than common sense."

There is however a form of corn which is found on the sole of the foot, the pain attending which is so great that patients are at times unable either to walk or stand. Mr. Erichsen notices it in his work on Surgery. "It is usually of small size and round in shape, the neighboring cuticle being always greatly thickened and hardened. It is extremely sensitive to the touch, the patient shrinking when it is pressed upon, as if an exposed nerve had been injured. On slicing it down with a scalpel, it will be found to be composed of soft, tough and white epidermis, arranged in tufts or small columns, in the centre of each of which a minute black dot is perceptible. Each tuft appears to be an elongated and thickened papilla, and the black speck is a small point of coagulated blood which has been effused into it. Around the depressions in which each of these corns is settled, the hardened cuticle forms a kind of wall."—p, 439.

I have known ulceration to occur in this morbid structure, when a deep and foul sore, exceedingly sensitive, is formed. It may be healed by rest, but it recurs when the patient resumes the usual habits.

Now the cause of these corns will generally be found to proceed from a tense condition of some of the important tendons, that most frequently affected being the tendo-Achillis. When it is so contracted the foot cannot be raised beyond a right angle, and it follows that the weight of the body is unduly thrown on the fore part of the sole of the foot, where the corn speedily forms. The contraction of the tendon may be so slight as to need careful examination for its detection; but so long as it exists, the cause of the corn remains, and it will be found that any other measure less than the division of the tendon, will be only palliative. The subcutaneous division of the tendon, its elongation, and the restoration of the foot to its normal bearings, must be conducted on the usual principles of orthopædic surgery. The practice has been adopted many years at the Orthopædic Hospital; but it is not so generally known as, in my opinion, is desirable.

The number of physicians in the State of Virginia, according to the census of 1859, is 2,072.

On the Curability and the Treatment of Pulmonary Phthisis and Tubercle.

At a meeting of the Imperial Academy of Medicine, Oct. 15, M. Piorry commenced the reading of a memoir "On the Curability and the Treatment of Pulmonary Phthisis and Tubercle." He did not, however, finish.

"Is the symptomatic collection to which authors give the name of *pulmonary phthisis* susceptible of cure? This question must be answered affirmatively. But in our day it is not a question of stating whether *phthisis*, considered as a disease, may be cured, but of determining if tubercles, having their seat in the lungs, are susceptible of being removed, or at least of becoming inoffensive; it is in this point of view that I shall consider the question. For a long time tubercles have been considered incurable. It is our illustrious Laennec who first established the possibility of their cure. I have published numerous observations which put this opinion beyond a doubt. Besides, we have every day examples of cure of certain organs attacked with tubercles, (lymphatic ganglions, vertebra, articulations, testicles, etc.)"

After having established the curability of tubercles, M. Piorry examined the series of means of treatment which rational medicine must oppose to the accidents united under the name of pulmonary phthisis.

"Before all," said he, "the regimen must be regarded as the preservative, palliative and curative means *par excellence*. The first indication, in order to combat the tuberculous state, is to nourish the patients. The alimentation ought to be rich and abundant so long as the ingested articles do not produce diarrhoea, which may weaken more than the food can repair. In order to reconstitute the blood, to remedy its discoloration or loss of globules, the least irritating ferruginous preparations must be given—as, for example, the iron by hydrogen—save in cases of hæmorrhage or mucous diarrhoea. The second indication is to evacuate the fluids which may obliterate the bronchiæ. For this purpose we administer tartar emetic and syrup ipecac. There are still two simple means which have been of extreme utility for several of my patients: the first is the inhalation of the vapor of the infusion of the elder tree, or the flowers of mallow; the other consists in provoking *slowly a very profound or deep inspiration*, which is to be followed by a *very quick, energetic expiration*. This should be so managed by the patient, that the air passing out should carry

before it the liquids contained in the air passages. The first of these means moistens and softens the too thick sputa, and the second provokes its expulsion. Another pressing indication is to prevent the putrefaction of the secretions in the tuberculous cavities, and to prevent the absorption of the pus or pyoid matter which accumulates in them. It is these matters which, penetrating the circulation, produce hectic fever, night sweats and the rapid weakening of the patient. It is to prevent these accidents that it is so necessary to make the patient expectorate, as has been already said. To prevent the putrefaction of the secretions, the inhaling of the vapors of alcohol are agents of the first order. The putrefied secretions, not only in relation to their absorption, but numerous facts have led me to believe that they produce, by their presence on the gastro-intestinal membrane, diarrhœa, softening, and even ulcerations; it is then extremely useful, in order to avoid tubercular inflammations, that the secretions should be expectorated and by no means swallowed. I have seen diarrhœa arrested when they have avoided the deglutition of expectorated tuberculous matter. It is of the greatest importance to arrest the evacuations from the bowels and skin, which so much weaken consumptives; but there are extreme difficulties in fulfilling this indication. The only means truly efficacious are, the washing out the large intestine with water by the aid of the irrigator of Equisier; of preventing, as has been already said, the deglutition of the expectorated matter; of preventing the altered pus from remaining in the cavities and thus causing pyemia, which is soon followed by diarrhœa; of giving but small quantity of drinks, and of choosing among the aliments those which—as albumen, etc.—do not cause, in general, very liquid stools.—Milk for consumptives is an excellent article of food. It does not cause diarrhœa, if care is taken to reduce it one-fourth by prolonged boiling. As to the sweats, the best means of lessening or combatting them is to see that the patient is not covered with heavy clothes, and that he breathes a pure air, frequently renewed and properly warmed. Is there any medication which can act usefully on the indurated masses in the divers degrees which surround or repair tubercles? Some thousands of facts collected in the wards of La Pitié and Charité permit me to solve this question. It is no longer doubtful that the preparations of iodine, administered in fumigations, potions or frictions, etc., do modify very advantageously the destructive process

of tuberculization. Under the influence of the iodine medication, combined with profound and reiterated inspirations, I have seen tuberculous indurations diminish in extent, the symptoms of the disease amend very sensibly, the appetite return, the action of the heart increase in force, and the adipose tissue increase. I have seen this relief persist for months and years in certain cases. But it must be avowed that the number of radical cures is very small, and I can only recall a dozen of veritable solid cures. Some persons have opposed the iodine medication in the treatment of phthisis; this is evidently owing to the fact that this precious remedy has not been employed by them in the most advantageous manner. Some have attributed to iodine the production of inflammation of the mucous membrane of the nares, pharyngitis, etc., softening of the tubercles, and the hastening of the fatal end; analogues to those of phthisis, which cease if we stop the remedy. I fear that some may have confounded, from an incomplete diagnosis, the effects of some accidental or secondary complication—such as a pleuritis—with the phenomena the results of the employment of iodine. I have followed my patients with great attention; they have been numerous, and I have never witnessed any such results.”

Treatment of Ascarides.

SIR—I have already called the attention of your readers to this subject; and I trust you will allow me to do so again. I think we are disposed to under-estimate the importance of the malady in question; for, to judge from my own experience, I should say that there are a very great number of individuals who are tormented by these animals. One cannot help thinking, that if only one tithe of the high scientific powers which are daily exercised in the investigation of all sorts of incurable diseases, were exerted upon this, that a discovery of real value to humanity would almost infallibly result. Here is a complaint, which *a priori*, we have a right to conjecture is a curable complaint; and yet it is one which numbers of individuals are subjected to from infancy to old age. I must say that I have really been surprised, since looking into the matter, to find how many persons are infested and tormented by these wretched creatures. It is curious that the greatest authority on this subject, Kuchenmeister, appears to have been all his life

troubled with the animals in question—a fact which may lead people to the idea that their eradication is impossible. Now it seems to me to be very evident, that if ever we are to arrive at their complete removal, two facts in the history of these animals must be ascertained; and these two facts I can nowhere find satisfactorily told. I therefore conclude that they should be the special objects of study with those who desire to investigate this subject. The first is, What is the actual seat of the ascarides—how high up in the intestines do they live and breed? It is truly surprising to find how little really is known upon this point, though on consideration of the fact, that in post mortem examinations the investigation of the subject is usually altogether neglected, we have a ready explanation of the circumstance. We want to know, then, first? Do these animals live and breed higher up in the intestine than our injections, etc., per anum, can reach? Are the ova deposited high up, and the animals developed as they pass down, making their presence known only in the rectum? Or, again, do they live and breed and are developed only in the rectum? If these animals' ova are deposited high up in the intestine, then we may conclude that remedies applied per anum can only give temporary relief by removing those of the animals which are present in the rectum. But if it be shown, on close study of their natural history, that they live and breed only in the rectum, then we have to investigate why it is that remedies are in so many cases, inefficacious for the cure. We want also to have a remedy shown which, while it is destructive to the ascarides, is at the same time harmless as regards the intestinal walls. These are all points which scientific investigation has yet to make clear, but which are yet clearly points about which it may be exercised, with every prospect of yielding, a most happy harvest of facts. Does the thick mucus, which is so readily thrown out by the irritated mucous membrane of the rectum, form a cover or *nidus* for the ova, protecting them against the destructive influence of injections? Or, again, may not the ova of the animals (if their actual and only *habitat* be the rectum) be deposited beneath those large folds of mucous membrane which encircle the lower portion of it in particular, and so in great part escape altogether the action of injections, unless when large quantities are thrown into the gut, so as to distend it completely? Every day we see in the scientific journals accounts of a certain cure for ascarides; but the fact, which I started off with, viz., that

numbers of individuals have been all their life the subjects of these worms, and cannot get rid of them, proves that the right cure has yet to be found. I think I have above proposed two questions, which if answered, will most assuredly either give us a certain cure in all cases, if a cure is attainable by injections, or will show us what is now-a-days denied that we must try to attack the animals by remedies administered through the mouth.

Occlusion of the Vagina—Operation—Recovery. Communicated for the Boston Medical and Surgical Journal.

Mrs. M. M., the subject of this notice, was 22 years of age; rather below the middle size, weighing about 110 pounds; of dark complexion, with dark-blue eyes, and of bilio-sanguineous temperament. Had been married $3\frac{1}{2}$ years; had never menstruated, so far as she knew, and had never had connection with her husband. The breasts and external organs of generation were fully developed, and in good proportion.

We were called to see Mrs. M. Sept. 19th, 1859. Found her suffering severely from retention of urine—having passed very little water for the previous twenty-four hours. On attempting to introduce a catheter, we found a large tumor—round, hard, and resembling in its appearance, a child's head—pressing upon the vulva, and entirely obscuring the urethra.

Did not succeed in introducing the catheter. A saline cathartic and diuretics were ordered.

Sept. 20th. Saw our patient in the morning, and ascertained the following facts. She had observed swelling of the lower extremities from four to six years anterior to our to our seeing her; otherwise had enjoyed good health, until about six months before our first visit, since which time she had suffered with pain in the back, and had noticed a tumor in the lower part of the abdomen. Had never suffered on account of her water until about a week before she called upon us; nor had she at any time suspended her usual domestic avocations until the last mentioned date.

Upon examination, we found everything normal except the vagina. That organ, entirely occluded, with its walls a quarter of an inch in thickness, having the appearance of a hard, round substance, was pressed down upon the external labia, so as to separate those parts to a considerable extent, and terminated in a perfect *cul de sac*.

Slight fluctuation was observed in the tumor, which led to the conclusion that it contained a fluid, and that that fluid was the menstrual discharge, which had been regularly secreted, and deposited in the occluded vagina, since her womanly development.

A trocar was now thrust into the sac, and three quarts of a thick, black, inodorous fluid, closely resembling tar in color and consistence, were drawn off. The opening was then freely enlarged, and the parts kept separated with tents, and thus a very convenient, artificial opening and entrance into the vagina was made. Our patient has enjoyed good health since the operation, menstruating regularly, until she became *enciente*, which is her condition at this time.

That the vagina should be perfectly occluded, while all the other parts were in a state of entire development, is no more singular than many other aberrations of nature of almost daily occurrence, yet there are some inquiries pertinent to this case :

1st. Did this patient come to maturity as early as other healthy females ?

2d. If she menstruated as freely as ordinary females, ought not the quantity of this fluid to have been greater ?

3d. How could this mass of excreted matter have remained for so long a period of time, in that pent-up condition, and yet without offence ?

Treatment of Epidemic Whooping-Cough by Vaccination.

According to the statement of Dr. Otsolig, the above named treatment, recommended by French physicians, was repeatedly tried in the hospitals *des Kownoschen Gouvernements*, with the following results : 1st, the vaccination passed through its regular stages during this disease ; 2d, it had in some cases an obviously favorable result upon the issue of the cough, cutting short its duration, and modifying the violence of its attacks ; 3d, in many cases no perceptible impression was made upon the disease. In some cases the internal use of tannin, (gr. vi., in broken doses every twenty-four hours,) in connection with an infusion of senna-leaves, proved to be of great value, six days' continuance often being sufficient to cure the disease.—*Gruvacl's Notizen.*

Lactagogue Effects of the Leaves of the Castor Oil Plant.

At the meeting of the Medical Society of London, on the 12th ult., Dr. Routh exhibited three preparations of the leaves of the castor oil plant, a tincture and liquor, (doses of each one drachm,) and an extract, (dose, five grains.) The leaves were obtained from Australia, and the drugs prepared by Mr. Greenish, of London. The Society would remember that Dr. Routh had read a paper on the subject of the lactagogue effects of this plant, the leaves of which, applied to the breasts as poultices, and as fomentations to the vulva, for three days at intervals, were used, in Bonavista, to induce milk in the breasts of women within catamenial ages, but particularly in those women who had borne children. The milk, once produced, could be perpetuated by the simple irritation effected at the nipple by the suction of a child. These facts, related by Dr. M^WWilliam, had been confirmed in part by Dr. Tyler Smith. Dr. Routh had published his experience on the subject also, in a series of papers. To lying-in women, with a deficiency of milk, Dr. Routh had given the infusion, in combination with conger-eel soup, and the effect in determining a copious flow of milk had been remarkable. He had administered the extract to unmarried women within catamenial ages, and the effect had been to produce intense pain in the breasts; but as he could not find anybody in that case who would try the effects on a child, he had not yet induced milk in the breasts of such. After three or four days, the symptoms were relieved by a copious leucorrhœa. As it was possible that a larger experience of this remedy might enable us to convert some married women, within catamenial ages, into wet nurses, and as it undoubtedly acted as a powerful lactagogue in suckling women, he was desirous that others also should experiment on the subject, and therefore to direct them where it could be procured.—*Lancet*.

Strychnine in Ileus.

Junhauser, of Vienna, cured chronic ileus of a lady, sixty years of age, who suffered frequently from colic and torpidity of fecal discharges. After five days of costiveness, violent diarrhœa supervened, which defied all remedial agents. This condition was finally relieved by strychnine. In giving it, he proceeded upon the theory that the cramp occurring in the dysenteric process, and the attending blood stasis, was of a

reflex nature, and caused by a disturbed innervation of the nervous centres presiding over the intestinal canal. Junhauser prescribed one-sixth of a grain of strychnine dissolved in 5ij. of distilled water, and gave one teaspoonful every two hours. As soon as about two hours after the first dose was taken, all emesis and strangury subsided. Borborygmi came on, attended with the passage of a large amount of gas, with violent noise. After a few hours, quite a quantity of feces, in the form of scybala, then a second, which was quite thin, when the lady, much exhausted, fell into a deep sleep, with copious perspiration. Until noon there were frequent large discharges of feces and gas, thin and very fetid, which passed off with colic pains. The urinary secretion, which had been very sparing, became abundant. Under the use of a strictly regulated diet and proper regimen, the patient rapidly recovered from a state of extreme emaciation.—*Wien Zeitschr.*

Necrosed Bone.

Dr. Jas. R. Wood presented a specimen of *necrosed bone*, which was taken from a man, who, four months before, suffered amputation of the thigh, for compound fracture of the leg. The wound healed soon after. The amputation was performed below the junction of the middle and lower thirds of the thigh. Shortly after it had closed over, dead bone began to show itself; and it was found that the whole of the circumference of the lower portion of the femur, was in a necrosed condition; which gradually extended, the separation of the periosteum being encouraged by the frequent introduction of probes, &c., between it and the bone. Very soon, new bone began to be deposited from this periosteum, which has increased until the present, when about four and a half inches of the distal extremity of the bone was removed with a pair of duck-bill forceps. The new deposit is enormous, being about four times the natural size of the bone.

In connection with this specimen, he stated that Dr. Markoe looked upon the cause of necrosis in that locality, as owing to a want of nutrition of the bone, the supply of blood from the medullary artery having been cut off; and referred to a very clever paper, by that gentleman (Dr. M.), which was published in a recent number of the *N. Y. Journal of Medicine*.

The Purity of Glycerine may be tested by dropping into a glass of it a few drops of nitrate of silver. If, as is often the case, the glycerine contains any chlorides, there will immediately take place a cheesy precipitate.—*Bull. Ther.*

EDITORIAL AND MISCELLANEOUS.

AMERICAN CONTRIBUTIONS TO MEDICAL KNOWLEDGE.—We are much gratified to find that the valuable idea of our able colleague, Professor L. A. Dugas, recently presented in these pages, has met the general approbation of the profession. The following is from the May number of the *St. Louis Medical & Surgical Journal*. We sincerely hope it will not be long ere "AMERICAN CONTRIBUTIONS TO MEDICAL KNOWLEDGE" will find an embodiment, and command the consideration they so richly merit.

Professor Dugas, of Georgia, in an article in the *Southern Medical & Surgical Journal*, addressed to the American Medical Association, (after pointing out the disadvantages under which the profession in this country labor in not having the numerous and valuable contributions to practical medicine and medical literature, which are constantly made in our domestic journals, collected and preserved in a condensed and permanent form for reference,) suggests the practicability and desirability of a republication similar to Braithwaite's Retrospect or Ranking's Abstract. He says :

"Let a semi-annual work be published by subscription, bearing the title of 'American Contributions to Medical Knowledge,' or any other similar import. Let it consist: 1st, of a reprint, partial or complete, of all such papers contained in the 'original department' of American Medical Journals as may be deemed worthy of permanent record; 2d, of Reviews of American books on medicine and its collateral branches; 3d, of abstracts from the original matter of our journals that may not appear under the first head; 4th, of medical intelligence, biographical notices, &c.; and lastly, of a complete list or index of the original articles of every American medical journal issued during the preceding six months. To this might be added, whenever convenient, general indexes of the whole series of the various American medical periodicals. The lack of a general index to our journals makes the labor of consulting them exceedingly onerous, and doubtless constitutes one of the greatest impediments to the diffusion of American views in systematic works."

His idea is, that this work should be published under the auspices of the American Medical Association. We like the main suggestion, but

are of the opinion that it would be far better done as a private enterprise than if it were undertaken by the Association.

There is no doubt of the fact that foreign medical writers, and medical journalists, both British and Continental, do habitually and systematically either ignore altogether American contributions or else discredit the veracity of American reports. They are not willing to admit that we have any medical literature of our own, or that we are entitled to be recognized as fellow-citizens of the republic of medicine. This, it is true, is the result of ignorance and prejudice, which is worthy only of contempt. Still, the time has arrived when we should set up for ourselves, and at least do justice to our own writers. In our opinion, the profession in this country is not one whit behind that of any other country under heaven, and self-respect requires that we should teach the world that there is an American profession as well as an American nation. But, in order to do this, we must first learn to respect ourselves, and American periodicals must learn properly to appreciate the labors and contributions of their own countrymen. This, we boldly assert, has not heretofore been done. Take up almost any of our domestic journals, and three-fourths of all the extracts will be found to be from foreign sources, to the almost entire neglect of matter equally as meritorious of home production. We do not desire to be invidious, but, by way of illustration, take the oldest, the largest, and we presume the best sustained journal in the United States, "The American Journal of the Medical Sciences"—and what do we find—scores of closely printed pages devoted to extracts from foreign journals, with here and there a page or two gleaned from the forty or fifty periodicals published in this country. Indeed, so struck have we been with this remarkable feature, that we have often thought that the title of this ponderous quarterly was a misnomer; and that it might more properly be styled the American Journal of *Foreign* Medical Sciences.

In justice, however, to several of our leading periodicals it should be stated, that they have recently commenced to publish a resume from our home journals, and thereby added no little to the interest of their pages. Still, as a general thing, the facts are as we have stated; and while it is so, we should not complain that our national medical literature is not recognized and appreciated abroad, when in point of fact we set the example by discrediting it ourselves. Whilst, therefore, we heartily second Dr. Dugas' move, and hope soon to see his suggestion carried out, we at the same time call upon our own countrymen to be more liberal, more just, more appreciative of their confreres at home. Then, and not until then, can we hope to have our national literature respected and honored by the rest of the world.

ANIMAL OILS IN FEVER.—In the present number will be found a valuable article on the use of external inunction with animal fat in Fevers. We regret that an almost morbid repugnance to occupying space, has prevented Dr. Baker from giving the details of many of his interesting cases. We have, upon his suggestion, used this method in Typhoid Fever for several years, and can fully vouch for his high opinion of the treatment from personal observation. The first case of Typhoid Fever in which inunction was used in our practice, was visited with us by Dr. Baker. At his suggestion, the patient was rubbed over with lard twice a day. The improvement was rapid, and the convalescence proceeded to entire recovery in a very short time. We have frequently since used the application both in Scarlatina and Typhoid Fever, and can report the most satisfactory results.*

H. F. C.

The Diseases of the Ear; Their Nature, Diagnosis and Treatment. By JOSEPH TOYNBEE, F. R. S., &c., &c., with one hundred engravings on wood. pp. 440. Philadelphia: Blanchard & Lea. 1860.

The mere title of the above work would almost secure for it a place in the library of every practising physician. No class of diseases can be contemplated with so little satisfaction by the general practitioner, as those which relate to the apparatus of audition—remotely and obscurely situated in its petrous bony capsule, the auditory apparatus is but little understood by the generality of practitioners either in its anatomy, its physiology, or its pathology. It is seldom subjected to inspection and study in the dissecting room, on account of the difficulty attending the display of its several parts, and the delicate manipulation necessary for its thorough investigation—consequently most physicians enter upon the exercise of their profession with but very imperfect ideas in regard to the organ of hearing, and in a few years are willing, of necessity, to resign all interest in that department of practice which relates to it. The result of this neglect, on the part of the profession, has been to place nearly all cases of aural disease in the hands of professing specialists who are, nine cases out of ten, the most consummate quacks. The honest physician, with mortification and regret, will acknowledge his incompetency, and refuse to take charge of these cases, while the impudent charlatan, knowing far less, but wholly unscrupulous, will proclaim the most accurate knowledge and boast of the most invariable and triumphant success.

* See letter on Typhoid Fever, by Robert Campbell, M. D., in former volume of *S. M. & Surg. Journal*.

Under these circumstances, then, the truly scientific and experienced aurist who has written out both principles and practice to guide the profession in this department, has performed a real service, the value of which cannot be too highly estimated. Every practitioner has it within his power to become thoroughly acquainted with the science of the subject, and when applied to, can at least examine and converse about any variety of the cases intelligently and confidently. Instead of pulling up the external ear and looking into it, introducing a speculum, (if he knows there is such a thing in existence) and saying he "can see nothing out of the way," he can now go, systematically, into an examination of the case—he can classify the symptoms and educe an interpretation from them which will point to the true character and locality of the affection and present him the indications for a rational, and in many cases, hopeful treatment. The patient will not be forced to leave him filled with a well-deserved contempt for both the practitioner and his art.

None could have been found more competent to prepare a treatise on the subject of Diseases of the Ear than Mr. Toynbee; engaged, for more than twenty years, in this as a special department, he has collected a vast amount of experimental facts and observations, which render his work one of the highest value—his subjects are discussed with a clearness and precision which cannot fail to enlighten and to impart accurate information to his readers. Starting with the undeniable assumption that no true knowledge of any disease can be derived without a direct inspection of the affected part, our author has made at least two thousand dissections of the ear in order to determine the condition of the several tissues in its various diseases. His pathology is therefore based upon ocular inspection, and his pathologic and therapeutic inductions are hence entitled to a degree of confidence which few teachers, at the present day, can justly command. His style is very agreeable—he makes but few references, seeming to rely principally upon his own observations and reflections, though by no means distrustful of the reports of others. There is a didactic assurance about all his teaching, which imparts the idea to his readers that they are receiving the instructions of one who is a *master*.

For convenience, the work has been divided naturally into several heads. Thus, 1st. Introduction, wherein the subject is considered generally, and methods of investigation and modes of dissection given. 2d. The External Ear. 3rd, 4th, 5th, 6th and 7th relate to the External Meatus. 8th, 9th and 10th, are upon the structure, functions and diseases of the Membrana Tympani. 11th. The Eustachian Tube. 12th

and 13th. The Cavity of the Tympanum. 14th. The Mastoid Cells. 15th and 16th. The Diseases of the Nervous Apparatus of the Ear, producing what is usually called "Nervous Deafness." 17th. Malignant Diseases of the Ear. 18th. On the Deaf and Dumb. 19th. Ear-Trumpets and their use.

The *Appendix* consists of a list of published papers on the subject of Aural Medicine, and is valuable as a reference.

We have seldom met with a work which has gained so entirely our unreserved approbation, and which we can so confidently recommend to the careful study of the profession.

The above work is for sale by Messrs. Thomas Richards & Son, of this city.

Glucosuria in Paludal Fever.—Burdel, of Vierzon, has addressed a paper on this subject to the French Academy of Sciences. The results of his researches are thus stated:

1. In paludal fevers there exists a true diabetes or glucosuria.

2. This glucosuria is only ephemeral; that is to say, being the indication of derangements in the organism, it appears with the fever, persists during its continuance, and disappears with it.

3. Glucosuria in paludal fevers shows clearly the existence of a special agency destroying the equilibrium existing between the cerebro-spinal and sympathetic systems.

4. This explanation of Claude Bernard is confirmed by the following facts: The more violent the access, the more intense the chill, the larger, also, is the quantity of sugar in the urine—on the contrary, when the attacks have been frequent and have lost their force, and, in a word, the more a cachexy is established, the less sugar is produced.—*Gazette des Hôspitaux*.

"Such is Homœopathy. It is not a system, and hardly can it be called a method. It is really nothing but a combination of hypotheses borrowed from different systems, an attempted innovation, in which the influence of metaphysics and mystic spiritualism is mingled; the marvellous plays a part in it, and a large part also belongs to the supernatural, to the invisible, to the mysterious—to all those things which can seduce feeble or ill-enlightened minds."—*Revue des deux Mondes*.

Memorial to John Hunter.—We beg leave most cordially to recommend to the profession of the State the communication in this number of the Journal on the above subject, from a Committee appointed by the Councillors of the Massachusetts Medical Society at their last meeting. In order to a more full understanding of the topic, we state the following facts.

About a year since, an order in council was passed by the British Government to “close up the vaults and catacombs under the Church of St. Martin’s-in-the-Fields.” Fortunately for the memory of Mr. Hunter, Mr. Frank T. Buckland remembered that the body of John Hunter had been laid therein. Accordingly, on February 22d, 1859, he sought for it and found the coffin “in excellent preservation,” with a brass plate upon it,* bearing Mr. Hunter’s arms and the following inscription:—

JOHN HUNTER,

ESQ.

DIED 16TH OCT’R,

1793,

AGED 64 YEARS.

This discovery excited great interest in the minds of the medical profession of England, and it was finally decided by the Royal College of Surgeons to obtain liberty to re-inter the remains in Westminster Abbey, “among the great and good, if that could be done.”

The Dean and Chapter of Westminster cordially acceded to the request in a reply couched in language like the following:—“We shall be proud to be the guardians there of the ashes of so great a man.”

Under these propitious circumstances, the body was removed to the Abbey, March 26th, in the presence of the Medical Profession of London and the adjacent country; it was placed, with appropriate services, in a spot near “rare Ben Jonson’s” grave. We have understood, from a physician who was present at the time of the funeral, that the anthem chosen for the evening service was peculiarly grand and impressive, as its sounds re-echoed from aisle to aisle of that noble old cathedral, “When the earth heard him it bore witness to him.” The remains were lowered into their final resting-place “while the pealing organ poured forth

*A “rubbing” of this plate was presented, not long since, to the Boston Society for Medical Improvement.

Handel's grand and sublime chorus, well suited to the memorable occasion,

‘His body is buried in peace, but his name, it liveth evermore.’”

These events naturally suggested the erection of a monument to the memory of John Hunter. The profession throughout England have cordially taken up the subject. The question now is, whether the profession of America will aid in this pious work. It is proposed, as will be seen by the programme of the Committee, to appeal to the physicians of Massachusetts. Very appropriately, we think, they suggest a very small sum (\$1.00) for each person. We sincerely hope for their success, and that the name of every regularly educated physician will be placed on the subscription list, which it appears is finally to be deposited in the library of the College of Surgeons, near the museum founded by the great man, whose name every physician of the Anglo-Saxon race must ever delight to honor.

The Antiseptic Properties of Iodine.—French Academy of Sciences, (from the *Amer. Med. Monthly*.)—The true antiseptic is that which prevents putridity, destroys it when already existing, and prevents its re-appearance. Such an antiseptic is iodine. Dr. Marchal employs it in the form of solution, in an aqueous solution of an iodide. The aqueous solution appears to be more efficacious than the alcoholic, since there is produced with the use of the latter a constriction of the tissues, which only admit of slight penetration of the liquid charged with the antiseptic. The alcohol also coagulates albumen, which would likewise retard the absorption.

The iodide solution can be injected into sinous portions of sanious and fœtid ulcers, which cannot be done with a pulverulent or semi-solid substance. It is only necessary to moisten the dressing from time to time, without the necessity of uncovering the ulcer several times a day—an advantage which will be properly appreciated by surgeons. In hospitals, the iodine escaping from the apparatus, saturated with its solutions, will serve to purify the air of the wards. Dr. M. thinks there is no condition so favorable for the sick and wounded, under ordinary circumstances, or in times of epidemics—especially those of a typhoid or typhus character—as a continuance in an atmosphere suitably iodized. The miasm arising from crowded quarters, more fatal to armies than fire or sword, most probably has its antidote in iodine.

Habits of Physicians in 1670.—Sydenham, in the last treatise which he wrote, gives the following account of his manner of living: "In the morning when I rise, I drink a dish or two of tea, and then ride in my coach till noon; when I return, I moderately refresh myself with any sort of meat of easy digestion that I like, (for moderation is necessary above all things); I drink somewhat more than a quarter of a pint of Canary wine immediately after dinner every day, to promote the digestion of food in my stomach, and to drive the gout from my bowels. When I have dined, I betake myself to my coach again, and when my business will permit, I ride into the country two or three miles for good air. A draught of small beer is to me instead of a supper, and I take another draught when I am in bed, and about to compose myself to sleep."

Another Sovereign Remedy for Ascarides.—The *Amer. Med. Monthly* says Dr. Compenat has got a cure for ascarides, which has never failed in his hands. It is a simple injection of water, containing five, ten, fifteen or twenty drops of sulphuric ether, according to the age of the individual, and repeated more or less frequently, according to the number of the animals present. This agent, he says, has a double advantage; by its subtilty it readily enters into and destroys the larvæ; and, by its antispasmodic powers, it allays the spasmodic and the nervous symptoms produced by the animals.

Abortive Treatment of Paronychia.—Dr. Van Archen, in an article in the *Medical Monthly*, on diseases of the tropics, says: "If called to a case of whitlow—which frequently occurs during convalescence from typhoid fever—while still in its beginning, I order two ounces of saleratus, or crude carbonate of soda, to be dissolved in about four ounces of boiling water; in this the finger should be held until the solution cools, which should then again be warmed, and kept applied for three or four hours. In nearly all the cases this abortive treatment is sufficient to effect a cure. In more advanced cases the whole finger should first be wetted and then rubbed with a solid piece of nitrate of silver until the skin becomes discolored; the finger must then be kept in an emollient poultice, until, at the end of thirty-six hours, the whole of the cuticle peels off, and the cure is complete. But if suppuration takes place, which is marked by lancinating pain and throbbing, free incision is the remedy."