

**An introduction to the study of homoeopathy / edited by J.J. Drysdale and J. Rutherford Russell.**

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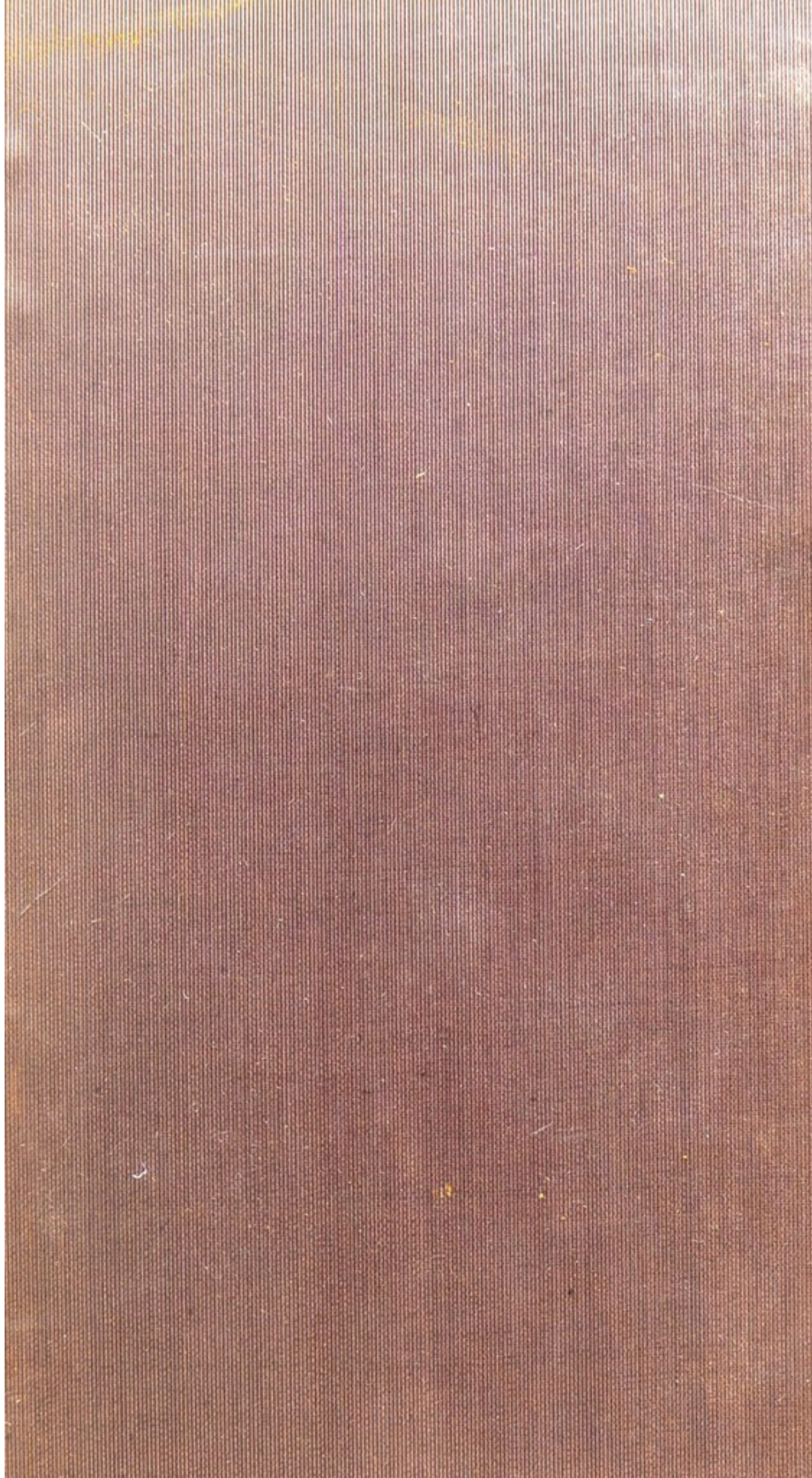
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To

Dr. Cassie

from the Editors

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# HOMŒOPATHIC MEDICINES,

Prepared with the greatest care, and by himself solely, may be had of

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*Preparing for the Press,*

AN INQUIRY

INTO THE

HOMŒOPATHIC PRACTICE OF MEDICINE,

BY WILLIAM HENDERSON M.D.,

Professor of Medicine and General Pathology, and lately one  
of the Professors of Clinical Medicine in the  
University of Edinburgh.

AN  
INTRODUCTION  
TO THE  
STUDY OF HOMŒOPATHY.

EDITED BY

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ERRATA

Page 175, line 10, for "unobscured" read "unobscure"  
Page 207, line 1, for "220" read "221"  
... 2 from bottom, for "2" read "3"



ERRATA.

Page 175, line 16, *for unchemical read mechanical*

Page 237, line 1, *for 229 read 299*

... .. 3 from bottom, *for 3 read 5*

## PREFATORY NOTICE.

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Inquiries are often made by liberal persons for some concise, simple, and yet not superficial Treatise upon Homœopathy. Their wish is to have, within a small compass, an explanation of the peculiarities of the Homœopathic doctrines, accompanied by a statement of the evidence by which those doctrines are supported, and of the results of their application to practice. To meet this demand, we have selected various papers from THE BRITISH JOURNAL OF HOMŒOPATHY and some other sources, and have arranged them in such a manner, as to present the subject in a way not repulsive to the professional, nor unintelligible to the literary, reader.

As we wish this Volume to be considered as only an introduction to the study of greater works, we have purposely omitted any reference to minor

pharmaceutical and pathological questions still under discussion among Homœopathists themselves. It is our aim to remove the preliminary difficulties that impede the calm consideration of the subject; and if any of our readers be induced to undertake an experimental investigation of the doctrines and practice of Homœopathy, the end we had in view in publishing this compilation will be amply fulfilled.

J. J. D.

J. R. R.

FEBRUARY 1845.



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INTRODUCTION

TO THE

STUDY OF HOMŒOPATHY.

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CHAPTER I.

CHARACTERISTICS OF HOMŒOPATHY.

HEALTH is of such paramount importance to man, and Homœopathy—if Homœopathy be true—must be of such paramount importance to health, that the subject ought to command the attention of every class of readers, without regard to the conclusions they may eventually arrive at concerning its merits. Both indifference, which cares not to know, and dogmatism, which stoops not to examine, are courses deviating no less from the practice of a sound policy, than from the principles of true philosophy. It should be recollected, that if Homœopathy, on the one hand, boasts of adding to the scientific conquests of the mind, and of conducing to the greatest interests of the body, it is quite willing, on the other hand, that the validity of its claims should be tried before an



authority commensurate with their magnitude in the severe rules of discipline which it enforces, and in the decisions without appeal, which it has a right to pronounce. Homœopathy challenges no less peremptory, unexceptionable, and accessible a tribunal than that of experience. It is neither fair nor safe summarily to dispose of its claims upon the assumption of its unworthiness, when we can take the advocate for Homœopathy at his word, and bring the regular, and, on that account, more authoritative forms of investigation to bear upon him and his cause.

Homœopathy has now attained the growth of nearly half a century ;—old Saturn has spared it, the devourer of fashions and baubles, of shams and lies. Hahnemann's system has outlived its promulgator, and no signs of a shaken or threatened vitality as yet appear. A numerous body of men—most of them trained up in the purest academical orthodoxy—have made, and are making, their willing choice of Homœopathy, and practise it in various quarters of the globe ;—there is such a thing as a homœopathic literature, periodical and otherwise, expounding the doctrine, exhibiting its methods, and challenging inquiry into its results :—there are official statistic documents to be appealed to in homœopathic hospitals ;—there are dispensaries, or similar establishments, in the chief towns both of Europe and America, bringing daily to the test of experience the efficacy or inefficacy of infinitesimal doses, and throwing open their doors to friend and foe alike. If all this is too little to establish the truth of the system, is it not at least too much, far too



much, to allow it to be taken for granted that Homœopathy is an obvious fallacy or an absurdity?

Really, did we take the latter view of the question, our curiosity would be whetted to the sharpest edge, to discover how—by what portentous process, through what singular plausibilities, or owing to what unprecedented infatuation in men's mind—an absurd or fallacious scheme bearing immediately upon health and life, and substantiating itself into something exclusively and permanently experimental, could have stolen into the dignity of a system. We would wish to be able to solve the riddle, how a nonentity could counterfeit so well the bulk and gait of a reality as to become the rallying point of a minority—a respectable and intelligent minority, we trust—of the medical class. Over and above all, we would grapple body to body with this phantom: we would leave no feature in it unexplored, no part of it undisturbed, no boasted evidence unrefuted, no alleged fact undestroyed, the sooner to force it back to its original nothingness.

But has not a process of the like description been gone through more than once? Has not Homœopathy been refuted *usque ad satietatem*?

If Hahnemann's system did stand, and does, it was certainly not for lack of would-be demolishers. Professional Europe shook her sides with laughter at the first announcement of the Hahnemannic discoveries. That one *Herr* Hahnemann, a physician of no great notoriety, should have found, as it were, in one day, and in his individual head, what ages and the collective wisdom of ages had not discovered, namely, a constant empirical criterion to act upon, in the choice of medicines, looked



improbable enough ;—that, as a scholion to the first proposition, the medicine made choice of, according to the above criterion, should be administered in infinitesimal doses, appeared such an absurdity as could only be met with Horace's '*Risum teneatis, amici?*' When the system began to work, however, and to work well—had the thing looked never so strange, had it been never so repugnant to the former notions and habits of the mind, since experience was appealed to, and the experience was within every body's reach, a serious, philosophical and matter-of-fact discussion would have been no less honourable to the medical class, than beneficial to the public at large.

Was such a course adopted ?\* How can it be said, in any proper sense, that Homœopathy has been refuted, when the only weapons brought to bear upon it, are ridicule and obloquy ? You may kill with such weapons ; you can hardly prove. In the history of the advance of human intellect, discoveries can be pointed out, which have called up hatreds more fierce : no one, in our recollection, has been assailed with jest and with sneers, in the same degree with Hahnemann's. We have met with many a ludicrous account or abusive denunciation of a medical hoax, going by the name of Homœopathy ; we have read witty sayings or grave rebukes concerning the homœopathic administration of 'nothing' to patients ; we have admired the industry of certain reviewers, in unstringing quotations from their antecedents and consequents, and then stringing them up again into a nice suicidal contradiction, so as to impose upon the system the trouble of

\* See Appendix.



demonstrating its own absurdity, and revealing the true character of its supporters,—being that of, in most cases, disguised allopaths,—enlivening the picture with an occasional inferred charge of poisoning, or underhand cocoa-vending, according as a tragic or comic demon lashes them on; but we know of no substantial argument, of no genuine unbiassed evidence being resorted to in the confutation of the homœopathic system. To the very few who have animadverted upon Homœopathy, with something approaching to gravity, we must, from the rarity of the cases, profess ourselves greatly beholden; even with such, however, the train of reasoning resolves itself into a begging of the whole question, since they generally assume, that homœopathic medicines, from their extreme attenuation, cannot have any action upon the economy of the human body. To this point we shall revert hereafter.

It is not with recriminatory feelings, nor in a tone of complaint, that we advert to the obloquy and ridicule constantly cast upon Homœopathy and Homœopaths. The best feelings of our nature may have been shocked, when, upon so solemn an occasion as death, even the death of our venerable Master, the only exceptions to the grave and respectful tone, assumed by the European press in recording the event, were British periodicals, scientific periodicals to boot; we may have felt disgusted, when, upon the newly-closed grave of a good old man, the most scurrilous imputations were laid by those ‘exceedingly honest’ reviewers, who, after gainsaying his genius, caricaturing his doctrine, and misquoting his words, must now proceed, forsooth, to slander his morals. But these



were extreme cases, and could rouse but transient emotions.

So far, indeed, are we from any spirit of recrimination, that we look upon the whole warfare, epigrammatic and otherwise, carried on against Homœopathy, as quite a matter of course. Precedents, at any rate, will not fail it : old as the world, new as the present century. What can the unfortunate, and yet fortunate man, borne away by his genius from the beaten track, expect to find in the untrodden paths which it is his task to clear, but weeds and thorns? His eagle eye may descry from afar sunshiny hills, wide-sweeping horizons, glorious and blessed fields : but the way thereto is a wilderness, and that is *his* way. And it is good it should be so. Truth were not the heavenly, the god-like thing it is, could it be otherwise won than by magnanimity and self-denial. Genius were not the highest privilege in nature, were it not attended with infinite labour, with stringent duties, with struggles and trials. In the history of all discoveries and discoverers, we can read this lesson, while we run. Indeed, one must refrain from quoting names, not to be tedious. ‘The enunciation of a great truth, and the ingratitude of mankind towards their benefactor, are phenomena so constantly co-existent, that the most consolatory aspect of the stern fact, is to consider it to be a law by which the race is benefited at the expense of the individual. Truth is so terrible when exhibited in its concentrated form of a principle, and involves such consequences, that all the energies of man are required to test it in the furnace of human passions, ere it can be purged of its dross, and fitted



for use. Mankind feel that it approaches them as a conqueror, and they receive it as an enemy.\*

How, then, could Hahnemann's disciples wonder or repine that it should have fared roughly with him and his truths? For, though they certainly do not expect the public to take their naked word for it, they feel bound, nevertheless, to declare, that, in their estimation, Hahnemann is a very great discoverer, the Hahnemannic doctrine a very great discovery. Had he run a smoother career, had his words met with less incredulity, there would, in their eyes, be something missing from that completeness of circumstances and distinctness of lines, which mark the passage of a great man, and the conquest of a new truth: the historical evidence, so to speak, in favour of Homœopathy, were thereby impoverished. Nor were obloquy and ridicule without their uses. Such is the alchemy of truth, that it can transmute into gold whatever is presented to it, however base its dross. The discoverer, let alone, might sink under the weight of his own discovery; it is the opposition with which he is encompassed, that awakens him to the full consciousness of his mission. The seer must steel himself into a hero; and so he walks on,

attended

By a strong siding champion, Conscience.

Whether the above generalities are applicable or not to Hahnemann and the Hahnemannic doctrine, it will be

\* Quarterly Review, No. cxliii. p. 192.



for the enlightened reader to determine, after bringing the subject to such tests as will seem adequate to the admitting with safety, or to the rejecting without injustice. Our sole object is to rouse the attention of the British public to a system of Therapeutics, which, in our conscience, we deem the best; its ultimate fate must depend upon its own intrinsic qualities. We purposely abstain, in this introductory chapter, from any scientific disquisition; we have no further ambition than to lay before the reader such circumstantial evidence as may satisfy his mind that it will be worth his while to take the subject into his own hands. It is in this spirit, and within the above-stated limitations, that we now proceed to make a few discursive observations on the characteristics of Hahnemann's system.

The characteristics of Homœopathy, considered as the hypothetical ground of a science and an art, are these two:—1st, The conception of a general therapeutic law, founded upon a pathological relation, existing between the human organism and its phenomena, on one hand, and the medicinal substances in nature, and their different properties, on the other;—2d, The affirmation of empirical data for the application and practical working out of such a law, by the administration of particles of medicinal substances destitute of sensible properties.

In order to avoid misapprehensions it is necessary here to state, that the leading points of Homœopathy are represented as conceptions and affirmations, just as the system itself is spoken of in the form of a hypothesis, merely for argument's sake and the inquirer's convenience. It is not to be inferred therefrom, that Hahnemann first



imagined a theory, and then proceeded to subject it to the test of facts: facts with him had the start of principles. He was dissatisfied with the science as it stood before him, but did not presume to find in the *a priori* conceptions of his own brain how it should stand; he had rather a misgiving that stand otherwise it could not, and, with equanimity enough, bade it a practitioner's farewell. His mind was more on the alert than in ferment, when he lighted upon facts which deeply told upon him, and ultimately, through a long, laborious, and most severe ordeal of experiments, led him to the enunciation of his well-known formula '*Similia similibus.*'

Waiving the question, whether the Hahnemannian formula be, or be not, the expression of a general curative law, we would ask in the abstract, Does the conception of such a law imply any thing unphilosophical? Is it unphilosophical to suppose that amongst the beautiful, providential, all-infolding laws of nature, there may be one applicable to the cure of diseases? Is it philosophical to assume, in the teeth of so many provisions made by the All-wise for man, that there can be no greater, no safer provision made for the mitigation of the manifold distempers incident to his bodily constitution, than what medicine, as a conjectural science, can afford? Medicine on every side borders upon inductive sciences; and yet shall it be doomed never to take rank amongst them? Time and genius could work all but miracles, in every branch of human learning and industry; and shall it be declared hopeless for them to achieve any thing momentous in a science which is conversant with the greatest temporal interests of mankind?



If we consider the extensive and extensible range of medicinal substances throughout nature, the multiplicity of their properties, known or knowable, and the variety of their actions, determined or determinable, upon the economy of the human system, it will appear that grounds are not wanting for the following supposition, to-wit:— that the human body, in any given abnormal condition, short of mechanical obstruction, and resolution of the vital principle, might be acted upon, towards the recovery of its normal state, by some particular substance or substances out of the whole series,—were we but possessed of a practical criterion to determine which. It will be evident to the reader that the matter stands here with something more than a hypothetical affirmation. Pharmacology must claim some such rationale or none. Some such fact, some such assumption, is implied even by the general allopathic practice, inasmuch as, in a large proportion of cases, it bears entirely upon the administration of medicinal substances, and in no case altogether dispenses therewith: the real point at issue is the attainableness or unattainableness of a practical discriminating criterion for and in every case. As we write, however, not to prove, but merely to illustrate, we will forego the advantage of presumptive evidence, and rest content with shewing, upon hypothetical grounds, that a general therapeutic law is neither inconceivable nor irreconcilable to the ever-varying conditions of organization. For if the human organism, throughout the variety of its phenomena, stands, or may be conceived to stand, in a pathological relation to the medicinal substances, considered in successive order, and in the extent of their respective actions upon the self-



same human organism; it is clear that the expression of such a relation would constitute the general therapeutic law now in question: the ascertaining of this relation, and the reducing of it to a single practical formula, would be a matter of very great difficulty indeed;—of no insurmountable difficulty, however, in the estimation of any one who bears in mind what genius, perseverance, and fortune too, which sometimes comes in for a share in the success of scientific enterprise, can achieve. If it be hopeless, on one hand, to seek for positive invariable data to start from, proceed by, and refer to, in the mysterious laws of action by which organization is governed; the inquirer, on the other hand, by directing his attention to the medicinal substances themselves, will immediately come in contact with a series of ascertainable facts, and find full scope for his activity in a vast field of experiment. Let him then turn himself to nature's own pharmacopœia and become conversant with the rich stores it contains; let him study, compare, and discriminate the properties of medicinal substances; let him try their effects upon the economy of the human body, in every variety of conditions, in every form of idiosyncrasy. It is uncertain whether this course will lead to a discoverer's claims, but surely not a little will be added thereby to a physician's qualifications; and were the ultimate result of so much labour a simple aggregate of facts, with no deeper connexion between one another than that of juxtaposition, still, it were not labour lost, nor were medicine the worse for it.

And now,—suppose you had engaged in the path here indicated, and that in the course of your experiments, you



should light upon some very notable fact,—some very striking coincidence,—some very characteristic manifestation—you would eagerly catch at it as at, perchance, a thread to lead you further on; you would set about thoroughly investigating it, pursuing it through all phases and analogies, spying it out under every diversity, and tracing it back, if possible, to its real source. All your experiments will, henceforward, point in one and the same direction;—you strive, you pant after the solution of the problem;—you can have no rest until you have conjured it into the hollow whisper of a meaningless phantom, or the liquid response of a prophetic reality. You must master it, you must know what it meant, what it was;—perchance nothing, perchance something;—perchance some very great thing.

Are we trying the reader's patience through a series of gratuitous suppositions or fanciful representations? All this is neither less nor more than a historical account of the Hahnemannian discovery, short of the synthetic arrangement of our exposition, which represents generalities as leading to experimental determinations, whereas, in reality, Hahnemann's course, as stated above, was wholly analytical, and gradually advancing from particular facts to general conclusions. A keen and ever-vigilant observer, he was struck with the very remarkable coincidence that certain substances, appropriated to the cure of particular distempers, produced, in the healthy body, the same series of symptoms which they were known specifically to remove. This circumstance might have passed unheeded before a spirit less inquisitive by nature, or, from stronger adherence to authority, more at ease upon the



subject of the doctrinal and practical sufficiency of medicine, as it stood before him. In a very active mind, already in a state of alarm, so to speak, with respect to the speculative tendency and traditionary dicta of the science, and constantly on the look out for self-illumination and self-direction—a manifestation of so peculiar a character could not fail to excite a kind of scientific restlessness, a spirit of experimental enterprise, a vague presentiment of something worth at hand. What is this? How comes this to pass? Does this hold good for a particular set of substances only? In what specific character do these substances differ from others? Whence these anomalies? Or might not, peradventure, those we look upon as anomalies be isolated, fortuitous, unexplored indications of a general fact? What strikes us as limited to a few, might it not be found extending to many,—perhaps common to all medicinal substances, if only investigation and observation could do for the whole series what accident and consecutive experience did in particular instances? And, if so,—if further experience should establish as a fact that medicinal substances produce in the healthy body the symptoms they otherwise remove, would the inverted proposition hold, that the morbid action of medicinal substances on the human body, in a normal condition, determines their therapeutic properties?—Nature herself must answer the queries: experience alone can decide the question.

Hahnemann did interrogate Nature. To experience he did refer the question. What Nature's response and experience's decision were, let a wise man find out for himself.



A not inconsiderable amount of direct evidence in favour of the Hahnemannian law might be collected in the shape of Homœopathic precedents, from the history and general practice of medicine; inasmuch as the fundamental principle of Homœopathy was, at all times, to a certain extent, unconsciously acted upon by the Allopaths, so called chiefly for distinction sake. Nay, the very origin of the inquiries and experiments which ultimately led to a complete scheme, must be assigned, as was shewn, to one such Homœopathic precedent in the ordinary system. We forbear, however, entering now upon this field, as it is not consistent with our plan to do more here than shadow out the path, which the reader may profitably follow and tread for himself, towards a positive conclusion concerning the claims of Homœopathy. This much, however, in connexion with the point, may be predicted, without any arrogant assumption of the prophetic mantle; that the times are not, perhaps, very distant when it shall fare with Hahnemann's discovery much as it did with Columbus's egg. All the Salamanca Bachelors and Theologians were able to make the egg stand after Columbus had knocked the big end of it into a provisional and very primitive sort of a pedestal. Let only Homœopathy force its way into Academies and Universities, and Hahnemann's discovery will turn out no discovery at all. The present hue and cry will lull itself into the professorial drawl of—We knew as much.

Before bringing to a close these strictures illustrative of the first characteristic of Homœopathy, it will not be amiss briefly to advert to various difficulties urged by the adversaries of the system, which, inasmuch as they are not



of a scientific but merely argumentative character, seem aptly to come within the scope of an introductory chapter.

And, first of all, it has been asked, How can it be predicated of the Homœopathic law that it is universal? We readily admit that universality can be predicated of the Homœopathic law only in a loose and popular sense; and that, in proper philosophical language, we are not entitled to term it otherwise than a general therapeutic law. The character of universality, logically speaking, can never belong to an experimental truth, how extensive soever it may be. Homœopathy, in this respect, fares neither better nor worse than other inductive sciences, and we would urge upon our Homœopathic brethren the propriety of never employing any other denomination, but that of a general curative law, namely, of a law never contradicted by experience, so far as experience goes. This is the substance of the whole question; for all practical purposes, no more can be demanded of, nor needs be vindicated for, Homœopathy. Let Homœopathy gain *this* point, and it will have little cause to lament the loss of this or that logical qualification.

It has been asked, in the second place, If Homœopathy be true, how can the cures effected in the Allopathic system be accounted for? The very nature of the objection would have prevented our noticing it at all, did we not gladly embrace the opportunity of entering here a protestation; that we advocate Homœopathy as the best system of therapeutics we know of, but by no means as peremptorily exclusive and condemnatory of all others. That it is destined in the long run to work into methodical arrangement and harmonious simplicity, the whole



mass of facts and complex multitude of doctrines, which enrich, and at the same time encumber the paths of medical science, must be the best cherished hope of all such as believe Homœopathy to be founded in nature, and borne out by experience; but there is more than an objector's ingeniousness in this round-about way of representing Homœopaths as laying a claim to the absurd character of healing monopolists; or it requires more than a child's simplicity really to suppose that should Hahnemann's system be true, the cures of Allopathy become a sphinx's riddle, past Œdipus's finding out. The glories of medicine, of Allopathic medicine, stand recorded in Time's book, whose leaves are centuries, whose characters are the doings and sufferings of mankind;—universal conscience and universal gratitude bear witness to its beneficial working from the remotest ages down to the present generation. With feelings of reverence do we look to the past;—tradition and authority are both venerable, though neither infallible in our eyes. We defend our cause, and only turn aggressors, in so far as self-defence renders it necessary;—we demand the liberty of opinion and the right of choice that we respect in others;—we put in a claim for admission within the academical pale, in behalf of a system which professes to court whatever severest ordeal and scrutiny may be imposed upon it, as the condition of its right of citizenship;—we long to inscribe a new glory in the annals of the science, whose humble but conscientious votaries we are, and to add a new boon—a new blessing—to those that medicine, through every succeeding generation, has bestowed upon suffering humanity. But who ever presumed



to mark out the boundaries of medical industry and success? Is there not an infinitude of possible lines between two points, although the shortest be but one? Or did our objector never bethink himself that something analogous possibly attaches to the Allopathic system, wherein notorious differences of speculative and practical views in eminent men are far from being constantly attended by a corresponding disproportion in the ultimate results? There is as much ground for being sore puzzled at sailing vessels having crossed, and crossing, the Atlantic, because steamers now do so at an increased rate of velocity.

It has been urged, thirdly—If the Homœopathic law be true, and the empirical criterion for the application of the law be right,—the Homœopaths must be successful in all cases. When a general curative law is spoken of upon hypothetical grounds, we are told that it is an arbitrary conception, altogether irreconcilable with the ever-varying conditions of organization; these self-same, ever-varying organic conditions, are entirely lost sight of,—nor is any allowance made for them whenever the question relates to the application of the law. One thing is beyond doubt, ay, or even the possibility of doubt,—Homœopathy is unsuccessful in a great many cases. Were a voice to proclaim from the clouds that the Homœopathic law is universal, and its criterion incontrovertible, still we know, that, quite apart from man's mortal condition, Homœopathy, as an art, must often fail. The Homœopaths will not be guilty of the absurdity of apologizing for not being successful in all cases. How great soever their confidence in the system may be, they well know, that once



in their hands, in poor men's hands, it must partake of their limited and fallible nature. Theirs is no thaumaturgy; Hahnemann was no magician;—if Homœopathy is to stand or fall by such a test, we had as well begin its dirge. Our objector is not aware, perhaps, that a test hard enough is already imposed on Homœopathy, inasmuch as wherever it reaches, it has to fight its first battle against that class of complaints that are the most inveterate and most despaired of, and to recruit its first partisans from the ranks of the incurable, or such as are deemed so; for who would set the example of trying this exotic importation, but some solitary wild enthusiast, or the many, who, from hopelessness and yet from hope, would try anything? And if Homœopathy stand this test, shall our objector still plead the admission of his own? We would rather wish to learn from him if medicine in general is so very successful as to be justified in turning away from any further inquiries, as to be warranted in so cavalierly dismissing whatever is new,—for the simple reason that it is new;—as if, forsooth, any thing could have waxed old which had not its younger days; as if—in the scientific province, emphatically so—the youngest were not the oldest. Whatever our objector's expectations may be, the reader's conclusions will not go beyond what our proposition involves, to-wit:—If Homœopathy be the best system of therapeutics known, as is contended, it will have it in its power to shew, by comparative statistical tables, that the average mortality in its practice is less than the average mortality in the practice of all other systems. To such statistical tables do we then refer our readers.



We come now to the second characteristic of the Hahnemannian system, which was said to consist in the affirmation of empirical data for the application and practical working out of the homœopathic law, by the administration of particles of medicinal substances destitute of sensible properties.

Confident as we feel that the reader, whatever his estimate of our abilities may be, is by this time convinced of our perfect good faith, and of an unwillingness on our part to argue him into any acquiescence or partial concession, independent of subsequent experimental verification of our propositions; yet it is not without some hesitation and embarrassment that we approach the subject of homœopathic doses. So much ridicule has been levelled at infinitesimal doses—and the thing at first sight looks so very fantastical in itself, that the reader may find it somewhat difficult to preserve a serious countenance at this point of our illustrations. Supposing that he has courteously followed us so far—that he acknowledges the injustice of passing judgment against Homœopathy, while it is not vouchsafed an audience or a trial—that he admits as philosophical the conception of a general therapeutic law—that he considers it worth while, from what was stated of the Hahnemannian discovery, to institute inquiries towards ascertaining whether a general therapeutic law is really embodied in the Hahnemannian formula or not; supposing all this, still he may well be startled when he is told that the right application of the law is substantiated in the administration of infinitesimal doses. “Ay, there’s the rub!”

In one respect, this must be considered as the stum-



bling-block, although, in another and far more important respect, it be the crowning piece of the system. Many judicious and otherwise well-disposed people have been deterred from investigating the subject solely on that account: they by no means object to small doses—they go the length of exceedingly small doses, but there is a point which faith alone can come up to, and for ‘faith’ no scientific scheme has a right to call. Give and get fair play. Shew us your certainties,—at least your probabilities; we will try—we will examine them, and decide accordingly;—but if we are to get through the portal of your system with eyes blindfolded, if our initiation is to be at the price of an act of mental submission, we had as well spare the trouble of settling any preliminary at all. Your conditions are extravagant, we cannot accept of them.

The subject is involved in great obscurity for the homœopathists themselves. It is not meant to say that there is in their minds one shade of doubt as to the actual direct efficacy of infinitesimal doses; this efficacy is for them a fact, but they are at a loss how to account for this fact, they cannot impart the confidence they feel by any argument. The *modus operandi* of the homœopathic doses is still a problem for them, and is destined perhaps to continue one. Many a hypothesis has been suggested towards its solution, but the very best can have no more than a conditional value—than a relative weight. The scientific eye can draw many analogies from Nature, and especially from its imponderable agents, not otherwise bearing upon our senses than by their effects. An elaborate exposition of such analogies will be found in



another part of this volume. The analogical ground is, however, a slippery one. The sort of evidence derived from this source can only have much value upon condition that little stress shall need to be laid upon it.

After these strong admissions on our part, some curiosity may be entertained as to what we intend to make of infinitesimal doses. To vouch for them in a dogmatic tone, will not do. To prove them in a dialectic form, cannot be done. A third road lies open before us. Apart from the final settlement of the question, which devolves upon subsequent experience, apart from scientific disquisitions, which come not within our prefatory province, we can bring the point to a calculation of probabilities, by comparing the positive and negative suppositions about the efficacy of infinitesimal doses, in their positive and negative circumstantial evidence, and then leave it for the reader to determine on which side lies the probability, nay, which of the two suppositions is chargeable with absurdity.

The present attenuation of medicines was not originally part and parcel of the homœopathic system. Hahnemann had effected his discovery, and established his law, before he even suspected the possibility of what was to follow. Nor when he found he could not come up to the magnitude of ordinary doses, did he shrink at once into infinitesimal littleness. The diminution was gradual down to a certain point, when, his senses still urging him on to further attenuations, with that kind of divination which belongs to genius alone, he had the presentiment of a fact—of certainly a wonderful fact—the merit of ascertaining it, and the courage of proclaiming



it. We are not prepared to say that we go along with Hahnemann in all his theoretical views of the matter ; we speak of the naked empirical fact of infinitesimal doses, quite apart from their rationale. Whichsoever view be taken of Hahnemann's character and intellect, the negative supposition lands us equally in a difficulty. If he were what he is represented by his followers to have been, a highly gifted, and a highly conscientious man, one must give him credit for not speaking at random. The greater the novelty and wonderfulness of the fact asserted, the greater must have been such a man's diligence and anxiety to satisfy his mind about the reality of the same, the greater his backwardness to proclaim and maintain it, until he felt quite sure of the ground he moved upon. That a highly gifted, a highly conscientious man should, his life through, amidst the loud warnings of European hilarity, fight with windmills, without ever being shamed into some sense of the Quixotic turn of his exploits, seems very improbable indeed. The improbability verges upon absurdity, if the less favourable view of his character be taken ; if some of his opposers be credited, who rough-draw him as a smart enough gatherer of plausibilities around a piece of quackery. In the name of wonder, who ever heard of a quack turning his weapons upon himself, breaking his own wand, hitting upon the very trick which must strip him of all his magic feathers ? What hampered and retarded the propagation of the system but those ill-starred infinitesimal doses ? Were they not a huge, never-exhausted quiver, whence our adversaries drew their best shafts ? Do not the Homœopathists acknowledge to this very day that



this is the stumbling-block of their doctrine? Could not a smart gatherer of plausibilities contrive something less microscopic to throw into people's eyes? It is not customary for quacks to work Penelope-like, and undo by night what they did by day. Truth alone, or madness alone, could have carried Hahnemann so far.

But, after all, let him be ever so conscientious, ever so highly gifted, we will not lay too much stress on the testimony of one man. Grant, on the contrary, that Hahnemann was either deceiving or deceived, the difficulty is but removed by one step. It soon presses upon us again, and with hundredfold increased weight. How shall we dispose of the testimony of the many? Are all Homœopathic practitioners deceivers? Are all their patients deceived? With regard to the practitioners, it is known that there is some variety of opinions among them, as to the comparative efficacy of the lower and higher dilutions; some resort more frequently to the former, some adhere more strictly to the latter, but all agree upon the main point—all employ infinitesimal doses. Are they all agreed upon a nonentity? Is there not one out of the whole number either clear-sighted enough to perceive, or noble-minded enough to avow, the shadowy nature of the thing? If there be efficacy in infinitesimal doses, it can be easily understood how a necessary connexion may exist between the homœopathic law and the administration of those self-same doses; and this would go to explain the perfect agreement of homœopaths on both the points; but if there is no efficacy in them, what connexion can be conceived of, as necessarily drawing this thing in the train of that?



A man can admit the law, and reject, or, at least, modify the application of the same. We might hear of a minority of homœopathic practitioners keeping on this side of the mother-tincture, just as we hear of different opinions being entertained about the lower and higher dilutions on the other side of it. Where there is a chink, there might be a split. What '*cyminisectores*' must the homœopathists be, who take to the dressing up of a shadow, and can spare time to differ about the stitching of the dress!

It must, moreover, be borne in mind, that the question does not bear upon a single act, or determinate series of acts, which may be gone through in a fit of enthusiasm, and once gone through, leave, perhaps, no door open for retreat; the question is here with something incorporated into a homœopathist's whole occupation, with a constant habit of his mind, with the daily, the hourly repetition of a certain professional duty. At the same time, what can prevent a practitioner from stopping or retracing his steps, if he perceive that he has gone astray? And how can he fail to perceive it, sooner or later, unless labouring under aggravated blindness?

The "ultima ratio" against Homœopathy is to trace every thing about it to the working of imagination. Did ever any of our opponents ask himself this question—How is the transition effected from a state of indifference or hostility to a state of incipient interest in or thoroughgoing adherence to, Hahnemann's system? Let the reader try the question himself: it may prove suggestive of much. A change takes place in a man's convictions bearing upon a particular point: the change is necessarily determined



by some cause or other ; you, for your part, see this cause in a play of the imagination : but, again, what is it that sets the imagination a-playing ? The most imaginative of us all cannot have awaked of a morning, new-made a homœopathist by his night's dreams. Homœopathy never flashed upon any one in a sudden stream of light, or with the pressure of an irresistible inspiration.

The change from a negative to an affirmative conviction about the efficacy of infinitesimal doses is, generally speaking, the result of some circumstance or circumstances, leading to try the thing, and of the trial bearing, or seeming to bear, it out. We know from personal experience that so it is. Independently of any testimony, however, it is difficult to conceive how it could be otherwise than as is supposed, since all agree that the *prima facie* impression is decidedly unfavourable to the admission of any efficacy at all in infinitesimal doses. Our adversaries' supposition involves, then, the following proposition :—That the imagination, in the present instance, takes its starting point from a natural antipathy of the mind for the very delusion meant to be forced upon it, and that it reaches its resting-point, that is to say, the full acquiescence of the mind in the intended delusion, by bringing the subject of the same to the test of experience ;—which proposition is convertible into this other :—That what in every other case would prove the most direct and salutary check upon imagination, turns out, in the solitary exception of Homœopathy, to be its best ministering handmaid.

The truth of it lies much the other way. Amongst the most zealous advocates of Homœopathy there are very



few, as we think, who cannot recollect a time when they used to laugh at the Hahnemannian micropharmacy: he at least who now addresses the reader, can, for one, acknowledge that such was the case with him. Still fewer, it may be safely asserted, are the homœopathic practitioners, who would not at one time have rejected, as an insult to their judgment, the supposition of their ever going the length of infinitesimal doses. It was not by help of imagination that a practitioner could have changed his convictions so far as to administer them now in sober earnest, and with undoubting assurance of their efficacy; this could be the work only of a trial, instituted upon a large scale, embracing a great variety of individuals and cases, and evolving itself through so long a series of homogeneous results, as to put the possibility of fortuitous coincidence altogether aside. Nothing short of the testimony of the senses, nothing short of empirical certitude, could ever have conquered, in a practitioner's mind, the sway of long-established habits, and the hostility of pre-conceived notions. We will ask it again, What short of the testimony of the senses and empirical certitude, can satisfy a rational man, a professional man, upon a question, involving, as the present does, the responsibility of human life, the repose of his conscience, the dignity of his calling, the integrity of his character, and the boon of daily bread? This is one of the advantages of Hahnemann's system, that it does away with professional scepticism:—you either believe in the efficacy of infinitesimal doses, because you have ascertained it; or, if you have not ascertained it, you cannot believe in it.

The reader is well aware that our adversaries' argu-



ment has no more weight than we have attached to it for our own convenience;—inasmuch as it afforded us a fair opportunity of urging upon him the consideration of what may be termed a historical fact,—of the origin and gradual growth in a practitioner's mind of an affirmative conviction about the actual direct efficacy of infinitesimal doses. How far the position is tenable with regard to the homœopathic practitioner, has been shewn; with regard to the homœopathic practitioner's patients, we shall not say that it is untenable, because common sense, we trust, will not allow any one to take it,—unless, indeed, Allopathy and Homœopathy were first to reverse their practices,—to exchange the apothecary's mortars and pestles, as heroes did their swords in days of yore. He were an idle, but not unintelligible arguer, who should contend, that a bright golden mixture, for instance, will address the imagination through the organ of vision, and thus induce a titillation of hope,—or that, along with a bitter-tasting draught, there will be conveyed in a patient expectations of a result, as beneficial in degree as were the means unpalatable in kind. But through which of the senses shall an imperceptible dose find its way to the ebony or ivory gate of imagination? Into what anticipation or delusion shall the most imaginative of patients distil a wine-glassful of colourless and tasteless water? If not convinced by a previous experience, or influenced by the testimony of others, his impression will be, that things are likely to remain much the same for all that. Again, what clear conception of Homœopathy or rational idea of an infinitesimal dose have Dispensary patients? Or is their imagination likely to be worked upon in an inverse ratio



to the bulk of medicines? How weak a hold must infinitesimal doses have upon imagination, since, after the experience of so many years, the testimony of so many persons, and the notoriety of so many facts, the subject is still met with invincible incredulity, or passed by with a supercilious sneer! But, even discarding all this,—unless it were proved that either the homœopathists make it a point never to treat infants, or that they are unsuccessful, or at least more unsuccessful in their treatment of infants than of adults, our adversaries must take to something else in order to account for homœopathic cures. Two ways still open before them: the shortest one is to impugn all testimonies, to deny all cures, to raze Homœopathy to the ground by an act of mental despotism,—a harmless sort of despotism upon the whole; the second way is to fall back upon homœopathic diet, and since imagination cannot be brought forward as the responsible agent for every thing about the system, to try that as a succedaneum. Homœopathy shall follow them upon neither ground. A certain laconic philosopher, upon hearing the reality of motion called in question, began to *move*. The best answer the homœopathists can give to a denial of their cures, is to endeavour, under God's favour, to add to their number. To him who would reduce the whole Hahnemannian scheme to the dimensions of a simple dietetic process, they will charitably say—Beware! if you make this good against Homœopathy, Allopathy has lived its last day, and was never worthy to live at all.

The negative supposition about the efficacy of infinitesimal doses, involves, then, the following points:—*1st*, That Hahnemann did wilfully and gratuitously encumber



his discovery of a general therapeutic law with an appendage, which is, not useless only, but evidently calculated either to retard the recognition, and to baffle all practical purposes of, the law, if the law be true,—or, if untrue, to expose it the more by complicating it with an absurdity :—*2d*, That Hahnemann's followers did, and do, uniformly persevere in a practice opposed to their interest, and defeating their object ; although (*a*) the fundamental principle of Homœopathy could be admitted and acted upon, independently of the administration of infinitesimal doses,—at least on the supposition of their inefficacy ;—although (*b*) the homœopaths, at the same time that they are so unanimous in the admission of the efficacy of infinitesimal doses, shrink not from manifesting some difference of opinion about the comparative power of the lower and higher dilutions,—which implies good faith, and excludes bigotry ;—although (*c*) one does not well see how they can otherwise have come to such an admission than through the channel of empirical verification, or what is deemed such ; and although, finally, (*d*) one does not well conceive how they can persevere in the same admission, when this same empirical verification, or what is deemed such, has not ceased, but continues, or rather recommences every succeeding day of a practitioner's life ;—*3d*, That all homœopathic cures are either the work of imagination,—which has been shewn to be an illogical postulate ;—or else the result of fortuitous coincidence,—which could be proved a mathematical impossibility.

The positive supposition about the efficacy of infinitesimal doses, implies nothing more, nothing less, than that science has added another to the many ultimate facts,



whose existence is the subject of empirical certitude, but whose rationale comes not within the compass of observation, and must, perhaps for ever, remain hypothetical food for inquisitive minds. When this affirmation appeals, on one hand, to the little we know of Nature's dynamic powers, to the uncertainty we are in respecting the constituents of diseases, and to our ignorance as to the manner in which medicines, whether administered by the allopathic or homœopathic hand, act upon the economy of the human body ;—when, on the other hand, it ushers in a series of illustrations and analogies, drawn from scientific sources, and within the particular sphere of medical science itself, can point at facts no less unaccountable, and parallel in the extreme attenuation of parts they presuppose, and the powerful effects they evince ;—when this affirmation, we say, presents itself to the mind, accompanied by the consideration of the limited extent of human knowledge, and of the unlimited, unfathomable depth of Nature's secrets and bounties,—it is absurd to tax it with absurdity. If it be compared, in the circumstantial evidence which has been laid before the reader, with the negative supposition, we think that the probabilities, so far as probabilities can avail in such like questions, will be found lying on its side ;—and if it be brought to what it constantly appeals, and shall never cease to appeal to, namely, the test of Experience,—we feel confident it will be crowned with certainty.

Such, then, is Homœopathy. It rests, as a science, upon a general curative law, founded in nature, ascertained by experience, and embodied in a clear, precise, and practical formula, which goes to determine the therapeutic proper-



ties of medicinal substances by their pathogenetic action on the human body, in order to proceed in the administration of the same upon a constant and discriminating criterion, derived from the nearest similarity between the pathogenetic effects of medicines and the symptoms of diseases. It acts, as an art, upon an empirical certitude, on the strength of which medicines are administered in an extremely attenuated form, which, whatever the explanation of the fact may be, turns out always to have in it so much of power and activity as to be fully adequate to all specific curative purposes, and never so much as to affect detrimentally the body with a surplus, or leave in the constitution the seed for future distempers.

If Homœopathy be any thing at all, it is eminently the medicine of experience, as its founder characterized it. Great as the discovery was of the Hahnemannian law, it would have remained incomplete, perhaps useless, had it not found its practical counterpart in the administration of infinitesimal doses. To cure is of itself a glorious as well as arduous aim for medical ambition; to cure in a speedy, safe, and pleasant way, is something transcending the boldest anticipations of science, or most sanguine hopes of men.

Does Homœopathy really come up in its performances to so very high-sounding promises? With a strong sense of diffidence, and much matter-of-fact precaution on one hand, with a patient and truth-seeking spirit on the other, we have been enabled to determine the point for ourselves; we have not the power, nor indeed the wish, to determine it for others. Homœopathy takes no less definite, no less open, a ground than that of Experience:—



it appeals to a tribunal than which neither friend nor foe could well desire a more competent or less arbitrary one;—let it stand or fall by the test of its own choosing. Friend and foe, if actuated in their opposite feelings by equally pure motives, cannot but be content to hand over the question to Time and Experience, and abide by their verdict; it must soon be utter night with a lie, or glorious sunshine with a truth.

## CHAPTER II.

### A SKETCH OF THE ORIGIN OF HOMŒOPATHY.

BY J. RUTHERFURD RUSSELL, M.D., EDIN.

IT has been well said that the history of the world is but the history of great men ; and it may be added that we can best read the history of a theory in the mental development of the theorist. The progress of a truth in the world is but the open exhibition of a silent and unseen struggle in the spirit of its discoverer. The objections raised against it, the old habits, beliefs, opinions, and prejudices which it comes athwart, are obstacles which the earnest propounder of a true system had himself first to overcome. Truth in the world is but the magnified reflection of truth in the individual mind. The teacher of every great new doctrine has, while his perception of the truth was yet dim, and before practical persuasion had become blended with theoretical conviction, anticipated all general objections, fairly regarded and considered the exceptions that might occur, and been himself the arena whereon was enacted the strife of new truth against prejudices, old habits, and hereditary opinions. Hence, we shall best enable our readers to learn the history of Homœopathy by exhibiting, from his own writings as much as possible, the mental biography of



HAHNEMANN ; for in Homœopathy it is especially true that the origin and progress of a science may be most profitably traced in the mind of him to whom the science owes its birth.

SAMUEL CHRISTIAN FREDERICH HAHNEMANN was born at Meissen, in Saxony, that birth-land of reformers, on the 10th of April 1755. His father, an upright, firm, and energetic man, whose occupation was drawing designs on the porcelain for which Meissen is still so celebrated, educated him in his childhood with the utmost care, teaching him always to rely upon his own observations as much as possible ; and instructing him in the elements of geometry and in designing. He was early sent to the borough school of his native town, and at twelve years old he left that for the *Fürstenschule*. Here it was that the industry which characterized his whole life first displayed itself ; for, so devoted was he to his studies, that he used to deny himself sleep for three nights in the week, that he might pass them in reading. Such rare industry, joined to an amiable disposition and unusual powers of acquiring knowledge, could not fail to win the regard of his teachers ; and we accordingly find that the head-master of the academy soon looked upon him rather as a companion than a pupil, discussing with him the niceties of the classics, and permitting him to select his own course of study, while the youthful Hahnemann repaid this indulgence by employing much of his time in teaching the junior classes.

His father, whose means were but limited, wished to take him from school before he had entered the higher classes ; but at the earnest solicitation of his masters, who



refused all fees for his education, he allowed him to complete the curriculum. His unceasing labour and sleepless nights at length told upon his constitution, and he was laid up with a lingering fever. It was when recovering from this illness that he first resolved to study medicine; and the theme he chose for his last essay, before leaving school, was the wonderful formation of the human hand. At the age of twenty, rich far beyond his fellows in knowledge and learning, but with twenty crowns for all his outward wealth, he left his home for the first time, and went to Leipzig. Here the high recommendations he brought from his former teachers obtained for him free tickets to most of the classes; but he had to gain his livelihood by giving private instructions in Greek and French, and by translating English works into German. The translations were all done during the night, that he might not trench upon his hours of medical study. Thus he struggled on, until he had completed his course of theoretical instruction; but, anxious to observe practice on a larger scale than Leipzig afforded, he redoubled his literary labours that he might make enough of money to enable him to prosecute his studies at Vienna. When he had succeeded in accomplishing this object, he spent a year at the Vienna Hospital, which was then under the direction of Dr Quarin. When the year was out he found his little store exhausted, and Dr Quarin, whose friendship he had gained, obtained for him the situation of family physician\* in Hermannstadt. Here he found leisure to devote himself to practice; and so successfully, that in a year and a half he had collected a sufficient sum to enable him to go to Erlangen, where, after another year of study, he took his degree in 1779.



After spending a little time in Dessau, where he married, he accepted the appointment of District Physician at Gommern, near Magdeburg. This situation he held for nearly three years ; and here it was that the destitute state of medicine, as a practical art, pressed so painfully upon his mind that he resolved to abandon his situation, although he was then living in most comfortable circumstances, and to go to Dresden, where he had many friends, and where he hoped to support his family by his literary exertions.

On arriving at Dresden, he was cordially welcomed by many persons, distinguished both in literature and medicine. At the request of his friend Dr Wagner, and with the consent of the town-council, he took the entire medical direction of the Dresden Hospital for a year. Finding that Leipzig afforded him greater opportunities of study, he removed thither ; and, although his medical treatment was extremely simple, and he had the reputation of being a very successful practitioner, yet he became so thoroughly dissatisfied with the uncertainty and danger of the practice of medicine, pursued under no other guidance than that of the vaunted ' established principles,' that he resolved to relinquish it altogether : for (to use his own words), ' the thought of being a destroyer of human life was so dreadful, that soon after my marriage, I gave up treating any one, lest I should aggravate his disease, and occupied myself entirely with chemistry and authorship.'\*

Chemistry yielded to him those positive fruits which

\* We are indebted for these particulars to a series of papers written by Dr Hartmann, which appeared in the ' Allgemeine Homœop. Zeitung.' See also Ein Blick auf Hahnemann, &c., von Ernst, von Brunnow. Leipzig, 1844.



medicine denied ; and some of the preparations and tests he discovered are well known (for example, the method for detecting arsenic), and still retain his name.

When translating Cullen's *Materia Medica*, in 1790, the description he there found of the virtues of cinchona bark rivetted his attention ; and, dissatisfied with the author's attempt to explain its power in checking intermittent fever, he determined to make experiments with the substance on himself. With this view, he took, for several days successively, a considerable dose of it, and symptoms resembling the incipient stage of intermittent fever ensued. The thought then struck him, May not the power of this drug to cure ague depend upon its power of producing a similar disease ? Here was a conjecture which, if true, were a clue to the labyrinth in which he had before so hopelessly groped.

Disease now invaded his own family, and he felt, with a father's keenness, his inability to afford aid. His mind was racked with the question, Is there no possibility of giving greater certainty to medicine ? Again reviewing what had been done in medicine to discover its deficiency he came to the same conclusion that Bacon, from his lofty point of survey, had before arrived at and announced in these memorable words : ' In the consideration of the cures of diseases, I find a deficiency of the receipts of propriety respecting the particular cures of diseases. For the physicians have frustrated the fruits of traditions by their magistralties, in adding, and taking out, and changing a '*quid pro quo*' in their receipts, at their pleasure, commanding so over the medicine as the medicine cannot command over the diseases ; for except it be treacle and mithridatum, and of late diascordium, and a few more,



they tie themselves to no receipts severely and religiously ; for as to the confections of sales which are in the shops, they are for readiness and not for propriety ; *for they are upon general intention of purging, opening, comforting, altering,* and not much appropriate to particular diseases ; and this is the cause why empirics and old women are more happy at many times in their cures than learned physicians, because they are more religious in holding their medicines. Therefore here is the deficiency which I find that physicians have not, partly out of the constant probations of books, and partly out of the traditions of empirics, set down and delivered out certain experimental medicines for the cure of particular diseases, besides their own conjectural and magisterial descriptions.\*

There must, said Hahnemann, be a thorough change. 'Medicine must be reformed from head to foot. The quiet mildness of a John Huss is not enough ; we must have the hot zeal of an immoveable Martin Luther.' Such was the work ; let us contemplate the workman. Hahnemann was now about forty years of age. He is described by his opponents as a man of wonderful sagacity, and of an indomitable, earnest, independent temper. The profound and quaint Jean Paul Richter has characterised him, after his own manner, 'as that double-headed prodigy of learning and philosophy, whose system, though at first despised, was to drag to ruin the common receipt-crammed heads.†

Our reformer's first work was to exhibit the uncertainty of ordinary practice. He shewed how system had

\* Bacon's *Advancement of Learning*, Aldine Edition, p. 175.

† Jean Paul *Zerstreute Blätter*. 2 Bd. s. 292.



chased system over the field of medicine, each with its host of followers, and leaving behind its crowd of victims. How is it, he asks, that two thousand years of deadly experience have issued in a chaos of doubt and growing disbelief? "Are the obstacles to certainty and simplicity in medicine insuperable?"

This question he sets about answering. After pointing out, that regimen should be more attended to, and specially adapted to each individual case, he observes, that it is not the deficiency of our knowledge of surrounding agents, but our inability to apply that knowledge, which constitutes the grand obstacle to certainty and simplicity in medicine. This is the very germ of his system, which contains the doctrine of the application of our knowledge of all remedial substances.

He then starts his grand objection to the ordinary practice, an objection which the wisdom of Bacon anticipated, and the candour of Hufeland allowed. Is it wise, he says, to mix many substances in one receipt? Can we by so doing ever raise medicine to certainty? Can we tell which of the substances we have employed has effected the cure,—which the aggravation? Can we know in a similar case what medicine to select, what to avoid? Of all the problems in physics, the ascertainment of a resultant of various forces is the most difficult to solve, and yet we can measure with accuracy the individual composing forces. In vital dynamics we cannot gauge a *single simple* force, and yet we dare to guess at the result of an exceedingly complex combination. Would it not puzzle any one to predict the position which six billiard balls, flung, with the eyes shut, upon the table, would ultimately assume?



and yet your practitioner flings into the human system his half-dozen ingredients, and professes to know their exact result upon the sensitive frame? THE MORE COMPLICATED OUR RECEIPTS, THE DARKER WILL IT BE IN MEDICINE. 'Formerly,' observes Hahnemann, 'I was infected with this prescription-fever—the schools had infected me—obstinately the miasm hung about me—until it came to a critical expulsion. If we be in earnest with our science, let us make a brotherly compact, and all agree to give our patients but one substance at a time, without altering their mode of life, and then we shall see with our eyes what medicine can do, and what it cannot. To give the right, not the many-mixed, is the stroke of art.' Well had it been for the profession, and better for the world at large, had this invitation been accepted! But what answer did an invitation to thorough reform ever receive, except an indignant and clamorous refusal from all whose gains and ease would be in jeopardy from the change? However, let it never be said that Hahnemann began his career by denouncing the profession. It was not until mild words had failed that harsh ones were used; and if extravagance have sullied Homœopathy, who is to blame? Those who obstinately refused to hear calm expostulations, or he who, conscious of uttering a momentous truth, waxed warm in its defence, and loud to violence in its proclamation? It is not the first time that history has to record how contemptuous indifference to just complaints was the parent of great convulsions.

Hahnemann's next paper, published in 1796, in Hufeland's Journal, and entitled 'An Attempt to find a new



principle for the discovery of the healing power of medicine, along with some observations upon the existing methods,' is so interesting, as to justify us in subjoining an abridgment.

' In the beginning of this century chemistry had attempted, by the application of heat alone, to obtain the active principles of different medicinal substances. The total failure of the attempt disgusted all thinking physicians with the application of chemistry to detect the noxious or sanative properties of bodies, and made them condemn it altogether. This was evidently going too far. Little as we should be disposed to grant to chemistry universal sway over the *Materia Medica*, still less should we deny that to it we owe many important discoveries. To chemistry we are indebted for antidotes to poisons, solvents of gall-stones, a better method of preparing drugs; chemistry has taught us the danger of combining substances which singly are innoxious; and how to detect and remove the adulterations of drugs. We would not discard chemistry from being an assistant; but there is much danger in using it as a guide. The danger of employing chemistry in those disturbances of the animal frame which do not depend on the presence of any deleterious substance, is shewn in the attempts to cure putrid fever by antiseptics,—a practice followed by the most disastrous consequences.

' Still more unfortunate has been the attempt to discover the properties of unknown medicines, by observing their effects upon the blood after it is drawn from the body. As if the substances mixed with the blood in the living body just as they mixed with them in their test



tubes! Besides, are not the properties of the blood so different, according to the manner it is drawn, as to render any result thus obtained quite valueless?\*

‘The very naming of such methods of discovering the virtues of drugs exposes their vanity. The injection of medicines into the veins of animals, or their administration by the mouth, is also a most fallacious method; since many substances are deadly poisons for man, and wholesome food for brutes; and even if they do destroy animals, this at least is certain, the finer alterations and sensations they produce, which man can express by words, are quite lost on animals. The general characters of a substance, whether it has a power to produce purging, vomiting, convulsions, &c., may indeed be ascertained; but all the finer shades of its operation, and its complete sphere of action, such experiments are all too dark, rude, and gross to teach us.

‘Finding all these methods uncertain, system-makers of the *Materia Medica* fell upon the idea that the sensible properties might indicate the therapeutic action of plants. But these are as deceitful in revealing the inter-

\* Liebig, the great chemical physiologist of the present day, in his introduction to ‘*Organic Chemistry applied to Physiology and Pathology*,’ makes the following corroborative observation:—‘Without proposing well-defined questions, experimenters have placed blood, urine, and all the constituents of the healthy or diseased frame, in contact with acids, alkalies, and all sorts of chemical reagents; and have drawn, from observation of the changes thus produced, conclusions as to their behaviour in the body.

‘By pursuing this method, useful remedies, or modes of treatment, might by accident be discovered; but a rational physiology cannot be founded on mere reactions, and the living body cannot be viewed as a chemical laboratory.’



nal properties of a plant, as the physiognomy of a man the thoughts of his heart.

‘ Does astringency indicate a tonic? How, then, is sulphate of zinc an emetic? Are acids antiseptic? How, then, does arsenic produce putrid diseases? Is the sweetness of acetate of lead nutritious? The most poisonous plants may be pleasing to the eye and grateful to the palate. Perhaps botanical affinity is a surer indication of similarity of action? To this there are many exceptions, and opposite and wholly unlike properties are found in plants that stand side by side in the most natural arrangement. We are far from denying the many useful hints the Natural System has given to assist in the discovery of new medicines; but these hints only serve to establish already discovered facts, or lead to hypotheses which are far short of probabilities. And while we readily admit that the family likeness more seldom misleads than the general resemblance of members of the same group, yet the small number of exceptions is quite enough to make us very jealous of drawing conclusions upon the subject; since here we have not to do with the building of systems, but with the restoration of the health of man.

‘ As this way, then, does not offer a safe avenue to the discovery of the medicinal virtues of plants, nothing remains but experiments on the human body. But what kind of experiments? accidental or designed?

‘ Most of the virtues of our medicines have been discovered by uncertain empirical experiments, by chance, often by non-medical persons. We would not underrate the high worth of the discoveries chance has made for us, but it



leaves nothing for us to do. Chance excludes design and independent action. How saddening is the thought that our noblest, most indispensable art, should have been built on the wisdom gathered from chance hits, which presuppose the hazarding of many lives. Do such chance-discoveries suffice to the perfecting of medicine—the supply of its deficiencies? Year after year we are becoming acquainted with new diseases, and new phases and complications of old ones. If we have no way for discovering a method of cure except what chance affords, then nothing is left for us but to treat them with such general remedies as *appeared* useful in apparently similar diseases. But we often miss our aim, because a thing that is changed is no longer the same. We look sadly into the approaching century, in which some particular medicine, for some particular disease, or stage or condition of disease, may perhaps be discovered, as cinchona for intermittent fever, and mercury for syphilis.\*

‘That the most important science should be so precariously established, like the concurrence of the Epicurean atoms for the formation of the world, never could have been the design of the great and wise Upholder of our universe. It were, indeed, humbling to our lofty race, did its preservation depend upon chance. No: It is a quickening thought, that for every individual form of disease there is a sufficient remedy, and also a way to discover it beforehand.

‘By the discovery of the virtues of medicine, we do

\* Chance sometimes discovereth inventions; but that worketh not in years but ages.—BACON.



not mean the experiments made in hospitals, where in this or that stubborn case which has resisted all ordinary treatment, some medicine, either entirely new, or new in its application, is had recourse to, without any reason being given for so doing. Such empirical ventures are, to call them by the gentlest name, but foolish chance-throws—if they are not something worse.

‘ As we have already a great multitude of medicines which we know to be powerful, but whose exact powers we do not know, our object should rather be to learn their virtues, than to add to their number. Before going farther, it is necessary to explain that we have no hope of finding a specific remedy for what go by the names of diseases in nosological arrangements, which pay more attention to the accidental phenomena and unimportant concomitants of a disease, than to the essential characteristics of the morbid action itself. It is on account of the simplicity, constancy, and independent character of intermittent fever and syphilis, that remedies which pass for specifics for these diseases have been discovered. It is, however, only in the simple form of intermittent fever, when free from all complication, that cinchona is specific.

‘ Although there are not specific medicines for individual diseases, as these are described by ordinary pathologists, yet for every particular phase of disease there is a specific remedy.

‘ There are, it seems to us, three ways for adapting remedies to the diseases of the human frame. The first way—the removal of the ultimate cause (*grundursache*),



was the loftiest that could be adopted. To the knowledge of the ultimate causes of disease, however, physicians never could attain: in the vast majority of cases, these must ever remain hidden from human weakness.\*

‘ In the mean time, all that could be gathered from universal experience was united in a general Therapeia. Thus cramp, from the presence of worms, was removed by their expulsion; the fever arising from a disordered stomach, by an emetic; the ball which caused traumatic fever was extracted. This aim was unquestionably high, although the means used for its attainment were not always judicious.

‘ The second method employed, was to suppress the existing symptoms by medicines that produced the opposite condition—as constipation by purgatives—acidity of the stomach by alkalies—pain by opium. In acute diseases these remedies were proper so long as we did not possess any efficient specific, which, like inoculation, quenched the disease at once. Such remedies may be styled temporizing (*temporelle*). But when these means are employed to oppose chronic diseases, then it may be called the palliative plan of treatment, and becomes reprehensible. In chronic diseases they do good only at first; consequently stronger doses are required, and the primary disease is aggravated. It is true that purgatives are used to combat constitutional constipation, and anodynes to subdue pain of long standing: but with what disastrous issue! And although the greater part of my

\* *Ins innere der Natur dringt kein erschaffener Geist.* No created spirit penetrates the heart of Nature.—GÆTHE.



contemporaries still persist in this method, I hesitate not to call it—palliative, dangerous, destructive. Be entreated, my brethren, to forsake this way (*contraria contrariis*) in treating chronic diseases—it is the wrong way—the thick forest-path over a dark heath that ends in an abyss! The proud empiric fancies it the royal road, and plumes himself on his poor capacity of alleviating for the hour, careless though the evil, under this skinned-over surface, be striking a deeper root.

‘ But we do not stand alone in this condemnation of the palliative practice; other physicians, and these the acutest and most conscientious, have from time to time employed remedies which do not merely cloak, but which eradicate the disease, and such remedies are specifics. But where did they find a guide to lead to these remedies? None but the chance hits of their predecessors, or of domestic practice, where the remedies were found useful in this or that disease.

‘ Is it not sad that the discovery and application of remedies in chronic diseases is left to chance? For surely the investigation of the way in which medicines accommodate themselves to the system for its restoration when deranged, should be pursued rationally, and left as little to chance as possible. We have seen that chemistry, botany, and the effect of substances on animals, are all insufficient to guide us to a knowledge of the intimate action of medicinal substances. Nothing, then, remains but to determine their virtues by experiments with the substances on man. This truth has long been acknowledged, but the mistake lay in applying them to the sick, which involved innumerable fallacies. Every-day prac-



titioners describe only favourable cases, and designate the diseases by some common name, without detailing all the specialties of the case; and hence has arisen those thick and mischievous volumes, enumerating a multitude of abused medicines, each of which certainly cures ten or twenty different diseases.

‘ The true physician who has the advancement of his science at heart, requires no other knowledge of his medicines than, *first*, WHAT IS THE SIMPLE EFFECT OF EACH, IN THIS OR THAT DOSE, UPON THE HEALTHY MAN? *Second*, WHAT DOES THE OBSERVATION OF THEIR EFFECT IN THIS OR THAT SIMPLE DISEASE TEACH? We attain a knowledge of the latter, by studying the writings of practical observers, more especially the ancient writers on medicine. Throughout these are scattered well described cases, in which simple medicines were administered; and it is mentioned how far, and in what way, these were useful or hurtful. Yet here we meet much conflicting evidence, and the determination of the first question—the effects of medicines on healthy persons—is more practicable.

‘ To this category belong all cases of intentional or accidental poisoning; cases of criminals who have been given over to be experimented on; of those who have experimented on themselves—and when too strong doses of medicines have been given in simple diseases, the course of which we know—as sometimes happens in domestic practice. A complete collection of such histories, with observations on the degree of credibility of the narrators, would form the grand code of our *Materia Medica*.

‘ In such alone could the true nature, the real effects,



of a medicine be certainly discovered ; and from such a book we could detect in what diseases these medicines would answer.

‘ Still the key of application would be wanting ; and perhaps we are so fortunate as to present the principle by which we could proceed to fill up the gap in the art of healing, and to direct how a specific, for at least chronic diseases, may always be discovered.

‘ Every powerful medicine excites in the human body a peculiar kind of disease, and the stronger the medicine, the more peculiar and violent the disease.

‘ Let Nature be imitated, which frequently cures one disease by exciting another, and let a substance be chosen whose action closely resembles the original disease, and this will be cured—SIMILIA SIMILIBUS CURANTUR.

‘ This proposition looks too like an unfruitful analytic general formula, and we must attempt to expose it synthetically.

‘ Most substances have two actions ; the one is the direct, the other the indirect ; the latter is commonly the opposite of the former. In chronic diseases, let a medicine be chosen whose direct or primary action corresponds to the disease ; and then the secondary action will be the accord of the system which is sought for. Sometimes, however, the secondary effect produces a disturbance that lasts a few hours, or even days.

‘ The reason that palliative remedies do mischief in chronic diseases is, that, after the primary effects, which are the opposite of the diseases, secondary ones occur, which resemble the disease.

‘ The more nearly the primary effects of a medicine



correspond with the disease for which it is used, the more certain will be the good effects of administration.'

Then follows a list of substances, the acknowledged power of which to cure diseases corresponds to their power of exciting similar ones ; the proof, in short, of his grand dogma ; *Similia similibus curantur*. Into this it would, of course, be unsuitable here to enter.\*

Such, then, is the first systematic announcement of Homœopathy, on which we would make a few remarks. *First*, As to its origin.

The idea that medicines owed their power of cure to a power of exciting a disease similar to the one they cured, was suggested by observing the incipient symptoms of ague excited by cinchona. Hahnemann, however, did not jump to his conclusion from this one observation, but sought to find in all other specifics some relation between the diseases they cured and the effects they produced on those in health. We must remember, that his mind was then on the watch for some indication. Shall we, then, blame him for attaching undue importance to one experiment ? As well might we blame Newton for perceiving the analogy between his law of gravitation and the apple's fall. In both cases the original observation was but the finger-post of the road to truth. 'Nature speaks to us,' as Liebig remarks, 'in a peculiar language, in the language of phenomena ; she answers at all times the questions put to her ; and such questions are experiments. An experiment is the expression of a thought.

\* Numerous examples of the truth of this proposition will be found in a subsequent chapter.



We are near the truth when the phenomena elicited by the experiment correspond to the thought; while the opposite result shews that the question was falsely stated, and that the conception was erroneous.' The question, Is this the road? is much more likely to obtain a satisfactory answer in physical, as well as critical research, than the vague inquiry, Is there a road at all?

In the *second* place, there is something extremely honest and outspoken in the style of the paper. Earnest and bold, yet courteous and friendly, he seeks only to convince, not to proselytize, and addresses the understanding, never the passions, of his readers. What is there in this paper that can justify the disgraceful epithets that have been heaped on Hahnemann? And yet this paper contains the whole marrow of the question—the very 'head and front of his offending.'

In the *third* place, it is very remarkable that this essay, containing so full a development of the system, should notice *the dose* only in a foot-note, warning the profession of the danger of employing large doses when testing the homœopathic law; and yet this question of the dose, so insignificant in itself, about which, even among homœopaths, there is a great variety of opinion; this question of the dose is the rock on which the profession stumble, the butt of empty laughter to the multitude who do not see its natural connection with the primary proposition, and the only feature which those who found their judgment on a passing gaze at the outside are in a position to notice.

To this exposition of his system succeeded a series of papers with various titles, in all of which his ruling resolution to reform medicine by exposing the danger of treating



artificially classified diseases, is conspicuous. In one he denounces the attempt to storm disease by large doses of numerous medicines. 'Such,' says he, 'is not the wish of the omniscient Creator, who in nature effects great and various designs by the simplest machinery; and surely the remedies which he created are likewise so endowed that each possesses a certain power, through the right employment of which, in small doses, great and many cures might be effected. Would that, instead of plunging into empty speculations and theories, into inexhaustible talk and scribbling, we did but seek to know accurately the properties of medicines!'

In another paper he exposes the fashionable systems of cure. The first is *the cure of names*. For example, the patient has gout; then let A, or B, or C, be tried, and so go through your list of gout medicines, until you hit upon the right one.

The *second* is the *cure of symptoms*. In this, general symptoms are generally combated. Thus, if the patient has a dropsy, let a diuretic or diaphoretic be given to reduce the swelling. 'Here is a dropsy, and little urine is passed; the doctor must increase the flow of urine. Squill stands at the head of the diuretic brigade. This, then, is ordered. At first it expels much water; but, alas! by constant use, less and less. Symptoms of exhaustion set in; loss of appetite; strength and sleep; the swelling enlarges. Then does the doctor allow the patient to sink quietly to his grave, when nothing more avails, having first shewn that he could for a short time increase the flow of urine.'

It is wonderful how men of fairness and reflection can



harp upon so silly an objection to homœopathic treatment as the absence of manifest effect of the medicines given. Surely it is obvious that the rapid retreat of the disease, without any disturbance of the system, is the effect sought; and the only effect to be obtained in a perfect system of cure. Every so-called effect of medicine is an exhibition of the imperfection of our art. It shews, not that the disease, but the system, is affected. This lamentable sophism has done much to perpetuate the use of strong and mischievous measures; blinding the eyes of the sufferer to the sad fact that these measures are strong, not against his malady, but against himself. ‘The physician does much, only not what he ought; he works wonders, but seldom a cure.’

The *third* method is the cure of the ultimate cause. The knowledge of the ultimate cause of disease, however, is quite unattainable. Pathological anatomy shews only its effects—not itself. *Tolle causam* is an excellent maxim; but if we treat diseases without knowing their ultimate cause, but only guessing at it, then we treat phantoms which have an existence only in our own mind, and sadly mistreat our patients. While the principles of treatment are false, the plan on which they are pursued is absurd. The whole art of prescription-writing is repugnant to sense, and should be immediately discontinued. ‘The physician,’ observes Hahnemann, ‘in writing his prescription, ordains to each ingredient his distinct office. This shall be the base; that the adjuvant; the third the corrective; the fourth the derivative. I strictly order that none of these ingredients presume to leave his allotted post. Let the corrective not be negligent



in covering the blunders of the base ; but let him not presume to overstep his limits, and act against the designs of said base. To you, Adjuvant, I commit the mentorship of the base ; you are to help him as you best can ; but attempt not with officious zeal to play an independent part. Co-operate entirely with him, although you are quite a different thing. Such is my order. To the joint wisdom of the whole I commit the charge of the expedition. Let me see how nicely you can drive all impurities out of the blood, without harming the unoffending ; arrange and attune all that is deranged and discordant. Your commission affords you unlimited power. You must reduce excessive irritability of the muscular fibre, and sensibility of the nervous system. See you the twitches in yon arm ? Fly to their suppression. That fellow has got jaundice ; you must bleach his face and deobstruate his ducts. You, most worthy Base, have been accredited as a very admirable deobstruent by one of the last pamphlets from England ; to you I commit the duty of resolving all obstructions. The exact nature of these obstructions, to be sure, I do not very well know ; but you will learn what is to be done when you are on the spot. To you, Saltpetre, I allot the reduction of that putrid fever ; don't attempt to excuse yourself from the task, on the shallow pretext that hitherto you have always failed : have I not ordered a detachment of Sulphuric Acid to your aid ? I know you will pretend that with Sulphuric Acid you cannot agree ; but that is mere rebel-talk, as if such disagreement could occur against the wish of the receipt-writer. Besides, have I not put at your disposal a troop



of derivative and alterative auxiliaries? Each of you must fulfil the office you hold in the constitutional *Materia Medica*.' Thus, to use again the words of Bacon, 'they lord it so over the medicine as the medicine does not over the disease.' 'Can it,' Hahnemann continues, 'be believed in earnest that such *mishmash* will produce the effect which might be expected from the separate operation of so many distinct agencies? as if those ingredients exerted no mutual influence upon one another! Has it never occurred to any one that two dynamic agents never can effect that which, if given separately, they would accomplish, but that an incalculable resultant force must be produced? And how much more, when not two, but many, substances are mixed! So that your school-order of battle and all the bases and correctives are of no avail. Nature works by eternal laws, without any leave of man. She loves simplicity, and with one instrument performs much; he, with many, little: let us imitate Nature. To write complicated receipts, perhaps, too, many in a day; is the acme of the worst kind of empiricism. To give but one substance at a time, and not to give a second dose until the effect of the first is over, this, and only this, is the direct road to the sanctuary of art.'

Hahnemann, practically pursuing, as well as openly teaching his system, soon excited the dread of the apothecaries, who saw the vision of their gains beginning to melt. This was not to be endured. Were those faithful allies of the physicians to be sacrificed to pretended reform? Were all their variegated mixtures to be henceforth utterly despised? *Dii avertant omen!* Were



there not laws to prevent physicians dispensing their own medicines? Although the avowed object of these laws was to prevent risk to the public from the incapacity of physicians, amid the crowd of other business, to mix properly their own prescriptions, and these laws, therefore, could not fairly apply to homœopathic physicians who never mixed at all; yet it was a legal barrier which might be used to arrest this pestilent heresy, which threatened the rich and imposing Apothecaries' Hall with total subversion. Hahnemann quietly asks, 'Had you interdicted Raphael, Titian, and Da Vinci, from mixing their own colours, where would now have been their master-pieces?' But when was reason ever strong against corporations? and this legalized persecution had a great influence on Hahnemann's career.

In 1805 Hahnemann published a paper entitled 'The Medicine of Experience.'<sup>\*</sup> This is an epitome of 'The Organon,' which soon followed. He had now attained what he had long been seeking, a real principle of nature, instead of dead formulas of art, as a guide in the treatment of disease. This principle he had deduced from large observation, had found perfectly consistent with the experience of former writers, and had extensively tested in his own practice with the happiest results. Firmly assured of the existence of the law he had promulgated, his attention was now turned to its explanation. This explanation must never be confounded with the law itself; the one may be true, the other false. The ascertainment of a general law of action is quite sufficient as a guide to practice, and is usually the limits of human discovery.

\* A translation of this will be found at p. 63.



When we attempt its explanation we leave the territory of observation and induction, and enter that of hypothesis. Shall we close to the ardent soul of the discoverer this fascinating region, and forbid him 'all high clambering cogitations?' Surely not. We should receive both his law and his explanation thankfully, and assign to each its due value. Blindly to accept an hypothesis, because it comes from the discoverer of the law for which it is invented, would be a foolish abdication of our reason; to reject it without careful examination, unworthy the respect due to the discoverer. The explanation which he offers of the law is, that, when two diseases meet in the system, the stronger overcomes the weaker; and he assumes that medicinal disease is stronger than natural disease, for the time of its existence, though not so enduring; because the system is only occasionally susceptible to natural morbid agents, but always susceptible to the action of medicines.

Besides this explanation of the law, he lays down, in an aphoristic form, directions for the exhibition of the medicines, the amount of the dose, and propriety of its repetition. He also gives some admirable directions about the best method of detailing cases; and in these directions he particularly notices the attention to be paid to the remote exciting cause of the disease, as well as to the symptoms. This is well worthy of noting, as his views on this subject have been much misrepresented.

He was now rapidly approaching a full exhibition of his system, to the furtherance of which his work *Fragmenta de Viribus Medicamentorum Positivis*, published in the same year as the paper last noticed, and contain-



ing an account of the effects of twenty-five substances on persons in health, greatly contributed. Indeed, what more was wanting for a system? He had shewn that, to bring medicine to perfection, we must investigate the exact action of medicinal agents on those in health, examine the relation between this and their action in curing disease, and thus ascertain the law which shall guide us in their administration. This law he announced, and he gave the facts from which it is deduced. He then proceeded to teach its application, and afforded means of applying it. Surely this looked liker a dawn in medical science than any thing that had yet appeared.

In his last paper he enters more fully into the propriety of giving small doses.\* He finds they answer better, and explains how this is.

A diseased part is much more susceptible of the action of any substance fitted to affect it than when healthy; just as a burned finger is more sensitive to heat than a sound one; and as unreasonable would it be for a man whose finger was whole, because he felt no pain on holding it to the fire, to insist that his neighbour was fanciful because he drew back his burned finger from the same position, as it is for those who ridicule the system of Hahnemann to require that doses, in order to cure diseases, must produce a sensible change on those in health. How can the same amount of heat cause pain in a burned finger, and not in a sound one? Ridicule is a dangerous weapon, very apt to rebound on the head of those who use it.

\* The theory of small doses is fully considered in a subsequent chapter.



He also distinctly asserts the proposition that the effect of substances in all doses are the same in *kind*, the difference in their action depending upon the degree of the patient's susceptibility, as well as on the quantity employed. A full consideration of the relative importance of these two conditions would put the *quæstio vexata* in regard to the dose in its proper light, and might reconcile much discrepancy of opinion.

Thus far, in comparative obscurity, had the system matured itself; and now the truth, that for twenty years had been working and silently growing in the mind of Hahnemann, confined in its influence to a limited circle, was to find a voice in almost every land of Europe. In 1790 the homœopathic law dawned on his mind, and in 1810 appeared the 'Organon of the Healing Art' (*Organon der Heilkunst*), in which this law is propounded and explained.

To the cursory reader, even though he be charitably disposed, this work presents startling difficulties, which are best removed by considering Hahnemann's position when he wrote it. At this time the truth of his discovery was so entirely incorporated with his own mind, by twenty years' reflection and experience, that his efforts are directed fully as much to the explanation as to the demonstration of the law; and the general arrangement of the work is such as rather to perplex. Nevertheless, the period of its publication will always mark a great era in medical science, and the doctrines and precepts it contains have worked much deeper into the general practice of medicine than at first appears. They have exerted a powerful influence, not only on those who have



adopted them, but upon such as have rejected them, and who must be at a loss to account for the changes, obvious enough, that are passing over the face of medicine. Its keen exposure of the ordinary practice, its proud rejection of old formulas, and its condemnation of time-sanctioned systems, raised against it a clamorous and angry host of opponents, who felt and resented this assault on their stronghold; while its fresh and vigorous truthfulness, and its appeal to reason and experience against all the old arbiters in medicine, served as a gathering cry to numbers who had been convinced by former papers, but had not ventured openly to espouse so daring a heresy. As to the shallow sentence of condemnation passed by our reviewers on the work, it was no more than might have been looked for. It was not to be expected that a book so full of novelties, written, too, in a severe style, and presenting so many points on which witticisms could be easily hung, should be studied with that care and candour required for its appreciation, much less that they should give themselves the pains of fairly disentangling and exposing a system which condemned them sounsparingly. It would have been, doubtless, a higher task to have measured with an artist's eye the structure as a whole, examined its foundation, and computed its proportions, than to have valued themselves on their skill in breaking down the outworks and appendages, the presence or absence of which was of no consequence to the erection. By and bye, 'the right critique will appear, which shall neither exaggerate, praise, nor blame; for hitherto, as well the various prickling girdles (cilices) in which he was to do penance have been



so wide for his body, that they slipped to his feet, as the laurel wreathes so large for his head that they fell upon his shoulders.'

To all his reviewers, and in Germany many and able ones appeared, Hahnemann answered only by silence; well aware that a work like his was neither to be sunk nor saved by a war of words. If it were the vehicle of great truth, although burdened with every conceivable fault, affording ample prey to the critics, yet, once upon the stream of time, there it must float, unaffected both by the favour and opposition of cotemporaries. Those who excuse their neglect of this work by saying Hahnemann was a quack, we would remind him of the words Foster applies to a similar nickname: 'What a quantity of noisy zeal would be squashed in dead silence, were it possible to enforce a substitution of statements and definitions for this vulgar, senseless, but most efficacious term of reproach.' And let those who find in the self-complacent ineptitudes of reviewers about 'German mysticism' and the like, a sufficient expression of their opinion, remember the constant advice of Dr Johnson: 'Try by all means to get rid of cant.' By those who wish to understand it, it will be found full of deep reflection; and without estimating its faults, it may be safely said that no one ever perused it with attention without deriving from it much instruction: 'If the truth,' says Hahnemann, 'which I discovered, while setting at defiance all prevailing prejudices, and simply contemplating Nature, be as directly at variance with the dogmata of the schools, as were the bold sentences which Luther nailed to the *Schloss-kirche* of Wittemberg opposed to



the spirit of a crippling hierarchy, the fault lies neither with Luther's truth nor mine. Let us be sure that we have accurately computed the orbit of Hahnemann's mind before we take upon us to condemn the aberration of his course.

It would not be within the scope of this article to do more than advert to the subsequent great works of Hahnemann—the '*Materia Medica Pura*,' and the treatise '*On Chronic Diseases*,' in which are detailed the effects of fifty-nine substances on himself and his co-operators. The industry, self-denial, and personal sufferings displayed by these works, is the strongest evidence of his thorough conviction of the necessity of proving medicines on the healthy before administering them to the sick—a subject fully treated of in a subsequent chapter.

Nor do we intend to discuss the so-called '*Psora-theory*,' as our design throughout this volume is to represent and illustrate the principles involved in the practice of Homœopathy, along with the evidence in favour of their truth and applicability, and to avoid strictly practical questions respecting the administration of the individual medicines, and all hypothetical considerations therewith connected.



## CHAPTER III.

### THE MEDICINE OF EXPERIENCE.

BY SAMUEL HAHNEMANN.

MAN, viewed as an animal, has been created more helpless than any other. Nature has supplied him with no weapons to resist his foes like the bull, nor power of rapid flight like the stag; he has no wings, no webfoot, no fins; nor has he an impenetrable shield like the tortoise, nor any safe natural retreats like those prepared for insects and reptiles. No physical property has he which scares his enemies like that which makes the hedgehog and torpedo formidable; he has not the sting of the wasp, or the poison-tooth of the adder.

Naked and defenceless, he stands exposed to the attacks of every beast of prey. As an animal, he has nothing to oppose to the action of the elements and meteoric influences; he has no brilliant impermeable skin like the seal, no compact and oily plumage like the waterfowl, no shining cuirass, like aquatic beetle, to protect him from the waves. As the specific gravity of his body is scarcely less than water, he swims with more difficulty and danger than any quadruped, and when that element is frozen, and the icy blast



assails him, nature has given to him no warm covering like that of the Polar bear. The lamb, immediately on its entrance into the world, knows how to find its mother's udder, but the child would perish were not the requisite nourishment given to it by its tender nurse. Nowhere does Nature prepare for man food ready for his use like that for the ant, the caterpillar, and the Egyptian rat, or the expanded flower for the bees. He is liable to a greater number of maladies than the brute creation, who besides, as a means of preservation from these invisible enemies, are endowed with a mysterious sense;—an instinct denied to him. Man alone quits painfully the womb of his mother; he alone comes forth naked, weak, and defenceless, destitute of every thing that could enable him to maintain life; of all the bounty with which Nature has enriched the very worm that crawls in the dust.

Where, then, is the goodness of the Creator which thus disinherits man—and man alone, of all His offspring—of the means of supporting life?

Ah! the Eternal Source of Love disinherited man of all animal endowments, the more richly to ennoble him with the spark of divinity—the soul, which, from its own fulness supplies his every want, secures his highest welfare, and from itself develops that matchless superiority which exalts this child of earth above all that do inhabit it. The soul, which is itself imperishable, furnishes its fragile tenement of clay with apparatus for its sustenance, protection, defence, and comfort, such as not the most highly favoured creature has derived directly from the hand of Nature.

It was to the fertility of the human mind in discover-



ing resources, that the Father of our race principally relied for the arrest of those evils with which the delicate organism of his children should be afflicted. It behoved the natural efforts which the body could make to remove disease, to be few and limited, in order that the mind of man might the better feel the necessity of discovering more powerful auxiliaries than those which the Creator had thought fit to implant in his frame.

There is nothing offered by Nature which we can use to satisfy our wants in the state she presents it; our minds must discover the means of making it conducive to our comfort. She causes the ears of corn to spring from the bosom of the earth, not that we should swallow them in their raw and unwholesome state, but thrashed and ground, and, by means of fermentation and heat, divested of all their hurtful and medicinal qualities, we should use them in the form of bread. Thus, by our genius we prepare wholesome and nourishing food. Since the creation of the world lightning has destroyed man and beast, but it was the will of the Creator that man should discover, as he has done, means of averting from his dwelling the fire of heaven, and conduct it harmless to the ground by lofty metal tractors. It is thus that He permits all natural agents to have a detrimental effect upon us, that we may discover some counteracting power to secure us from their molestation.

In like manner, He allows an innumerable multitude of diseases to attack our delicate organism, threatening it with death and destruction, knowing well that what is merely within us is unable to repel the invader without, sorely suffering from the contest, or sinking in defeat.



Weak, limited, and insufficient were the curative resources of the unassisted organism, in order that our mind might be forced to employ its noble attributes, where the most precious of earthly possessions, health and life, were at stake.

It was not the will of the Father of mankind that we should simply ape the operations of Nature; His will was that we should do more than she, but in another method, and with other means. To man it was not given to make a horse, but he can make machines, each of which is more powerful than a hundred horses, and more manageable too. He has allowed us to construct vessels, in which, sheltered from the monsters of the deep, and the fury of hurricanes, and surrounded by all the comforts of land, we can circumnavigate the globe, which fish cannot do; hence his refusal to us of fins, gills, and swimming bladders, such as fishes possess. He has denied us the plumage of the condor, but He has permitted us to discover the art of confining a buoyant gas, which carries us silently through atmospheric regions all unknown to its winged inhabitants.

So He does not allow us to employ mortification for the separation of a crushed and mangled limb, as the unaided animal organism would do; but He put the sharp, swift-dividing knife in our hands, moistened with oil by the hand of man, that we might do the work with less pain, less fever, and far less danger to life. He allows us not to employ the so-called crisis for the cure of fevers as Nature does; we are not to imitate the critical sweats, critical urine, critical abscesses, and critical bleedings of the nose; but after patient search we find the means of



curing more rapidly, more surely, more easily, with much less pain, much less danger to life, and much less consequent suffering.

I am astonished, therefore, at Medicine being so rarely elevated beyond an attempted imitation of those rude movements; and that, almost universally, it has been thought there was nothing better to be done for the cure of disease than to excite the system to evacuations by means of perspirations, stools, vomiting, bleeding, and artificial ulcers! (Such has been the favourite practice from the most ancient times down to the present day. On it we have been incessantly thrown back when methods founded on abstract theories disappointed the expectations which they had raised.) As if these forced and imperfect imitations were the same thing as the crises which Nature produces from the secret sources where her powers are elaborated! as if these crises were the best means of subduing disease, and not rather proofs of the therapeutic impotence to which the Supreme has intentionally condemned our nature when abandoned to itself. Never has it been in our power to excite spontaneous efforts of the organism by artificial means, and the thing in itself implies a contradiction. Never could it have been the will of the Creator that we should act upon any such idea. His will is, that unrestrained we should bring to perfection our individual animal frame, and the cure of its diseases.

Up to the present time, pure surgery alone has, to some extent, followed these wise suggestions. Whilst Nature, left to herself, only succeeds in expelling the



splinter of a bone by inducing a fever which compromises life, and a suppuration which all but entirely destroys the limb ; the surgeon, after having made the necessary incisions in the soft parts which cover it, extracts it with little pain, without formidable consequences, and without affecting the strength. Slow fever, accompanied by insupportable pain, wearing out the constitution to the very brink of the grave, is almost the only means by which the organism can oppose a large stone deposited in the bladder ; but by the aid of an incision, the skilful hand of the surgeon relieves the patient in a few minutes of this foreign body, and thus spares him tedious suffering terminated by a miserable death. Or, must we strive to imitate the gangrene and suppuration of a strangulated hernia, because this and death are Nature's only terminations ? Should we have done sufficient towards saving the life of a man who is losing all his blood from a large artery, if we merely threw him into a fainting fit which suspended the hæmorrhage for half an hour ? Should we not rather have recourse to the tourniquet, the ligature, or the plug ?

It is always, indeed, a matter of the deepest wonder to observe how Nature, abandoned to herself, deprived of the aid of surgery, and receiving no succour from without, so often succeeds in curing diseases and accidents, although with much pain and annoyance to the sufferer, and danger to his life. But in acting thus, she does not intend us to follow her example. We cannot, we ought not, to imitate her, because there are means infinitely more easy, more prompt, and more sure, which the mind



of man is destined to discover, in order to fulfil the requirements of medicine, the most essential and most elevated of sciences.

*ἀτελὲς ἀλαγὸς πράξις καὶ λόγος ἀπρακτός.* Greg. Mag.

Medicine is a science of experience. Its business is to oppose disease by remedies. The knowledge of disease, the knowledge of remedies, and of their application, constitute medicine.

Since the wise and good Creator permitted those innumerable aberrations from health which we call diseases, He must have revealed to us a distinct way for acquiring so much knowledge of diseases as was requisite for the application of their remedies; He must have shewn us no less clearly the means of discovering in medicines the properties which render them fitted for the cure of the diseases. Otherwise he would have left his children without relief, or exacted from them what was beyond their power.

This art, so necessary to our smitten race, can be diffused neither through the unfathomable abyss of dark speculation, or the boundless void of conjecture. It must be within our reach, within our grasp, within the sphere of our external and internal perceptions.

Physicians have lost two thousand years in seeking to discover the invisible changes which the interior of the body gives evidence of during disease, the ultimate causes of these, and the nature of their being; because they believed that they could not cure until they had attained this unattainable knowledge.

If the failure of these long-continued efforts were not a proof of the impossibility of success, the experimen-



tal fact of their not being necessary for cure should at once suffice to establish their impossibility. For the great Spirit of the Universe, that most consistent of beings, has rendered only that possible which is necessary.

Although we never can discover the internal changes of the body, which are the source of diseases, yet the knowledge of their external causes has its use.

No effect exists without a cause. All diseases, then, have their cause, however hidden it may be from us in the greater proportion of cases.

We observe some diseases, few in number, which arise always from one and the same cause. Such, for instance, as the miasmatic; hydrophobia, syphilis, plague, yellow fever, small-pox, cow-pox, measles, and some others. They have this peculiarity, that they always remain peculiar diseases, and that, depending on an unvarying contagious principle, they invariably preserve the same character and the same course, setting aside certain shades of difference, depending on accessory circumstances, which, however, do not affect their fundamental characteristics. It is possible, also, that some maladies, the miasmatic sources of which we cannot discover, such as the gout, ague, and many others, endemic in different countries, depend equally on a primary cause, which remains always the same, or else a permanent union of various causes, which tend to combine, without which they would not constitute diseases so well characterised, nor would they be so frequent.

These diseases, *few* in number, at least the first mentioned, the miasmatic, may be considered as specific diseases, and be called by a specific name.

He who has found a remedy for one of these will be able



to cure it at all times and in all places, because a disease of this nature ever remains fundamentally the same, both in its manifestations and in its cause.

All the other maladies are so different the one from the other, as regards these symptoms, that it may be safely said, that they depend on a concurrence of many diversified causes, varying in their number, nature, and intensity.

It is possible to calculate how many words the twenty-four letters of the alphabet may number, when properly combined, great as that number is ; but it is not possible to enumerate the diseases which differ from each other, because our bodies may be affected by numberless external circumstances, for the most part still unknown, and by just as many internal influences.

Every thing which exercises a specific action (and their number is incalculable) may have an influence on our organism, which is in connection and in conflict with all the elements of the universe, and may produce in it changes as varied as are the causes which determine them.

What diversity must there not be in the result of the action of these powers, when several of them exert their influence on our bodies at the same time, in varied order and succession, and with different degrees of intensity, seeing that these bodies offer so much variety in their organization, and differ so much from each other at the various epochs of life, that no human being exactly resembles another in any respect whatever !

Hence it follows, that, with the exception of a few peculiar diseases, the innumerable remainder are so different, that each of them is seldom observed more than once ; and each case which we meet with ought to be considered



and treated as an individual disease which has never yet appeared precisely as we see it in the present case, under like circumstances, and is never, perhaps, to re-appear exactly in the same form.

The internal nature of each disease, of each isolated morbid case, in as far as we require to know it, in order to cure it, is ascertained by a careful observation of the symptoms, in their entire circuit, their individual intensity, and their connection and succession.

After having recognised all the existing and appreciable symptoms of the disease, the physician has discovered the disease itself; at least he has the knowledge sufficient for its removal.

To effect a cure, we must have a faithful portrait of the disease, comprehending the whole of its symptoms; and, when possible, a knowledge of the predisposing and exciting causes, in order, by the removal of these, through proper regulation of the regimen, to prevent a relapse of the disease after a cure has been effected by means of medicine.

The physician who wishes to trace the 'tableau' of a malady, has only to observe with attention, and copy with fidelity. He must avoid all conjectures and suggestions.

The patient relates the history of his malady; his attendants mention his behaviour: the physician sees, hears, and feels, in order to ascertain what is strange and unusual about him, and records it all, in order to represent the image of his disease.

The most permanent, striking, and distressing symptoms form the chief indication. The physician makes them the leading features in the portrait he draws. The



most peculiar and unusual symptoms afford the distinctive characteristics of the individual case.

The physician listens in silence while the patient and his attendants tell their story. He then asks what were and what are still the most permanent, frequent, violent, and painful symptoms; he requests him again to describe his sensations exactly, to recapitulate the progress of events, to point out more precisely the exact seat of his sufferings; he desires the attendants to recommence their report, selecting such terms as express with most precision that which they have already described, with regard to the changes observed in the patient.

If, on comparing this fresh recital with the one already made, the physician finds the expressions and descriptions correspond, he may consider them true, and regard them as the expressions of the patient's sensations. If they do not accord the one with the other, he submits the discrepancy to the patient himself, or to the assistants, in order that they may decide which is true. In this manner he confirms what is true, and rectifies what requires alteration.

If the portrait be not yet complete, if there be any portion or function of the body which the patient or assistants have not noticed, the physician addresses questions relative to these parts and functions, but framed in general terms, in order that those whom he interrogates may be themselves led to disclose the minutiae.

When once the patient, in whom alone, when the disease is not feigned, one ought to have full confidence, in as far as regards sensations, has been led to furnish us, of his own accord, with a complete enough picture of his



case, the physician may then question him more particularly. But as these questions bear slightly the character of suggestions, he ought not to take for granted that the first answers are correct; after having noted them, he should recommence his inquiries under another form, and in another order, being careful to add nothing, and confining himself to retrace the exact state of circumstances.

Nevertheless, it often happens that an intelligent patient will spare the physician these particular questions, and that he will, in the course of his recital, detail those indications which render them necessary. The examination being finished, the physician adds what he himself has silently observed in the patient, and compares these observations with what has been remarked by the attendants. The physician then learns what are the remedies and domestic medicines, or other treatment, which he has employed; and, above all, that of the last few days. He chiefly inquires what have been the attendant circumstances before the use, or during the discontinuance, of all medicine. This latter form is what he considers the original state; the other is a partial and artificial modification of the disease, which, however, it is sometimes<sup>\*</sup> necessary to take, and treat such as it is, when the state of matters is critical, and admits of no delay. If it be a chronic affection, we leave the patient without medicine for several days, in order that the disease may return to its original form, and defer a more minute examination of its symptoms until that time, in order to found the method of treatment upon real and solid symptoms, and not upon those fleeting and false in-



dications to which the old treatment has given birth. It is only the pressing case of an acute disease, which should make us neglect this precaution.

In the last place, the physician should inform himself generally of the exciting cause of the disease. Scarcely out of ten cases can we find one where the patient and the attendants can assign a specific cause. But if there be an undoubted cause, it will almost always have been mentioned during the relation of the case. Generally, when it is necessary to ask questions on this head, nothing but uncertain information is obtained. I except those causes which delicacy prevents patients and friends declaring, at any rate of their own accord, and of which the doctor should inform himself by judicious questions, or by indirect information. With this exception, it is often objectionable, or, at any rate, useless, to have recourse to artificial suggestions, in order to discover the exciting cause, the more so, as our art knows but very few causes which could guide it to remedies, without having regard to symptoms of the affection, which the exciting cause has given rise to.

By such zealous care, the physician will obtain an exact picture of the malady; he will have it represented by its external signs, except through which man, who perceives only by means of his senses, never can apprehend the secret properties of things in general, and, of course, not those of disease. The disease being discovered, it is necessary to find a remedy.

The foundation of every disease is a preternatural irritation of a peculiar kind, which disturbs the functions and healthful sense of integrity of our organs.

But the unity of the life of the organs, and their con-



currence in a common design, does not permit two preternatural irritations to exist together and simultaneously in a human body.

Hence we derive the first experimental proposition—  
When two general preternatural stimuli act at the same time on the body, if they are not of the same nature, one of them, the weaker, must for some time be suspended and overcome by the other, the stronger.

The second experimental proposition is: When the two stimuli have a great analogy with each other, one of them, the weaker, is entirely extinguished and destroyed, it and its effects, by the analogous power of the other, which is the stronger.

Thus, for example, if when a man contracts, at the same time, measles and small-pox (two heterogeneous stimuli), and the measles break out first, these disappear immediately on the invasion of the small-pox; and it is only after this last is cured that the measles reappear and run their natural course. I have seen this frequently. Larrey informs us also, that the plague of the Levant stops as soon as the small-pox begins to predominate, but that it breaks out again after the cessation of the epidemic variola.

These two irritations are of a heterogeneous nature: this is the reason why one is suspended by the other, though only for a certain time.

But, if these two preternatural irritations are homogeneous in their nature, the weaker of the two gives way to the stronger, and the latter alone accomplishes its action, while the other is at once entirely extinguished and destroyed. Thus the small-pox is an antidote to the cow-pox: the latter being arrested in its course as soon



as the infection of the small-pox, with which the body had been previously impregnated, breaks out, and never re-appearing after its cessation.

The vaccine matter which, besides its well-known effect of producing the cow-pox, has also a tendency to give rise to an eruption of little pustules, bordered with red, principally on the face and fore arm,—a tendency which, in certain conditions yet unknown, ordinarily occurs shortly after the desiccation of the cow-pox, cures other cutaneous disorders with which the patient was before assailed, provided there be a great analogy between the two affections ; and it cures them permanently.

These two preternatural irritations cannot exist together in the same body ; from whence it follows that the new morbid irritation on its appearance destroys the former, not temporarily only, but permanently, because of their similarity ; the one completely extinguishes, annihilates, and cures the other.

It is the same in the treatment of disease by medicines.

If we combat the itch of the workers in wool with a strong purgative, jalap, for example, it gradually entirely yields so long as we continue the use of the purgative, because the effects of these two preternatural irritations cannot exist at the same time in the body. But as soon as the effect of the artificial irritation ceases, that is to say, as soon as we disuse the purgative, the itch returns as it was before, because, of two heterogeneous irritations one cannot destroy the other ; it can only repress and suspend it for a time.

If, however, we introduce into the body attacked by the



itch a new irritation whose nature is different, but whose mode of action strongly resembles its own, for example, *liver of sulphur*, which, according to my personal observations, and those of others, produces an analogous eruption to the itch, as two general preternatural irritations cannot exist at the same time in the body, the itch disappears, not only for a short time, but permanently, on account of its great analogy with the new irritation; that is to say, the itch of the workers in wool is really cured by the use of liver of sulphur, and for the same reason by that of sulphur in powder, and sulphureous baths.

Even the affections which a superficial observer considers as purely local, are suppressed for a time by a new irritation applied to the part, when the two irritations have a heterogeneous or opposing tendency; for example, the pain of a burn is instantly suspended by cold water, and is not felt while the immersion lasts, but returns with violence when the burnt part is withdrawn from the water; it may be entirely and permanently, that is, radically cured, when there is a great analogy between the last irritation and the first.

Thus, when the action of the remedy, for example, of the artificial irritation applied to a burn, is of quite another nature from that of the morbid irritation, but at the same time has a very analogous tendency, as in the instance of concentrated alcohol, which produces on the lips almost the same sensation as if a flame approached them, the burnt skin, if we uninterruptedly continue the application, will, in some hours in serious cases, and much sooner in slight ones, be found perfectly cured and free from pain; so true is it, that even locally, two irritations



cannot meet in the body, without one suspending the other when they are dissimilar, or without one destroying the other when they are analogous in their manner of acting and their tendency.

Thus, to cure disease, we need only oppose the morbid irritation by an appropriate medicine; that is to say, by another morbid power whose action strongly resembles that of the disease.

As food is requisite for man in a state of health, so have medicines been found salutary in disease; but medicines are never absolutely and unconditionally, *but only relatively beneficial.*

Pure aliment, taken until hunger and thirst subside, preserves the body by repairing the loss which follows the exercise of the vital powers, and does not induce any disorder of its organs, nor does it prove injurious to health.

But the substances to which we give the name of "medicines," are of a nature totally different. They afford no nourishment—they are preternatural irritations—solely destined to modify the amount of bodily health—to injure the vitality and functions of the organs—to produce disagreeable sensations—in a word, to make the healthy sick.

There does not exist a single medicine which has not this tendency; and no substance is a medicine, properly so called, which does not possess it. To this rule there is no exception.

*It is solely through this property of producing a series of specific morbid symptoms in the healthy subject, that medicines can cure disease, that is to say, extinguish the*



*morbid irritation by setting up an appropriate counter-irritation in opposition to it.*

Not unlike, in this respect, to the specific miasmata of diseases (that of the small-pox, of the measles, the venom of the viper, the saliva of rabid animals, &c.), each simple medicine creates its own special disease—a series of determinate symptoms, which no other medicine in the world can exactly produce.

As plants differ from each other in exterior form, in their distinct mode of existence, in taste, smell, &c., as each mineral or salt is classified apart from all the others, as much by its external physical properties, as by its internal properties; so in like manner do medicines differ from each other in respect of their medicinal virtues, that is to say, in their power of exciting disease. Each of them determines a modification of the existing state of health in a manner exclusively its own.

The greater part of the substances belonging to the animal and vegetable kingdoms are medicinal in their raw state. Those which belong to the mineral kingdom are so both when raw and when prepared. Medicines manifest their morbid power and true and absolute operation most clearly in perfect health, provided care is taken to administer each alone, and unmixed.

Several of the most active of these substances have been tried on healthy subjects, and the symptoms they have given rise to have been recorded.

If it be wished to take advantage of this natural guide, and to investigate more deeply this new source of knowledge, it will be necessary to try all medicines successively and cautiously, the strong as well as the weak, removing



carefully all accessories capable of producing any influence whatever, and noting the symptoms the substance gives rise to, in the order in which these appear. Thus, we shall have an exact and absolute picture of the morbid symptoms which each of these medicinal substances has the power of producing in the human body. And thus shall we procure a sufficient store of artificial morbid agents (medicines), to supply us with implements of cure, from which we may make our selection.

Then, after having sufficiently examined the disease which it is proposed to treat, that is to say, noted all the appreciable phenomena in the order of their succession, and having especially marked the most important symptoms, it only remains to oppose to this malady a medicinal agent capable of itself exciting all the symptoms which characterize the disease, or at least the greater part of the severest, and the most important and peculiar, and one that can excite them in the same succession as they occurred in the natural disease, in order to attain a certain, speedy, and permanent cure.

The results of this method, so conformable to nature, is infallible ; it is, without exception, so certain, and its rapidity so much surpasses all expectation, that no other method of treating diseases is at all to compare with it.

But here it is necessary to have regard to the great and important difference which exists between the positive and negative treatment, or, as it is termed, between the radical and the palliative method.

The action of simple medicines on a healthy man, determines, in the first instance, phenomena and symptoms which may be called the positive malady specifically pro-



voked by these substances, or their positive and primitive effect.

When this effect has passed away, there supervenes, by transitions difficult to be perceived, an action precisely contrary to that which took place at first, symptoms directly opposed and negative, which are called the secondary effect.

Now, if we apply to a disease a medicine whose positive or first symptoms possess the greatest analogy with those of the disease, it is then a *positive* or *curative* treatment; there occurs what ought to take place according to the second experimental proposition, that is, a speedy and lasting improvement, which may be perfected by repeating the medicine in doses weaker and weaker, at more and more prolonged intervals, if the first dose, or the two first doses, have not sufficed to effect a complete cure.

In this manner, in fact, we oppose to the unnatural irritation existing in the body, another morbid irritation as analogous as possible, but which, preponderating, extinguishes the former completely, because two preternatural irritations cannot subsist at the same time, in the body of man, and we act here with irritations of the same kind. In truth, we thereby introduce a new malady into the body, but with this difference, as to the result, that the primitive disease has been extinguished by that which we have artificially excited, and that the duration of this last, after the victory it has gained, is much shorter than that of any natural disease whatever, even of the shortest. It is astonishing, that, when the positive or curative medicine corresponds exactly in its primitive symptoms with those of the malady which it is proposed to combat with



it, it does not manifest any of the secondary symptoms of this medicine, and its action ceases entirely at the time we should expect to see its secondary effects commence. If the disease be of an acute nature, it disappears in the course of a few hours, which nature assigns as the duration of the primitive medicinal symptoms, and the only perceptible consequence is—Recovery. There is then a true mutual dynamic extinction. In the most favourable cases, the strength returns immediately, and we see none of those retarding affections which are so commonly observed.

Another fact, not less surprising, is this, that there does not exist a single medicine which, applied in a curative manner, is weaker than the malady to which it is appropriate. No natural morbid irritation resists a medicinal morbid irritation, bearing the greatest possible analogy with it.

If we have made choice, not only of the positive remedy, but have also administered the proper dose (and doses of an incredible minuteness suffice for the curative treatment), the medicine produces at first an aggravation which rarely continues for three hours, and which the patient considers as an *increase* of his disease, but which is nothing more than the manifestation of primitive symptoms, whose intensity is a little greater than those of the disease with which they have generally so great analogy, as to deceive the patient; but he is soon undeceived by the improvement which succeeds. In such a case, the first dose generally suffices to cure an acute disease.

But if the first dose of the well-chosen curative medicine be not a little more powerful than the disease, and



in consequence, the particular aggravation of which I have spoken, do not take place during the first hour, the disease is nevertheless extinguished in a great measure; and it only requires a few more doses, gradually weakened, completely to annihilate it.

If, then, care be not taken always to diminish the doses; if they be continued as strong, or increased in strength, there succeeds to the primary disease which had already disappeared, a kind of artificial medicinal disease, which it is not necessary to excite.

But it is quite different in the palliative treatment, *where a medicine is employed, whose positive and primitive effect is the reverse of the disease.*

Almost immediately after the administration of such a medicine, we perceive a sort of amelioration, an instantaneous ebbing, so to speak, of the morbid irritation, but for a short time, as for example, on the application of cold water to a burn. These medicines are what are called palliatives.

Palliatives only prevent the morbid irritation from acting on the organism, during the continuance of their primary symptoms, because they then produce in the body an irritation which is the reverse of the disease; but afterwards, the reaction, which is contrary to the primary action, coincides with the primary morbid irritation, and aggravates it. During the reaction of the palliative, and when the latter has ceased, the disease gains ground. The pain of a burn is greater when the hand is withdrawn from the cold water, than before its immersion. As, in the curative and positive treatment, there takes place during the first hour a slight aggravation, to which gene-



rally succeeds an amelioration, and a more durable cure ; so in the palliative treatment, we observe, during the first hour, almost instantaneously even, a delusive amelioration, which diminishes every moment, and which, at the expiration of the primary, and purely palliative action, not only leaves the disease to reappear as before the administration of the medicine, but adds to it a slight degree of its secondary effect, which corresponds to the present morbid condition, in proportion as the primary effect was contrary to the pre-existing morbid state.

If it be wished to repeat the palliative, the first dose will no longer suffice ; it is necessary to increase it and to continue incessantly doing so, until the medicine no longer gives relief, or until the united effects of these ever increasing doses have produced evils, which, when they reach a certain amount, often suppress the original disease, by substituting another at least as serious as the former.

Thus, it is not uncommon for a chronic sleeplessness to yield for some time to daily doses of opium taken in the evening, because the primary effect of this substance, which acts here as a palliative, is to cause sleep ; but as its secondary effect is to produce sleeplessness, that is to say, to add to the primary disease, it is necessary continually to increase the dose, until an insupportable constipation, anasarca, asthma, or some other of the consecutive mischiefs of opium, forbid its further exhibition.

But when only a few doses of the palliative are administered against a habitual complaint, and its use is suspended before any grave accessory symptoms are provoked, we shall not be long in being convinced that it



could do nothing in opposition to the primary disease; that, far from that, it aggravates it by its secondary action; and that, consequently, it procures really only a negative relief. Thus, for example, if the person who wishes to be cured of a chronic sleeplessness, complains only of sleeping too little, a dose of opium taken in the evening soon procures him a sort of sleep; but if he ceases after some days to employ this medicine, which acts here only as a palliative, then he can no longer sleep at all.

The employment of medicines termed palliatives, is useful and necessary only in very few cases; in those chiefly where the disease is rapidly developed, and threatens an almost instantaneous danger.

Thus, for example, in asphyxia from freezing, after friction of the skin, and gradual exposure to a temperature increasing in warmth, nothing restores the irritability of the muscular fibre, and the sensibility of the nerves, more than a strong infusion of coffee, whose primitive action is to increase the mobility of the fibre, and the sensibility of all the parts of our body, and which, consequently, is a palliative in this case. But here delay is danger, and there is no sustained morbid state to combat; for as soon as sensibility and irritability are restored, even by a palliative, the organism, which has sustained no injury, returns to its duties, and the play of the functions is resumed, without the necessity of having recourse to any other means.

In the same way, it may occur in chronic maladies, for example, hysterical convulsion, or asphyxia, that the temporary influence of a palliative (as the smell of a burnt feather) is pressingly indicated, solely to restore the



patient to the ordinary state of his illness, which presents no urgent danger, and which requires afterwards (in order to be cured) the action of more durable and entirely different curative medicines.

But when a palliative does not effect in a few hours what is intended, it soon begins to manifest the inconveniences of which I have just spoken.

In acute diseases, even in those which run their course most rapidly, it is more worthy of the dignity of medicine, and more advantageous to the patient, that he be treated by positive and curative means. The triumph over the disease is more sure, and in general more prompt, and without consecutive effects.

However, the bad effects of palliatives are trifling in slight acute diseases. The principal symptoms disappear in a great measure after each dose of these medicines, until the disease has run its natural course, when the organism, which has not had time to be much disordered by the secondary effects of the means which have been employed, returns to its duties, and by degrees overcomes the disease itself, and the consecutive effects of the medicine.

But if the patient be cured during the time in which he makes use of palliatives, he would have been equally cured without any remedy; he would have been cured in the same space of time, because palliatives never shorten the natural period of acute diseases, and he would afterward have more easily recovered, for the reasons I have just given. The fact that palliatives alleviate the most painful symptoms, gives the preference in the eyes of the patient and attendants, but no real advantage. Now, the curative and positive treatment has, even in the diseases



which rapidly run their course, an incontestible advantage over all alleviations which may be obtained by the aid of palliatives, because it abridges the duration of the affection, *really* cures it before it has run its entire course, and leaves no other symptom behind it, provided the remedy has been chosen so as to correspond perfectly with the case.

It may be objected against this method of treatment, that, from the first existence of the science of medicine, physicians have never used it, and that, nevertheless, they have cured diseases.

This objection is only plausible. For, from the beginning of the art of medicine, all sick persons who have really been cured promptly and permanently by medicines, and whose restoration to health has not been the effect of time, of the completion of the period assigned to acute diseases, or of the insensible and gradual preponderance of bodily energy, have been cured, unknown to the physician, by the method which I have just explained; that is to say, by the directly curative action of a medicine.

However, it has occurred sometimes to physicians to suspect, what is now confirmed by a crowd of facts, that the true cure depends on this aptitude in medicines, on this tendency which is inherent in them, to provoke symptoms analogous to those of the disease.\* But this ray of truth has, unfortunately, seldom penetrated the spirit of our schools, enveloped in their cloud of systems.

After the remedy has been discovered, by following the steps traced by Nature herself, there still remains an important point, and that is, to determine the dose. A

\* See the following Chapter.



positive and curative medicine may, without any fault on its part, produce the contrary of what it was intended to operate, when it is employed in too large doses. In such a case, it engenders a disease more powerful than that which before existed.

When the hand is plunged into cold water for some minutes, we feel a diminution of warmth, or, rather, a sensation of cold: the veins disappear, the soft parts shrink, the skin is pale, and motion difficult. These are some of the primary effects of cold water upon the healthy body. But if the hand be withdrawn from the water and dried, before long a contrary state of things begins to take place: the hand becomes warmer than the other, the soft parts swell, the veins project more, the skin is redder, the motion is quicker and more energetic; in a word, there seems an increase of vitality there. This is the secondary or consecutive effect of cold water on the body of the healthy man.

This is also about the most powerful dose of cold water that can be employed as a positive or curative means with a durable success in a state of pure debility, which is analogous to its primary effects on the healthy body. I say the strongest dose, because when the whole body is immersed in this water, and the temperature of the former is very low, it is necessary to abridge the duration of the application, to lessen the dose to a suitable degree.

But if the dose of this remedy be considerably increased in all respects, its primitive effects exasperate the morbid symptoms proper to cold, so as to produce a state of disease which the part we wish to cure of weakness



can with difficulty, if at all, overcome. If the dose be carried to a greater height, if the water be very cold, the surface exposed of great extent, and the duration of the immersion longer than usual, there follows a numbness of the whole limb, cramp of the muscles, sometimes even paralysis; and if the whole body remains an hour or more plunged in cold water, death, or at least asphyxia by freezing, takes place in a healthy man; but it happens in far less time when the action of cold is exerted on an enfeebled body.

It is the same with all medicines, even with those which are administered internally.

The reaper overcome by heat, by thirst, and fatigue, whom a single mouthful of brandy restores in the space of an hour, would fall into a (probably fatal) fever, if, in such a case, instead of a single mouthful, he drank one or two bottles of brandy at once; that is to say, if he took the same positive and curative remedy, but in so excessive a dose as to render it hurtful.

It must not be supposed that this injurious effect of exaggerated doses must belong only to substances employed as positive and curative medicines. Palliatives also produce great inconveniences when the dose is too violent; for medicines are substances hurtful in themselves, which only become remedies by the application, in suitable doses, of their natural tendency to overcome maladies which have a positive or negative analogy with their effects.

Thus, to limit ourselves to the example taken from the negative or palliative means, a frozen hand is quickly restored in the atmosphere of a warm room; this moderate



heat acts here as an antagonist to cold; that is to say, as a palliative, without much injury, because the application is not too strong, and has need only to be employed for a short time, in order to cure the morbid state of weakness which was rapidly developed.

But let the hand, already immovable and insensible with the cold, that is to say, frozen, be plunged suddenly, for an hour, into water at 120 degrees, a temperature which the other hand can well bear, it dies without remedy, gangrene attacks it, and it falls off.

A robust man, violently overheated, is not long of recovering himself in an atmosphere of a moderate heat (about 65° F.), without suffering any appreciable evil from the use of this palliative; but if, in this violently overheated state, he remains for an hour plunged in a river, an immersion which his body, when not overheated, would have borne for the same space of time without suffering from it, he will be taken out dead, or attacked with the most dangerous low fever.

Cold water relieves, as a palliative, a part which has been burnt; but if ice were immediately applied to it, sphacelus would ensue.

It is the same with internal remedies. If a woman, overheated with dancing, drinks a great quantity of iced water, every one knows what the ordinary result is; nevertheless a small spoonful of the same water would have done her no injury, though it is precisely the same palliative, but in a smaller dose. But however overheated she may be, she would be refreshed in a sure and permanent manner, if choice were made of a curative means, whose primary effects correspond with the state



in which she is, and if the remedy were administered in a sufficiently weakened dose; that is to say, if she were made to drink a little warm tea, with a small quantity of spiritous liquor in it, and to walk slowly in a cool room; whilst, on the other hand, a large glass of brandy would throw her into a high fever.

Those only who observe attentively can form an idea of the degree to which the susceptibility of the body, with regard to medicinal irritations, is heightened in a state of disease. This surpasses all belief, when the disease has attained a great intensity. A person attacked by typhus, whom we see lying in a state of coma, insensible to every shock, and deaf to every noise, quickly recovers himself under the influence of a small dose of opium, though it be a million times weaker than has usually been prescribed.

The sensibility of a very diseased body for medicinal stimulants is carried, in many cases, to such a height, that we see that the body, in this state, is acted on and excited by powers whose existence has been almost denied, because they do not act on a healthy man, nor in maladies which have no affinity for them. I shall cite here, as an example, the power of animal magnetism, of this immaterial influence of one living human body over another, which exercises itself in certain modes of contact, or *quasi* contact, and produces so energetic an excitement over those persons whom a delicate constitution and a great sensibility render very susceptible of impressions, as well of lively emotions as the movements resulting from a very high developed muscular irritability. This animal power does not display itself in the least between



two healthy and robust men, not because it does not exist, but because it is much too feeble to be able to manifest itself in healthy persons, whilst it often acts with only too much intensity on a morbid state of sensibility and irritability, as do also the smallest doses of other curative medicines, in a very diseased subject.

It is the same with applications of the magnetic wire, and with the contact with other metals, to the medicinal effects of which a person in a state of health is absolutely insensible.

On the other hand, it is no less true than surprising, that the most robust persons, when attacked by chronic diseases, cannot, notwithstanding the strength of their constitution, and though they can bear without injury many hurtful and energetic irritations, such as excess in eating and drinking, or the abuse of purgatives,—they cannot, I say, take the smallest dose of the positive medicine which suits their case, without feeling the effects of it as strongly as an infant at the breast.

There is, in medicine, a small number of substances which act almost solely in a chemical manner; some (as tannin) corrugate the living fibre, as well as the dead; some (as oils) diminish rigidity; others may be chemical antidotes to hurtful substances which exist in the body, or at least in the “*primæ viæ*” (as chalk or the alkalies neutralize deleterious acids in the stomach, or as hydro-sulphuretted water combines with certain metals and their oxides); others, again, may decompose these substances (as alkalis and *hepar sulphuris* do poisonous metallic salts); others (as the actual cautery) chemically destroy parts of the body. If we except these few sub-



stances, the operations (for the most part mechanical) of surgery, and some injurious and insoluble bodies which are introduced from without into the economy, other medicines act in a manner purely dynamic, curing without provoking evacuations, without occasioning violent or even appreciable revolutions.

Almost the only necessary condition, in order that the effect should develop itself fully, and lead to the cure, is, that the suitable medicine be brought into contact with the living and sensible fibre; but it is of little consequence, how weak the dose is, which, with this intention, is brought to bear upon the sensible parts of the living body.

If a certain small dose of greatly diluted tincture of opium is capable of removing an unnatural propensity to sleep, the hundredth part, the thousandth even of this dose, is sufficient always to attain the same end, and the dose may be yet much more attenuated without the weakest ceasing to produce the same curative effect as the first.

I have said that almost the only condition for the due action of the medicine is, to place it in contact with the living and sensitive fibre. This dynamic property reaches such a length, that it is indifferent to the result with what part the contact takes place, provided only that the part be deprived of the epidermis. It matters little whether the dissolved medicine reaches the stomach, remains in the mouth, or is applied to a wound, or to any part denuded of its skin.

When there is no fear of evacuations (a particular vital disposition of the organism, which has the special



power of destroying the dynamic energy of a medicine), the introduction of this last into the rectum, or into the nose, fully answers the views of the physician; that is to say, that if it has the power at all, it cures no less efficaciously a certain pain in the stomach, a particular kind of cephalalgia, a species of stitch in the side, a cramp in the calf of the leg, or any other ailment seated in a part which has no sort of anatomical connexion with that to which it is applied.

It is only the epidermis with which the surface of the body is covered, that opposes any obstacle to the action of medicines upon the sensible body which it covers; but this obstacle is not insurmountable.

Medicines act through the epidermis, only they have less power. Their action is weaker when they are in powder, more energetic when they are dissolved, and so much the more powerful in this latter case, as the solution is extended over a greater surface.

However, the skin is thinner in some parts, when consequently the medicine acts with greater facility. Such are the abdomen, the pit of the stomach, the groin, the armpits, the bend of the arm, the inner part of the wrist, the inner part of the ham, &c. These parts are the most sensible to the action of medicines. Friction contributes little more to favour the action of medicines, than rendering the skin more sensible, and the fibre more susceptible of being impressed by the specific medicinal power, which from thence radiates throughout the entire organism. If the thighs are rubbed so as to heighten the sensibility, and mercurial ointment imme-



diately applied, the result is the same as though these parts had been rubbed with the ointment.

The specific virtue of medicines remains the same, whether employed internally or externally, so as they are put in contact with the sensible fibre, either within or without.

The black oxide of mercury taken by the mouth cures venereal bubo, at least as quickly and surely as friction on the thighs with the Neapolitan ointment. The immersion of the feet in a very weak solution of corrosive sublimate, cures ulcers in the mouth as rapidly and as surely as the reception of this liquid into the stomach, particularly if care is taken to rub the parts before bathing them.

The powder of cinchona applied to the abdomen cures the intermittent fever, which this medicine has the property of curing when taken internally.

But as the diseased organism is generally much more sensible to the dynamic action of medicines, so the skin also of sick persons is more so than that of those in health. A small quantity of the tincture of ipecacuanha applied to the bend of the arm, is sufficient to remove the inclination to vomit in very sick persons.

The medicinal power of heat and of cold only seems not to be so exclusively dynamic as that of other medicines. When these two agents are employed as positive remedies, the smallest possible dose does not suffice to produce the effect. It is necessary that both be stronger and in larger quantities (to a certain extent), if it is wished that their salutary action be rapidly accomplished.



But this appearance is fallacious. The power of cold and of heat is not less dynamic than that of other medicines, and the difference arises from our bodies being already habituated to the influence which they exercise in certain quantities. That cold and heat may fulfil the offices of medicines, it is necessary to carry them beyond the accustomed degree a little, if they are to have a positive influence, much more if we have in view only a negative or palliative effect.

A heat equal to that of the blood is, for most of the inhabitants of our climates, greater than they are accustomed to, so that a foot-bath at 98° or 99° F., is warm enough to remove, in a positive manner, heat in the hand; but if we wish to procure a palliative relief in a case of burning, we must use water much colder than that with which we are used to bathe the healthy parts of our body, and so much the colder (within certain limits, however), the more violent the inflammation is.

What I have just said in relation to the necessity of slightly increasing cold and heat when they are employed as curative means, applies also to all other medicines which the sick person has been in the habit of using. Thus, with persons who are accustomed to the use of wine, brandy, opium, coffee, &c., these substances must be given in rather stronger doses than those which they have habitually taken.

Heat, cold, and electricity, belong to the category of the most diffusible medicinal dynamic stimuli. The epidermis can neither diminish nor arrest their action, probably because this membrane serves in some measure as a vehicle and conductor. It is doubtless the same with



regard to animal magnetism, the medicinal action of the magnetic wire, and, in general, to the power exercised by the application of metals externally. Galvanism seems to penetrate with a little less facility through the skin.

An attentive observer of Nature is soon ready to acknowledge that she works great effects with simple and often very feeble means. To imitate her in this should be the aim of the efforts of the reflecting mind. But the more we heap together the means of attaining a single end, the more we wander from our model, and the meaner are the results at which we arrive.

With a small number of simple means, employed one after the other, but oftener still with one alone, we can restore the greatest disorders of the diseased economy to the natural state of harmony,—we can cure, and often in a very short time, the most chronic, and apparently incurable disorders, whilst, under the influence of means ill-chosen and mingled together, we see the most trifling maladies degenerate into distressing, serious, and incurable diseases.

Which of these two methods will the artist of healing, who strives after perfection, choose?

It is always in the power of a single simple remedy, free from all mixture, to produce the most salutary effects, provided that it be well chosen, as the most appropriate, and administered in the suitable dose. It is never necessary to employ simultaneously two remedies.

We give a medicine in order to destroy the whole disease by the help of this single substance, or, if this cannot be completely attained, in order to see, after the



remedy has exhausted its action, what are the abnormalities which still remain to be combated. One, two, or at most three, medicines suffice to annihilate the most inveterate disease. If no cure takes place, it is we who are to blame; the fault is neither with nature nor the disease.

If we wish to judge of what a remedy effects, and still leaves to be done in a disease, we need only give one single simple medicine at once. Any addition whatever only disturbs the aim we have in view, and as, even were it possible for us to know exactly the action of a simple remedy, it would not be possible for us to estimate the combined powers of a mixture of medicines, partly decomposed by each other, we are not in a position, when we wish to separate the effects of the remedies from those of the morbid symptoms, to distinguish, among the unexpected changes, which of them should be ascribed to the malady, and which depend on some one of the ingredients; consequently, also, we cannot know which of these drugs ought henceforth to be abandoned or continued, nor what substance ought to be substituted for one or the other, or for all. In such a course of treatment, no phenomenon can be referred to its true cause. To whatever point we direct our attention, we find nothing but uncertainty and obscurity.

The greater part of the simple medicinal substances determine, in a healthy man, a series of positive symptoms, often of great extent. The appropriate medicine may then often include, in its primitive effects, the type of most of the appreciable symptoms of the malady which



we wish to treat, with many other analogous types which render it equally fitted to cure other maladies.

Now, the only thing we have to desire is, that a medicinal agent agrees with, or, in other terms, that it has in itself the power of producing most of the symptoms we discover in diseases ; that, consequently, it is in a position, when employed as a counter-irritant, in the form of medicine, to destroy or extinguish these same symptoms in the diseased body. We see that a single simple substance possesses this property in all its sufficiency, when it is carefully chosen for that object.

It is never, then, necessary to employ more than one simple medicine at a time, when one is found which is well adapted to the morbid case.

It is very probable, nay even certain, that, in a mixture of several medicines, each of them separately exercises no longer its own peculiar action on the malady, and cannot, disturbed as it is by others, exert the specific tendency belonging to it, but that one antagonizes the other, and that all modify or mutually destroy their own effects ; so that the concurrence of several agents, decomposed by one another in the body, gives rise to an intermediate resultant not to be desired, since it cannot be known or even conjectured beforehand.

In fact, experience teaches us that one general irritation extinguishes or represses another, according as there is between them analogy or opposition, or a great difference in intensity ; when several medicines act together on the body, the action of some partly destroys that of others, and all that remains to attack the malady is that



remnant of the action which has not been antagonized by the combination. Now, we cannot know if this remnant action be suitable or not, because we have no means of arriving at the knowledge of what this will be. All morbid causes whatever never requiring more than one simple medicine, no master of the art of healing, worthy of the title, will dream of having recourse to mixtures, and thus defeat his very object. On the contrary, it will be an infallible sign that he knows his duty, if he prescribes but one well selected substance which fails not to effect a speedy, mild, and permanent cure.

If the symptoms are slight, and few in number, it is an insignificant ailment, hardly requiring the use of medicine, and which a change of diet alone will suffice to cure.

But if we perceive only two or three serious symptoms, a circumstance of rather rare occurrence, the case is more difficult than when there are a great many. It is not easy to prescribe at first the remedy that is perfectly suitable; it may be because the patient is not able to describe with the necessary accuracy all he feels; it may be that the symptoms themselves are not well marked or apparent.

In this uncommon case, we prescribe one, or at most two doses of the medicine we consider the most suitable.

It happens sometimes that this medicine is precisely the most suitable; but, as it oftener happens that it is not the one that should have been employed, we discover afterwards symptoms which till then had been unperceived, or which have more fully developed themselves. These symptoms, appreciable though weak, may help to give a more exact picture of the disease, and then we



shall have greater certainty in choosing the appropriate remedy.

The repetition of the doses of a medicine is regulated by the duration of its action. If it acts in a positive or curative manner, an amelioration is manifested when it has exhausted its influence, and a second dose destroys the remains of the disease. Some hours may elapse, without inconvenience, between the cessation of the action of the first dose and the administration of the second. The part of the disease already overcome will not renew itself; and even when the patient is allowed to remain several days without medicine, the amelioration, owing to the first dose, continues not the less sensibly.

Far, then, from its being improper to wait a little time in such a case, repeating the dose too soon may rather prejudice the cure; because the new dose may produce the effect of an augmentation of the first, and in that way become very hurtful.

I have already said, that the weakest possible dose of a positive medicine suffices to obtain a full and entire effect. If it is a substance the action of which lasts a long time, as that of digitalis, which is prolonged to the seventh day; if the dose be repeated three or four times a-day, the absolute quantity of the medicine, which, before the expiration of the seventh day, is twenty or thirty times greater, cannot fail to be injurious, because a twentieth or thirtieth of this quantity would have sufficed to effect a cure.

After the first dose of the medicine employed as a curative means, has exhausted its action, we examine if it be necessary to prescribe a second. If the malady has diminished in all respects, not only during the first half



hour which has followed its administration, but later, throughout the whole duration of the action of the first dose, and the diminution has become the more sensible as this duration approached its term ; or even if, as happens sometimes in very chronic maladies, sometimes in those the return of whose paroxysms does not take place during this lapse of time, no sensible amelioration manifests itself, but still no other new symptom of consequence is displayed, then it is almost always certain, in the first case, and probable in the second, that the medicine was appropriate, and of positive sanative virtue. And we ought to prescribe a second, sometimes even a third dose, if circumstances require it, and if the first dose has not produced a complete cure, as it often does in acute diseases.

When the medicine of which we have made choice to obtain a positive cure, excites hardly any symptom which has not been before observed, we conclude from that, that it is the suitable remedy, and will with certainty cure the primitive malady, even though the patient and attendants perceive no appearance of amelioration ; and, conversely, when the curative remedy ameliorates the primary malady in all its extent, it cannot produce any troublesome symptom.

All aggravation of a disease which supervenes on the use of a medicine, all addition of symptoms which have not, until then, pertained to this malady, belong solely to the action of this medicine, when they are not manifested a few hours before inevitable death, or when they are not a consequence of errors in diet, a violent excitement of some passion, or an irresistible disturbance of nature, attending the period of life. There are symptoms of me-



dicinal disease which injure and annoy the patient, either because the medicine has not been well chosen to cure positively, or because it has been employed too long, or in too great quantity, as a palliative.

An aggravation of the malady, by new symptoms of great intensity, during the action of the two first doses of a curative remedy, does not shew that the dose has been too feeble, and that it ought to be augmented, but proves that the medicine was not appropriate to the morbid state against which it has been employed.

This addition of violent symptoms, foreign to the disease, resembles in nothing the aggravation I have spoken of above, which the primitive morbid symptoms experience during the first hours following the administration of a positive or curative remedy.

This phenomenon, due to the predominance of the medicinal symptoms, only shews that the remedy, otherwise well chosen, has been employed in too large a dose; and if the dose has not been enormous, it disappears at the end of two, three, or at most four hours, giving place to a lasting re-establishment of the health, which is restored almost always before the expiration of the term fixed for the action of the first dose, so that a second is generally unnecessary in acute diseases.

Nevertheless, there is no positive remedy, however well chosen, which may not excite slight new symptoms during its use, in very irritable or very sensitive patients, because it is almost impossible that there can be the same resemblance between the symptoms of a medicine and those of a disease, as between two triangles whose angles and sides are equal. But the innate energy of the vitality more



than suffices to overcome this slight aberration, which is not even perceived, unless the patient be of excessive delicacy.

If a sick person, endowed with ordinary sensibility, feels, during the action of the first dose, some small symptom which he had not noticed until then, and at the same time the primary malady seems to decrease, it is not possible, at least in a chronic disease, to know exactly by this first dose whether the remedy which has been chosen has really a curative action. It will be necessary, after this dose has exhausted its action, to give a second of the same, the result of which can alone decide the question. This time, if the medicine be not perfectly appropriate, we shall perceive another symptom arise, not the same as at the first time, but almost always another, sometimes several, of a greater intensity, without the cure of the disease, considered as a whole, having made any appreciable progress. If, on the contrary, the medicine agrees, this second dose effaces almost the whole trace of the new symptoms, and the cure proceeds at a rapid pace, without any fresh obstacles arising.

However, if the second dose provokes the manifestation of some new and unimportant symptom, and no more appropriate medicine can be found, from the unskilfulness of the physician, or the insufficiency of the means whose effects have hitherto been studied, the new symptom may still, in chronic maladies, and in acute affections, which do not run their course very rapidly, be got rid of, and a cure obtained, though more slowly, by diminishing the doses. In such a case, the energy of the vitality comes to aid.

It is no proof of the bad selection of a medicine, when



its primary effects extend themselves in a positive manner only to the principal symptoms of a malady, acting but as a palliative on others of a less degree of intensity. In such a case, the true curative power of the medicine always triumphs, and the constitution enters upon its full possession of health, but without concomitant suffering during the cure, or secondary disease after it. Experience has not yet decided whether it be proper to increase the dose of the medicine, when it is necessary to repeat it.

In a chronic malady, when, in continuing the use of a curative medicine without increasing the dose, there arise new symptoms which do not belong to the primary malady, as the first two or three doses acted without such inconvenience, we are constrained to seek the cause of this disturbance, not in the bad choice of the remedy, but in the regimen, or some other powerful external cause.

If, on the contrary, the positive remedy have been chosen in perfect affinity with the carefully studied morbid case; if a sufficiently attenuated dose have been prescribed; if it have been repeated, if necessary, after the first dose has exhausted its action, acute or chronic maladies, however grave or inveterate they may be, are cured in a manner so rapid, so complete, and so insensible, that the sick person seems to pass almost suddenly to a state of health, as by a sort of new creation; but for this it is necessary that the treatment be not counteracted by any sudden change in the system, by violent passions, by violations of dietetic rules, or by a disturbance of the vital organs.

The influence of regimen and the habits of life on the cure must not be forgotten, but it is only in chronic ma-



ladies that the physician need take the direction of them ; for in acute affections, with the exception only of a state of complete delirium, an infallible instinct speaks in terms so clear and precise, that it suffices to direct the sick person and the attendants, not to counteract the views of nature by contradictions or misplaced entreaties.



## CHAPTER IV.

ON THE HOMŒOPATHIC ACTION OF CERTAIN REMEDIES  
IN ORDINARY USE, AS ILLUSTRATED IN THE AD-  
MINISTRATION OF AGARICUS MUSCARIUS: CLEMA-  
TIS: DULCAMARA: COPPER: IN THE TREATMENT  
OF BURNS: IN THE ADMINISTRATION OF ARSENIC:  
MERCURY: TARTAR EMETIC: IODINE: NITRIC ACID:  
PLATINUM: GOLD: CUBEBS: CANTHARIDES: APIUM  
PETROSELINUM: COLOCYNTH: OXALIC ACID: MIL-  
LEFOLIUM: TEA: SULPHUR: OPIUM: RHUS TOXI-  
CODENDRON: IPECACUANHA: SENEGA: STRAMO-  
NIUM: ACIDS, IN CUTANEOUS AFFECTIONS: CITRIC  
ACID IN SCURVY.

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THE reader having now become familiar with the origin and progress of Homœopathy in the mind of Hahnemann, may naturally suppose, that if this law be of such general application, and so fundamental to successful treatment, that there must be frequent instances of its operation in ordinary practice. A similar suggestion led Hahnemann to seek, in the present system of practice, for corroborative evidence of the therapeutic law—*Similia similibus curantur*. With his usual industry and careful research, he has collected a great mass of instances, in which the physiological and therapeutic actions of the medicine, and the symptoms they remove, stand in the



relation of similarity. A few of these examples are here given; and we are restrained from giving more, not because the instances in themselves are deficient, but because the sources from which they are drawn being almost entirely foreign, and of an old date, they might not, perhaps, have the same weight with the reader.

The English sweating sickness, which first exhibited itself in the year 1485, and which was more destructive than the plague itself, carried off in the commencement (as testified by Willis) ninety-nine patients out of a hundred, could not be subdued until such time as physicians had learned to administer sudorifics to patients affected by it. Since that time, as Sennertus\* observes, few persons died of it.

The hurtful effects which some writers, among others Georgi,† ascribe to the use of the *Agaricus muscarius* by the inhabitants of Kamtschatka, and which consist of tremor, convulsions, and epilepsy, became a salutary remedy in the hands of C. G. Whistling‡, who used this mushroom with success in cases of convulsions, accompanied with tremor, likewise in those of J. C. Bernhardt§, who used it with success in a species of epilepsy.

It has been attested by Murray, Hillary, and Spielmann, that *Senna* occasions colic, and produces, according to C. Hoffmann¶ and F. Hoffmann§, flatulency and general

\* De Febribus, iv. cap. 15.

† Beschreibung aller Nationen des russischen Reich., pp. 78–267 281, &c.

‡ Diss. de Virt. Agaric. Muscar. Jena. 1718, p. 13.

§ Chym. Vers. und Erfahrungen. Leipzick, 1754. Obs. 5, p. 324, Gruner, de Viribus Agar. Musc. Jena. 1778. P. 13.

¶ De Med. Officin. lib. i., cap. 36. § Diss. De Manna, p. 16.



excitement, ordinary causes of insomnolency. Detharding states that he was enabled to cure, with its aid, patients afflicted with violent colic and insomnolency. Stœrck\* cured a general chronic eruption with the clematis, having himself ascertained that this plant has the power of producing a psoric eruption over the whole body†.

The Dulcamara, according to Carrère, has cured the most violent diseases emanating from colds. Carrère,‡ and likewise Stœrck, have observed that this herb, in cold and damp weather, frequently produces similar affections. Fritze|| saw the dulcamara produce convulsions, and De Haen¶ witnessed the very same effects, attended with delirium. On the other hand, convulsions, attended with delirium, have yielded to small doses of the dulcamara, administered by the latter physician. Carrère,§ Fouquet,\*\* and Poupart,†† have attested the efficacy of dulcamara in a species of darts. Carrère, saw the use of this plant excite darts, which covered the entire body during a fortnight; and on another occasion, when it produced the same on the hands, and a third time when it fixed itself on the labia pudendi.

The convulsions which are caused by the administration of Copper, and those observed by Tondi, Ramsey,

\* Lib. de Flamm. Jovis. Vienna, 1769. Cap. 13.

† Ibid. p. 33.

‡ Carrère und Starke, Abhandl. ueber die Eigenschaften Nachtschattens oder Bitter suesses. Jena, 1766. Pp. 22-23.

|| Annalen des Klinischen Instituts, iii. p. 45.

¶ Ratio Medendi, tom. iv. p. 223. § Ibid. tom. iv. p. 92.

\*\* Tables Nosologiques, in Raouz.

†† Traité des Darts. Paris, 1782. Pp. 184, 192.



Fabar, Pyl, and Cosmier, as proceeding from the use of aliments impregnated with copper ; the reiterated attacks of epilepsy which J. Lazerne\* saw result from the accidental introduction of a copper coin into the stomach, and which Pfündel saw produced by the ingestion of a compound of sal ammoniac and copper into the digestive canal, sufficiently explain how copper has been able to cure chorea, as reported by R. Willan†, Walcker‡, Theupink||, and Delarive¶, and why preparations of copper have so frequently effected the cure of epilepsy as attested by Batty, Baumer, Bierling, Boerhaave, Causland, Cullen, Duncan, Feuerstein, Hevelins, Lieb, Magennis, C. F. Michaelis, Reil, Russel, Stéssen, Thilenius, Weissmann, Weizenheyer, Withers, and others.

We now direct the attention of the reader to several instances, selected from well known modern authors, and whose works are easy of access ; and in order to facilitate comparison between the morbid or pathogenetic effects of the remedy, and its curative or therapeutic, the latter are ranged in the left hand column, and opposite to them, on the right hand, the former are enumerated.

But before proceeding with these we give a few instances which do not admit of being printed in that manner.

Individuals who undergo great fatigue, are well aware

\* De Morbis internis capitis. Amsterdam, 1748. P. 253.

† Sammlung Auxarles. Abhandl. xii. p. 62.

‡ Ibid. xi. iii. p. 672.

|| Waarnemingen, No. 18.

¶ Kuhn's Phys. Med. Journal. Jan. 1800. P. 58.



that the heat and thirsts they experience are much more permanently relieved by hot drinks or a little spirits, than by drinking cold water. Blacksmiths and cooks, on burning their fingers frequently relieve the pain by exposing the burnt part to the fire for a short time.

‘Alcohol is one of the best remedies for burns of every description. On the first application it appears to increase the pain, but the latter is soon allayed, and gives place to an agreeable sensation of calm and tranquillity. This method is never more efficacious than when the whole part is plunged into alcohol; but where the immersion is not practicable, it is requisite to keep the burned part continually covered with pledgets imbibed with this liquid.’—(B. Bell, System of Surgery.)

Alcohol, in the above instance, cannot be beneficial, owing to the cold it produces on evaporation, because its success is greatest when the burned part is immersed in the liquid.

John Bell having to treat a lady who had scalded both arms with boiling liquid, covered one with the oil of turpentine, and plunged the other into cold water. The first was no longer painful at the expiration of half an hour, while the other continued so during six hours. The moment it was withdrawn from the cold water, the patient experienced far greater pain; and it required much longer time to cure this arm than it did to heal the other.

Mr Anderson likewise treated a woman who had scalded her face and arm with boiling fat. ‘The face, which was very red and painful, was covered with oil of turpentine, a few minutes after the accident; as for the



arm, the patient had already plunged it, of her own accord, into cold water, and expressed a desire to await the result of this treatment for a few hours. At the expiration of seven hours the face was better, and the patient relieved in this part. With regard to the arm, around which the water had been several times renewed, it became exceedingly painful whenever it was withdrawn from the water, and the inflammation had manifestly increased. The next day I found that the patient had suffered extreme pain in the arm; inflammation had extended above the elbow, several large blisters had burst, and a thick eschar had formed itself upon the arm and hand, which were then covered with a warm cataplasm. The face was no longer painful, but it was necessary to apply emollients a fortnight longer to cure the arm.' (Kentish, Second Essay on Burns, p. 43.)

## ARSENIC.

It will be admitted by all that this medicine has been often found successful in intermittent fevers (Fowler's Reports, &c., Lond. 1736); and considered by some preferable to quinine, when the disease is attended by inflammatory determinations (Cyclop. of Pract. Med., vol. ii., p. 220.)

Among the symptoms produced by arsenic, Boudin thus writes,— ' Quelquefois augmentation de la force et de la fréquence du pouls, qui diminue ensuite.— M. Biott avait remarqué dans ces changemens de pouls, *une sorte de périodicité*' (Boudin's own italics.) ' Pour mon compte j'ai vu survenir une fièvre intermittente quotidienne, que je fus obligé de combattre par la quinine, chez un de mes malades, qui, pour cause d'ichthyose, avait pris vingt-quatre centigrammes' (about 5 grains) ' d'acide arsénieux en douze jours. . . . Sa fièvre intermittente se manifesta à une époque, où aucune maladie semblable ne regnait en ville.' (Traité des Fièvres Intermittentes)



Dr Rush, in speaking of Dr Martin's specific, which was chiefly composed of arsenic, says,—‘In several cancerous ulcers, the cures he performed were complete.’ In Cooper's Surg. Dict. (5th edit. p. 284), we find that ‘Justamond thought arsenic a specific for cancers. It unquestionably cures numerous ill-looking sores on the face, lips, and tongue, and is one of the best remedies for lupus.’†

Mr Hill observes, “Experience has furnished him with some substantial reasons for considering arsenic as a medicine of considerable merit in true scirrhus tumour.” (Edin. Med. and Surg. Journ. vol. vi. p. 58.)

Arsenic is much vaunted in many cutaneous affections.

‘Much benefit will be derived (in obstinate cases of nettlerush)

\* No objection can be made in this case to the authority of Hahnemann, as he is frequently quoted by Dr Christison in his Article on Poisoning by Arsenic.

Dr A. Thomson, in talking of arsenic as a tonic in intermittent fever, adds,—‘It is not easy to explain the manner in which it produces its beneficial effects, as it sometimes produces symptoms at variance with our notions of those which follow the exhibition of a tonic, and yet it cures the disease.’

† ‘In such cases arsenic is not to be regarded as a mere caustic; for other and far more powerful agents of this kind are generally useless. It sets up a new action in the part incompatible with that of the disease.’ (Pereira, Mat. Med. vol. i. p. 647.)

tes, par J. C. M. Boudin. Paris, 1842.)

This is confirmatory of the pathogenetic effects of arsenic, as collected by Hahnemann,\* who states that it causes tertian, quartan, sometimes daily fever, the symptoms of which closely resemble ague. (Mat. Med. trad. par Jourdan, tome i. p. 414, *et seq.*)

Dr Paris states, that ‘the influence of the arsenical fumes is very apparent in the condition both of the animals and vegetables in the vicinity. It deserves notice, that the smelters are occasionally affected with cancerous disease of the scrotum, similar to that which affects chimney-sweeps.’ (Pharmacology, 7th edit., vol. ii., p. 96.)

Dr Pereira says,—‘The fumes from these works (where arsenic is sublimed) are most injurious to neighbouring vegetables and animals. In the human subject, eruptions, principally about the lips and nose, are produced by them.’ (Mat. Med. part. i. p. 375.)

Hargens noticed ulcers with burning pains from the internal use of arsenic; and also ulcers which bleed easily, and have a thin scab. (Hufeland's Journ. Part xx. p. 1.)

Heinge saw a cancerous ulcer, caused by arsenic, which progressed to such an extent, that the leg affected was obliged to be amputated. (Hufeland's Journ. Oct. No. 1813, p. 38.)

Fowler observed an eruption caused by arsenic, which resembled *urticaria*. (Fowler's Reports, &c. p. 97. Lond. 1786.)



from small doses, gradually increased, of Fowler's arsenical solution.' (Library of Prac. Med. vol. i. p. 476.)

'In chronic affections of the skin, particularly the scaly diseases, eczema and impetigo, arsenic is one of our most valuable agents.' (Periera, Mat. Med., 2d edit. vol. i. p. 645.)

'The sensation of tingling in various parts of the surface, which at the same time not unfrequently exhibits an erythematous or vesicular eruption, are very common effects from the internal use of arsenical preparations.' Med. Chir. Rev., Oct. 1835, p. 421.)

In a case of poisoning, reported by Dr Desgranges, the body, especially the hands and feet, were covered with a considerable eruption of small pimples, with white heads like millet. (Foderé, vol. iv. p. 123.)

Dr Erischen, in describing the action of arsenic, says, 'Girdlestone has remarked, that in some cases the skin assumed a uniform lobster-red colour, that erysipelas comes on, that phlyctenæ and pustules make their appearance when the arsenic disagrees. I have very frequently had occasion to observe, that diseases of the skin for which the medicine may have been administered, more particularly if it be a case of chronic eczema, has evinced a decided tendency to increased action; the patches becoming red and irritable, shewing that the integuments partake in the excitement that is induced in the system generally, by the employment of these preparations.' (Lon. Med. Gaz., 1842-43, p. 200.)

It is sometimes given with advantage in chorea and other affections of the nervous system.

Dr Periera mentions the following as some of the effects of long-continued small doses: 'Headach, giddiness, and want of sleep are frequently observed. The limbs become painful, feeble, trembling, subject to convulsions, occasionally benumbed, and ultimately paralysed.' (Mat. Med., 1st edit., part i. p. 387.)

'It has occasionally proved useful in symptomatic epilepsy.' (Dr A. T. Thomson, Mat. Med. p. 517.)

Used also by Pritchard (Diseases of Nervous System); also by Pearson and Brugnatelli.

'Periodical epilepsy cured by

A good example of epilepsy supervening on the administration of arsenic has been minutely related by Dr Roget. The usual inflammatory symptoms continued until the fifth day, when the patient was suddenly seized with



arsenic, by Dr Macdonald.' (New York Journ. of Med. and Surg., Jan. 1841.)

'A seaman, 24 years of age, had been subject to epileptic fits, which occurred regularly twice a-day, and had resisted all the more ordinary modes of cure. Quinine had also been administered on account of the periodicity, but was of no avail. Fowler's solution of arsenic was then given, in the dose of four drops, three times a-day. In three days the fits were postponed, and slighter. At the end of other three days he had a very violent one, after which they did not return for a whole week. The extraction of a tooth at this period brought on a slight paroxysm, but after this he had none for nine days, when the medicine was discontinued, on which they returned, but ceased again as soon as it was resumed.' (Edin. Med. and Surg. Journ., Jan. 1842, p. 255.)

convulsions of the left side, foaming at the mouth, and total insensibility. The convulsions endured two hours, the insensibility throughout the whole night. Next evening she had another and similar fit. A third, but slighter, occurred on the morning of the tenth; another next day at noon; and they continued to return occasionally till the nineteenth day. (Christison on Poisons, 1829, p. 125; also Lond. Med. Chir. Trans., ii. p. 134.)

Out of five individuals poisoned by eating of a dumpling in which arsenic had been mixed, one had an epileptic fit on the first day, which returned on the second; another had tremors of the right arm and leg on the first day, and several epileptic fits in the course of the night. During the next fifteen days he had a paroxysm every evening about the same hour, which, after an intermission of eight days, returned, and continued to appear frequently for several months. (Christison, *loco cit*, p. 226; also Edin. Med. and Surg. Journ. xiii. p. 507.)

### MERCURY.

It is the opinion of the large majority of medical men that mercury is necessary in the treatment of syphilis; some may give it as a specific, others in small quantities, alternated with aperients, or it may be applied as a mercurial lotion to the part.\*

'Persons long or habitually exposed to fumes of quicksilver, are generally afflicted with ulcerations of the mouth and fauces; painful affections of the periosteum, joints, limbs, and ligaments, particularly after exposure to cold; eruptions on the surface of the body, and all the affections to which the term *pseudo-syphilis* has been applied.' (Copland's Dict. Prac. Med. part i. p. 125.)

\* A most minute quantity of mercury is sufficient to affect the system. Dr Macintosh, after describing some remarkable cases, says,—'Since that period I have applied the black-wash to above forty cases of all descriptions of ulcers on the penis, and in *two-thirds* of these some degree of soreness in the mouth has been produced with considerable mercurial fetor, in the space of from the fifth to the tenth day. It was then calculated that the *hundred-thousandth part of a grain of mercury* could not have been received into the system.' (Pract. of Physic, voll. ii. p. 299.)



'Black wash has in milder cases (of cancrum oris) proved very beneficial.' (Maunsell and Evanson, *Dis. of Children*, p. 216.)

'In the modified form of croup, when it assumes somewhat of the aspect of angina maligna, the pharynx and fauces being covered with grey sloughy ulcers, calomel in full doses is the only resource to be depended upon.' (Thomson, *Mat. Med.* p. 277.)

'Mercury is of more service in this than the acute kind of laryngitis, because there is generally time for it to act; it should be given to an extent sufficient to cause some soreness of the gums, and very soon after this effect is produced we shall observe a notable change in the symptoms.' (Ryland, *Dis. of Larynx*, p. 112.)

'Dr Alison tells us, that many practitioners of this country, since the time of Hr Hamilton, have been firmly convinced that there is a peculiar, a specific virtue in mercury, in arresting inflammation.' (*Library of Prac. Med.* vol. i. p. 151.)

Numerous other eminent authorities admit that mercury produces all the symptoms of syphilis, ulcers in the throat, copper-coloured blotches, nodes, &c. (Patisier, *Traité des Maladies des Artisans*. Paris, 1822. Merat in *Dict. des Sciences Medicales*, tome vi. Dr Murphy in *Med. Chir. Rev.*, Oct. 1839, p. 483. Bedingfield's *Compendium of Practice*, p. 170. Eberle's *Practice*. vol. i.)

'But the disease which is most likely to be mistaken for the effects of mercury is gangrene of the mouth, commonly called cancrum oris.' (Periera, vol. i. p. 708.)

Dr A. Thomson (*Mat. Med.* p. 271) says, 'it excites inflammation of the heart and lungs, and the salivary glands.' At p. 280, in mentioning its excessive use, 'it produces much swelling of the tongue and inside of the cheeks, swelling and ulceration of the tonsils, the formation of sloughing ulcers, fever,' &c.

'According to Mr Laurence, Mr Porter, and Mr Wood, the action of mercury leads to a state of system in which chronic laryngitis is very apt to occur.' (Ryland, *loc. cit.*, p. 98.)

Dr Francis says, 'mercury is one of the most universal stimulants. When taken into the system, it manifests itself by a quickened circulation, gives the blood the disposition to take on the buffy coat when drawn, renders the pulse frequent and hard, increases respiration, excites the temperature of the body, occasions a whitish fur upon the tongue, and other symptoms of general inflammatory action.' (*American Med. Register*, vol. iv. p. 494.)

Hunter observed that it 'quick-



'The employment of mercury, in inflammation of the bowels, is as important as in any other form of inflammation, and, next to blood-letting, holds an important rank. Calomel or hydrargyrum cum creta may be given alone, or associated with opium, according as the bowels are confined or loose.' (Maunsell and Evanson on Dis. of Children, 1st edit. p. 263.)

It is unnecessary to quote authorities that mercury is given with great success, that it is by many considered the sheet anchor, in dysentery.

ens the pulse, increases its hardness, and occasions a kind of temporary fever.' (On the Venereal, p. 339; also Dr Colles, Med. Chir. Rev., Jan. 1838, p. 80.)

'Calomel is also an irritant, that is, it causes irritation and inflammation in the alimentary canal when swallowed.' (Christison on Poisons, 1829, p. 319.)

'Many times, I saw under those large and long-continued doses of calomel, the hydrocephalic symptoms suddenly vanish, and inflammation of the intestines arise, which terminated in death. Still oftener I observed this unfavourable accident from an incautious use of calomel in croup, viz., when all the frightful symptoms of this tracheal inflammation which threatened suffocation suddenly vanish, and enteritis developes itself, which passed rapidly into gangrene, and destroyed the patients.' (Periera, 2d edit., vol. i. p. 743.)

Dr Thomson (Mat. Med. p. 276) agrees with Mr Annesly, whom he quotes thus: 'Calomel increases the capillary circulation in the mucous coat of the larger intestines. Thence it is useful in large doses in increased vascular action of the intestinal canal; such as occurs in fever, hepatitis, dysentery.'

Dr Murphy says, 'mercury produces dysentery and ulceration of the intestines.' (Med. Chir. Rev., Oct. 1839, p. 480.)

Dr Colles observes, 'During this critical period (salivation), the patient is liable to attacks of griping, frequent desire to go to stool, and tenesmus; these efforts are attended with only slight evacuations, which chiefly consist of mucus tinged with blood; sickness of stomach and vomiting also often supervene, the skin is hot, and the pulse quick. All of which phenomena are explained by the fact, that the *specific influence* of the mercury has



Mercury is considered a specific in diseases of the liver.

Mercury is often given with advantage in acute and chronic rheumatism.

It is unnecessary to quote authorities proving the efficacy of mercury in jaundice.

taken effect upon the alimentary canal, instead of the salivary system. *This dysenteric affection so generally appears at this period, that the patient should be forewarned and prepared for it.* (Med. Chir. Rev., Jan. 1838, p. 76.)

'It cannot, however, be denied, that the immoderate use of mercury has been productive of liver disease. The late Mr Hewson pointed out this to the attention of those who visited the Lock Hospital while under his care. At this period it was the custom to salivate every patient, and keep him under the full mercurial influence for a month or two; and it frequently happened, that, just as the mercurial course was finished, the patient got *disease and enlargement of the liver.*' (Prof. Graves' Clinical Lectures, Med. Gazette, vol. xix. p. 452.)

Dr Murphy observes, 'The tendency of fibrous structure to disease after a mercurial course, is well exemplified by rheumatism.' This effect of mercury is now so well known, that it has received a distinct appellation—*mercurial rheumatism.* (Med. Chir. Rev., Oct. 1839, p. 483.)

'Mercury given without caution often produces the same symptoms as rheumatism.' (Cooper's Surg. Dict., 5th Edit., p. 1204.)

Hunter tells us that 'mercury often produces pains like those of rheumatism and nodes.' (On the Venereal, p. 339.)

Dr Johnson remarks, 'Dr Colles takes no notice of a tendency to jaundice after a mercurial course, yet we have seen several examples of it.' (Med. Chir. Rev., Jan. 1838, p. 81.)

Dr Cheyne observes: 'It does not appear to be generally known, that mercurials actually produce jaundice, though it is a fact of



which I have seen, within the last two years, three striking examples.' (Dublin Hosp. Reports, 1818.)

Dr Chapman, Professor of Medicine in Philadelphia, has observed similar cases. (Amer. Jour. of Med. Sciences, vol. i.)

#### TARTAR EMETIC.

The administration of tartar emetic in pneumonia, a practice introduced by Rasori, has been employed with great success.

'As far as regards the use of emetics in dysentery, there is no difference of opinion among practitioners: the early periods of the disease are those in which they have been found most useful; the effect of contagion has been prevented; and in many instances, as in other fevers, the disease has been cut short. Both tartar emetic and ipecacuanha, particularly the latter, have been judiciously selected for this purpose by the best practitioners.' (Thomson's Mat. Med., p. 725.)\*

After the administration of tartar emetic, 'the lungs are found more or less inflamed.' (Beck. Med. Juris., page 788, edit. 6.)

In all Magendie's experiments with tartar emetic, the lungs were found of an orange red or violet colour throughout, destitute of crepitation, gorged with blood, dense like the spleen, and here and there hepatized. (Magendie sur l'Emetique, Paris, 1813, p. 24, *et seq.*)

Orfila writes, 'Independently of the inflammation, more or less intense, of the parts to which the tartar emetic is in contact, this poison causes also phlogosis of the lungs and digestive canal. The deleterious effects of the tartar emetic are manifested, whether it be injected into the veins, introduced into the digestive canal (provided it has not been vomited for some time after its introduction), or into the serous cavities, or applied to the subcutaneous tissue: it acts particularly in inflaming the lungs, and mucous membrane which lines the intestinal canal, from the cardia to the inferior extremity of the gut.' (Traité de Médecine Légale, 3d edit., t. 3, p. 218.)

\* That ipecacuanha is also homœopathic to dysentery, see Hahnemann's Mat. Med. We may also add, that Sir J. Baker (De Dysentery, 1761,) and Dr Cullen (Mat. Med. ii. 477) consider ipecacuanha to be of most benefit in dysentery when it acts as purgative.



## IODINE.

'This renders it a most useful remedy in ascites, connected with diseased states of the liver and the mesenteric glands.'

'Dr Baron of Gloucester succeeded in curing that disease by its means; and I believe a case has also proved successful in the hands of Dr James Johnson. . . The tincture has also succeeded in reducing enlargements of the liver, when all other means had failed.' (Thomson, *Mat. Med.*, p. 848.)

'Enlarged liver and spleen removed by iodine. Three cases of this kind have recently been reported by Dr Milligan, from the Royal Universal Infirmary for children, which appear to prove the superiority of iodine over mercury in glandular and visceral tumours.' (*Med. Chir. Rev.*, vol. ix., p. 168.)

'In chronic inflammation, induration, and enlargement of the liver, after antiphlogistic measures have been adopted, the two most important and probable means of relief are iodine and mercury, which may be used either separately or conjointly. If the disease admits of cure, these are the agents most likely to effect it.' (Pereira, 2d edit., vol. i., p. 244.)

Iodine has been recommended by several in epilepsy and other nervous disorders. (Dr Manson, *Medical Researches on the Effects of Iodine.*)

M. Zink found, in a case, fatal from iodine, which came under his notice,—enlarged abdomen from distension of the intestines with gases, enlargement of the other viscera, and serous effusion into the peritoneum, . . enlargement and pale rose-red colour of the liver; . . in the chest, serum was found in the sac of the pleura. (*Journ. Complémentaire*, xviii., p. 126, quoted in Christison on Poisons, 1829, p. 138.)

In a fatal case described in Rust's Journal, the leading symptoms were pain in the region of the liver, loss of appetite, emaciation, quartan fever, diarrhoea, excessive weakness, and, after the emaciation was far advanced, a hardened liver could be felt. (*Magazin für die gesammte Heilkunde*, xvi. 3.)

'Iodine, indeed, has been supposed to possess some specific power of influencing the liver, not only from its efficacy in alleviating or curing certain diseases of this organ, but also from the effects of an over dose. In one case, pain and induration of the liver was brought on; and in another, which terminated fatally, this organ was found to be enlarged, and of a pale rose colour.' (Pereira, *loc. cit.*)

Its use is attended 'occasionally with symptoms which resemble those of shaking palsy.' (Thomson, *Mat. Med.*, p. 258.)

'Dürr observed in a patient with goitre, where iodine ointment was applied, that it caused tremblings in the limbs and muscles of the face, anxiety, palpitations of the heart, vomiting, violent headache, and, lastly, accessions of convulsions, attended with foaming at the mouth.' (*Schweizerische Zeit-*



Dr Streeten, in his Retrospective Address, referring to iodine and its preparations, says,—‘The diseases in which it was found most efficacious were certain chronic syphilitic affections, and especially such as are the combined results of syphilis and mercury; and various scrofulous degenerations.’ (Trans. of Provincial Med. and Surg. Association, vol. x., p. 87.)

schrift für Natur und Heilkunde, vol. ii., 1836.)

Dr Streeten quotes from Dr Lawrie of Glasgow, who observed the following symptoms produced by the employment of iodide of potassium. (See Lond. Med. Gazette, July 1840.) ‘The mucous membrane of the eyes and air-passages are said to be especially liable to become affected. In one instance the employment of the medicine was followed by urgent dyspnoea and loss of voice; in another by excruciating headache, acute pain in the eyes, profuse secretion of tears, intense pain in the nostrils, with swelling and discharge of clear serous fluid; in a third by fatal dyspnoea; in a fifth by profuse papular eruptions, which disappeared on the iodine being omitted, and reappeared on its being again resumed, followed by sore throat, acute dyspnoea, and hoarseness, with fatal result; the mucous membrane of the upper part of the larynx, rima glottidis, and epiglottis being found œdematous on inspection; in a sixth by intense headache, slight salivation, and sore throat; and in a seventh by severe headache.’ (*Loc. cit.*)

On several occasions it has caused salivation and soreness of the mouth. In the cases noticed by Lugol, the patients were males. In the Med. Gaz., vol. xvii. for 1836, two instances are mentioned, one by Mr Winslow (p. 401), the other by Dr Ely (p. 480.) Other cases are referred to in Dr Cogswell’s work.

‘Iodine and its preparations are frequently successfully administered in affections of the skin.’ (Pereira, vol. i., p. 245.)

M. Ricord, as the result of numerous observations on the physiological action of hydriodate of potash, states among other symptoms, that it frequently acts on the skin, producing numerous varieties of eruptive diseases. Bul.



de Thérap., Sep. 1842. See also fifth case quoted above of Dr Lawrie's.

## NITRIC ACID.

Nitric acid has been found to be of great use in salivation and ulcerations of the mouth, brought on by the use of mercury. (Aylon, in the *Mém. de la Soc. d'Emulation*. Blair, *Essay on, &c.*, London, 1808. Beddoes, London, 1779.)

'Dr Scott gave it in syphilis, and applied it externally, largely diluted, as a bath, *until the gums were effected, and ptyalism produced.*' (*Med. Chir. Trans*, vol. viii., p. 173, *et seq.*)

'In some cases it has excited ptyalism, and from this circumstance, as well as from the occasional benefit derived from its use in the venereal disease, *it has by some writers been compared in its operation to mercury.*' (Pereira, *Mat. Med.*, part i., p. 162.)

## PLATINUM AND GOLD.

Dr Ferdinand Hoefer has made, of late, experimental researches upon platinum and its preparations; he mentions that it proves useful chiefly in syphilitic and rheumatic affections. (*Gaz. Med. de Paris*, Nov. 28. 1840.)

Dr Streeten (*Trans. Provin. Med. Surg. Assoc.*, vol. x., p. 89.), reviewing Dr Hoefer, says the action of this metal seems to be alterative, *analogous to that of gold and mercury.* But at page 116 we have shewn that mercury is homœopathic to syphilis and rheumatism. From the above statement we can also deduce that the preparations of gold, which have of late been given extensively in secondary syphilis, are also homœopathic to this disease.

## CUBEBS.

'Cubebs,' says Sir Astley Cooper, 'is a remedy of a most admirable and useful kind, and may be given with advantage even in the inflammatory stages of gonorrhœa.' (*Lectures*, p. 506.)

Sir Astley proceeds to add, 'Cubebs appears to produce a specific inflammation of its own on the urethra, which has the effect of superseding the gonorrhœal inflammation.' (*Lectures*, p. 506.)



## CANTHARIDES.

Cantharides has been given with great advantage in gonorrhœa and gleet, in dysuria and strangury.\* (Smith's Med. Communications, ii. p. 505. Young, Phil. Trans., No. 280. Robertson, Pract. Treat. on the Powers of Cantharides.)

It is familiar to all that cantharides produces dysuria and strangury.

Rayer says: 'The great objection to its employment (in lepra) is its liability to excite inflammation in the digestive organs, and urinary passages, especially among females.' (Dis. of Skin. Transl. by Dr R. Willis.)

Dr Mackintosh says: 'Among other causes, inflammation of the urethra is produced by the action of cantharides upon the system.' (Pract. of Physic, vol. ii., p. 249.)

## APIUM PETROSELINUM.

"M. Lallemand of Montpellier has often administered the fresh juice of parsley in acute gonorrhœa, with marked good effects.' (Med. Chir. Rev., July 1839, p. 221.)

The reviewer goes on to say,— 'Its action seems to be in some degree *homœopathic*, as it certainly acts not only as a diuretic, but also as an irritant to the urinary passages. Hence it often seems to aggravate the urethral symptoms; but they speedily abate, and the discharge dries up.' (*Loc. cit.*)

## COLOCYNTH.

Ehrenberg and Hemprich mention that the Arabs in the desert, to guard themselves against attacks of dysentery, are in the habit of drinking milk which has been kept standing a night in a colocynth scooped out for that purpose. Dr L. Wolf has cured dysenteries at New York with this drug. (Hecker's Literar. Annalen., 20th vol., p. 406.)

In a fatal case communicated by D'Annecy, which presented all the symptoms of dysentery, the abdominal viscera exhibited marks of violent inflammation, the intestines were reddened and thickly studded with black spots, most of them were either adherent or covered with adventitious membranes. (Orfila, Tox. Gen., tom. i., p. 696, edit. 3.)

\* Dr Groenvelt, in 1695, was committed to Newgate, by a warrant from the President of the College of Physicians, for prescribing cantharides internally.



It has also been given with success in the 'dry belly-ache' of the West Indies.

That colocynth produces colic is familiar to all.

'Dr Fordyce mentions the case of a woman who was subject to colic for thirty years, in consequence of once taking an infusion of colocynth prepared with beer.' (Thomson's *Mat. Med.*, p. 804.)

#### OXALIC ACID.

At the Scientific Meeting at Turin in September last, M. Nardo made known the results of his experiments on the therapeutic effects of oxalic acid; to which subject he had been devoting his attention for the last twelve years. It possesses the precious property of calming the violent pain which attends inflammation of the mucous membranes. He especially recommends its employment in all diseases where this membrane is implicated, as in angina, gastritis, gastro-enteritis, stomatitis, and aphthæ. (*Repertorio delle Scienze Fisica-Medisch. del Piemonte*, Jan. 1841; also *Edin. Med. and Surg. Journ.*, July 1841.)

'The first symptoms (from oxalic acid) have been immediately burning pain in the stomach; when the dose was small, the pain has sometimes been slight or slow in commencing. . . . In general violent vomiting follows the accession of pain. The tongue and mouth occasionally become inflamed if the case last long.' (Christison on Poisons, p. 147.)

In all the cases of recovery from poisoning by oxalic acid, 'great irritation and pain in the stomach, sometimes also in the throat, were constant and early symptoms; spontaneous vomiting is only mentioned in two instances; but in several, more or less of gastric irritation remained.' (Beck. *Med. Jurisprudence*, edit. 6, p. 705.)

#### MILLEFOLIUM.

Johann Schröderer observes: 'Millefolium is useful in bleeding from the nose, hæmoptysis, menorrhagia, abortion, pain and running from hæmorrhoids.'

*Materia Medica* by Koschwartz, Nurnberg, 1603, p. 1058.

The same writer says,—'If the fresh weed be applied to the nose it causes bleeding. It is a very remarkable fact, when applied outwardly it should stop epistaxis and when put into the nose should cause it to bleed, and so produce two opposite effects.' (*Loc. cit.*)

#### TEA.

'In the summer of 1820, I was requested,' says Dr Copland, 'by

It will be admitted as a familiar fact, that the use of strong tea



a practitioner to see the daughter of a clergyman residing in Westminster, labouring under most violent nervous palpitation, which had resisted the means advised by several physicians who had been consulted. She was thin, delicate, and highly nervous. Finding that the usual remedies for nervous palpitation had been prescribed without any relief, I suggested that a strong infusion of green tea should be given three or four times a-day, and continued for a few days. Relief immediately followed, and perfect recovery in two or three days.' (Dict. Pract. Med., part iv., p. 177.)

(especially green tea), produces, above all in individuals not accustomed to it, a train of nervous symptoms, such as wakefulness, great irritability, palpitations of the heart, anxiety, &c.

#### SULPHUR.

In chronic cutaneous diseases, more especially prurigo, impetigo, and scabies, the internal use of sulphur is sometimes attended with great benefit.

The power of sulphur to excite eruptions of the skin, similar to itch\* and other affections in which it is given, can be doubted by no one who has visited the sulphur baths of Germany, where the 'Badefriesel' (bath-rush), as it is termed, is one of the most constant effects which those who drink the waters experience.

Krimer says, — 'Sulphureous baths often produce the very diseases which they are employed to cure.' (Hufeland's Journ. 1834, August, p. 9.)

Sulphur is a very popular remedy in hæmorrhoids.

'Sundelin says it operates specifically on the mucous membrane of the rectum, and thereby promotes critical hæmorrhoidal secretions.' (Pereira, vol. i., p. 460.)

\* Because in the vesicular eruption produced by sulphur, there is no acarus scabei present, it is not the less homœopathic, for it is extremely doubtful if the acarus is not a mere effect or accompaniment of itch. Rayser observes, that it is indubitable that the number of these insects bears no proportion to that of the vesicles. It is rare, he says, to discover these insects on the abdomen and on the groin, where the eruption of scabies is, nevertheless, very common and very apparent; moreover, scabies is known to continue when no more acari are discovered. (Willis, Dis. of Skin, p. 344.)



## OPIUM.

' In idiopathic tetanus, it is a remedy of great power. . . . When deglutition is impeded, it may be exhibited per anum, and solutions of the medicine in oil applied to the surface. I have seen these oily solutions prove useful in trismus when rubbed upon the jaw.' (A. T. Thomson, *Mat. Med.*, p. 416.)

Opium has been almost universally recommended in delirium tremens.

' Opium should be regarded as our chief remedy ; but at this period (first stage), it is not to be given in full doses, but in small ones, repeated at short intervals. . . . Opium is at this period (second stage) our sheet anchor ; opium in full doses ; all other remedies are of inferior importance.' (Cyclop. Pract. Med., art. Delirium Tremens, by Dr Carter, p. 515.)

Even in the last stage, Dr Carter recommends it, for he says (516), ' How are we then to act ? We must persist in the same general mode of treatment.'

' The Journal Universel contains the case of a soldier who took two drachms of solid opium, and died in six hours and a-half, after being affected with lock-jaw and dreadful spasms. A very pointed case of the same kind is related in the Medical and Physical Journal. It is the case of a young man, who, after swallowing an ounce of laudanum, told what he had done, so that he was seen within three hours by his surgeon. At that time he was insensible, the mouth was distorted, the jaws fixed, and the hands clenched. Afterwards the insensibility was lessened by proper remedies ; and then he was seized with spasms of the back, neck, and extremities so violent, as to resemble opisthotones.' (Christison on Poisons, p. 531.)

' We have stated that delirium tremens is caused by the intemperate use of strong liquors, or of *certain other diffusible stimuli*. Of these latter, opium, either alone, or in its various combinations, is the chief. The long-continued and free use of opium, may certainly induce true delirium tremens. We have known it to be so produced.' (Dr Carter, *loc. cit.*, p. 514.)

' The effects of an excessive quantity of this drug (opium) very nearly resembles the phenomena of the last stage of the disease, particularly towards its fatal close.' (Dr Copland, *Dict. Pract. Med.*, art. Delirium Tremens, p. 502.)

## RHUS TOXICODENDRON.

Van Heddeghem mentions the case of a Creole in Louisiana, who

He (the Creole) had used very many remedies in vain, in order to



was so susceptible to the action of rhus toxicodendron, that he could not drive along the roads where the plant grew, or shake hands with a person who had been exposed to the effluvium of this plant without being almost immediately attacked with the *rhus erysipelas*, which affected his neck, face, hands, arms, chest, and genitals in particular. (Précis Analytique des Travaux de la Société Med. de Dijon, pour l'année 1832. Dijon, 1838. P. 48.)

deaden his susceptibility, when, finally, his physician, Bressa, determined to give him the rhus grandiflora, which produces effects very similar to those of the rhus toxicodendron. At first it caused an erysipelatous affection of the eyelids and nose; in course of time, however, it no longer produced any perceptible effect, and he was enabled, not only to expose himself to the effluvia of the rhus tree, but could even handle it without the slightest inconvenience.' (*Loc. cit.*)

#### IPECACUANHA.

'Nauseating doses of Ipecacuanha are used with considerable advantage in acute cases of mucous catarrh. . . . . In asthma benefit is obtained by it, not only when given so as to occasion nausea and vomiting, as above noticed, but also in small and repeated doses. In both this and the preceding disease (hooping-cough), the benefit procured by the use of ipecacuanha arises, not from the mere expectorating and nauseating operation alone of this remedy, but from its influence otherwise over the eighth pair of nerves.' (Dr Pereira, Elements of Mat. Med. 2d edit. vol. ii. p. 1429.)

'Besides the beneficial effects produced by it as an emetic, ipecacuanha is, when used with this or other intentions, one of the best medicines that can be resorted to in asthma, as being suited to all the states of the disease.' (Dr Copland, Dic. Pract. Med. p. 148. Art. Asthma.)

'When taken in small and repeated doses, ipecacuanha principally directs its influence to the secreting organs, especially those of the chest, whose activity it promotes. It specifically affects the bronchial membrane, in some morbid conditions of which it promotes expectoration, while in others, attended with a profuse secretion of phlegm, it exerts a beneficial influence, and often contributes to the restoration of the part to its normal condition.' (Dr Pereira, *loc. cit.* p. 1427.)

'Inhaled, it irritates the respiratory passages, and in some persons brings on difficulty of breathing, similar to an attack of spasmodic asthma.' (Scott, Phil. Trans. for 1776, p. 168.)

'How singular it is,' says Dr M. Hall, 'that ipecacuanha, taken into the bronchia, should excite asthma, and taken into the stomach should induce another affection of the respiratory system, vomiting.' (Lectures in the Lancet for April 21, 1838.)

'Mr Roberts, surgeon, at Dud-



ley, is affected in this way, and I have received from him the following account of his case:—‘If I remain in a room when the preparation of ipecacuanha is going on—for instance, making the *pulv. ipec. comp.*—I am sure to have a regular attack of asthma. In a few seconds dyspnœa comes on in a violent degree, attended with wheezing, and great weight and anxiety about the precordia. The attack generally remains about an hour, but I obtain no relief until a copious expectoration takes place, which is invariably the case. After the attack is over I suffer no inconvenience.’ (Pereira, *loc. cit.*, p. 1427.)

#### SENEGA.

‘It is an exceedingly valuable remedy in the latter stages of bronchial or pulmonary inflammation, when this disease occurs in aged, debilitated, and torpid constitutions, and when the use of depletives is no longer admissible. . . . In chronic catarrh and humoral asthma it has also been used.’ (Pereira, *Mat. Med.* vol. ii. p. 1708.)

Dr Copland, speaking of the treatment of asthma, says, ‘It should be kept in recollection that they (*Innula helenium*, and *senega*) are amongst the most active excitants of the respiratory mucous surfaces we possess, and are extremely apt to change active congestion of the bronchial lining into inflammatory action, especially in young, plethoric, or robust subjects; and by their effect on the expectoration, particularly by increasing it, rendering it thinner, less viscid, and more readily expectorated, to occasion a deceptive appearance of benefit, even when they are increasing morbid action with all its ill effects.’ (*Dict. Pract. Med.*, Art. Asthma, p. 149.)

#### STRAMONIUM.

‘From the known effects of the *datura stramonium* in large doses producing delirium and illusions,

Dr Fowler has related the case of a little girl who took a drachm and a half of the seeds. In less



M. Moreau,\* of Tours, was induced to exhibit it in the idiopathic hallucinations, arising simply without any mania or monomania, of a chronic nature. Of the persons labouring under these hallucinations, eleven were perfectly cured, one much relieved, and two resisted the action of the stramonium. The principle of cure seemed to be founded on *similia similibus curantur.*' (Dr J. Black, Trans. of Pro. Med. and Chirurg. Assoc. vol. xi. p., 130,—quoted by him from Gazette Médicale, No. 43.)

'The administration of stramonium in mania has been attended with marked benefit. Out of fifty-five cases reported by various writers, twenty-one were cured; ten were followed by a favourable change, temporary or permanent; twenty-five obstinately resisted this mode of treatment..... The other nervous disorders treated by the same means, are, 1st, six cases of hysterical convulsions, of which four were cured, and two very much relieved; two cases of chorea, the one cured, the other considerably ameliorated.' (Bayle, Bibl. Therap., tom. ii., p. 324.)

Dr Begbie cured a very severe and obstinate case of cephalalgia, attended with convulsions, by means of stramonium, after other means had failed. He also reports a case of idiopathic tetanus, which he cured with stramonium. (Trans. of Med. Chir. Soc. Edin., vol. i., p. 285.)

than two hours she was attacked with maniacal delirium; accompanied with spectral illusions; and she remained in this state most of the following night, but had some intervals of lethargic sleep. (Edin. Med. Commentaries, v., p. 163.)

'Stramonium given in large doses gives rise to complete derangement of the intellectual faculties, which has the closest resemblance to mania. It consists in extraordinary gait, in general delirium, accompanied with loquacity, agitation, and even fury. To these are joined convulsive movements, and sometimes palsy.' (Bayle, *loc. cit.* p. 323.)

'In cases of poisoning by stramonium the symptoms were redness of the features, delirium, nymphomania, loss of speech, then fixing of the eyes, trismus, convulsions, and coma; afterwards tetanic spasms and slow respiration, with the coma. In another case, the leading symptoms were spasmodic closing of the eyelids and jaws, spasms also of the back, complete coma.' (Christison on Poisons, p. 616.)

Among the patients to whom Greiding gave stramonium 'four-

\* M. Moreau has, no doubt, been indebted to Storck for this suggestion. Storck was the first person who administered this plant in mania (1762); from its acknowledged property of producing mania, he thought it might act beneficially in mental diseases, by affecting a change in the sensorium commune.



teen complained of violent cephalalgia, which frequently returned.' (Bayle, *loc. cit.* p. 272.)

#### ACIDS IN CUTANEOUS DISEASES.

'As to the propriety of the employment of acids, so usually recommended in cutaneous disorders, we might, if guided by theory alone, have some doubts..... Yet here, as elsewhere, preconceived notions with regard to the propriety of a therapeutic agent in disease, derived from a knowledge of its influence in a state of health, must not be put in competition with the practical results of experience, and we have certainly seen very troublesome cases of eczema yield rapidly, whilst acid drinks were used.' (Cyclop. Pract. Med., Art. Eczema, p. 683.)

'For in certain habits, as has been remarked by Sir A. Carlisle, they (acids) of themselves occasionally excite much irritation of the skin. Thus many people are affected with pimples shortly after taking them, together with burning heat in the face, and itching over the whole body.' (Cyclop. Pract. Med. *loc. cit.*)

#### CITRIC ACID.

It is unnecessary to quote authorities attesting the efficacy of lemon juice and citric acid in scurvy.

'During a residence of twenty years in the West Indies, I have only seen one case of scurvy, and that case was decidedly brought on by the excessive use of citric acid, which an American gentleman had been recommended to use as a preventive against the yellow fever. His own conviction, as well as mine, was, that the scorbutic symptoms had been brought on by the acid. This was immediately laid aside, and under the use of carbonate of soda, he was completely cured in three weeks.' (Observations on the Healthy and Diseased Properties of the Blood, by W. Stevens, M. D., p. 451.)

It may be now asked, what is the relation between the physiological action of these remedies, and the symptoms



they cure? It appears, in the above instances, that the medicine is capable of producing the same train of symptoms which it cures.

The examples there being so numerous, and they could readily be multiplied, it is just to conclude that there are medicines which cure diseases, the physiological action of which remedies are similar to the symptoms of the disease. And, going one step further, may it not be legitimately stated that the beneficial action of these remedies depends on their homœopathicity, that they are examples of the therapeutic law,—*similia similibus curantur*?

That this is the true rationale of their efficacy will be the more readily admitted, if comparison be made with the numerous contradictory and hypothetical explanations of their *modus operandi*, as given by many writers. For example, mercury is thought, by some, to cure syphilis, because, like an acid or an alkali, it neutralises the virus. But this chemical view is inconsistent with the acknowledged pathology of syphilis, and with the action of mercury. Others state, that it acts by communicating oxygen; but this cannot be the case, for medicines containing much more oxygen are not beneficial in syphilis. Again, some believe that it is beneficial because it expels the virus from the system, by exciting the salivary glands; but syphilis is cured most safely and efficaciously without exciting salivation. Others attribute its efficacy to its alterative properties, but this simply means that mercury alters the state of the system; but no explanation is thus given of the point at issue, viz., in what this peculiar alteration consists. The majority, seeing the insufficiency of the foregoing views, believe that it cures syphilis, be-



cause it excites a specific action *sui generis*. What, then, is this specific action? From the action of mercury on workmen who are employed in its manufacture, it appears that it produces a disease so similar to syphilis, that it is called *pseudo syphilis*. Why does mercury cure sloughy sore throats, and other inflammatory affections. It cannot be because it acts, as some suppose, by its weight, its divisibility and mobility, and thus getting into the blood, separates its globules, renders it more fluid and fit for secretion, makes the lymph thinner, &c.; for if such were the case, metallic mercury were the best preparation, which is contrary to experience. It cannot be because it acts as a derivative, for care is taken that it do not affect the bowels; it cannot be that it acts as a sedative, for all regard it as an excitant, and, to guard against its stimulating and purgative effects, administer it with opium. How does it act in enteritis and dysentery? because, say some, it is a sedative; but it is erroneous to suppose that because mercury is given in dysentery, and cures it, therefore mercury is a sedative, when these same writers admit that it stimulates, nay, inflames the bowels. Even Mr Annesly, who is the great advocate of the sedative action of mercury, admits that it increases the capillary circulation in the mucous coat of the larger intestines,—‘*thence*,’ he says, ‘it is useful in increased vascular action of the intestines.’ So difficult has it been to explain the beneficial action of mercury, that most writers now rest satisfied with styling it a specific.

Since, then, the various theories as to the action of mercury either contradict each other, or are all opposed to the generally admitted effects of this substance on the



healthy person, such a view must be taken as will reconcile its successful administration in various diseases, and be in accordance with its physiological action; and the only one that can as yet be proposed is, that it is homœopathic, that it acts in accordance with the therapeutic principle, SIMILIA SIMILIBUS CURANTUR.



## CHAPTER V.

### ON THE PROVING OF MEDICINES ON THE HEALTHY BODY.

BY DR DRYSDALE, LIVERPOOL.

THE proving of medicines, *i.e.* the practice of ascertaining the action of medicine by experiment on the healthy body, may be justly considered as having originated with Hahnemann; for, although Haller had previously recommended it, on the obvious principle, that it is desirable to be acquainted with the properties of the medicines we employ, and Alexander had even made a few isolated and imperfect experiments on his own person, there was still wanting a definite therapeutic principle to give the practice such value in the estimation of medical men in general, as would induce them to act on Haller's recommendation. This connecting link was afforded by Hahnemann's discovery of the law—*similia similibus*.

The proving of medicines, therefore, was the first offspring of Hahnemann's discovery, and a necessary preliminary to the construction of a therapeutic system. For the same reason, unless it be continually carried on, Homœopathy must remain stationary; in other words, an



increasing knowledge of the specific action of medicines is a necessary condition of the advancement of therapeutics.

Hahnemann himself set a noble example in this respect to his medical brethren; for, not satisfied with pointing out the proper path to be pursued, he led the way, by instituting a series of experiments on his own person and many of his friends, with the view of ascertaining, on incontrovertible grounds, the physiological action of the different articles of the *materia medica*. These experiments, continued during upwards of thirty years, are still the most satisfactory on record, and must ever remain a splendid monument of the untiring zeal and powers of patient investigation which distinguished the founder of the homœopathic method. It is the duty of all medical men to contribute their share to this important work; and in doing so, it must not be forgotten, that a more direct advantage will accrue to them from the personal knowledge they will thereby acquire of the minuter shades of the specific action of medicinal substances. We propose, therefore, in the present paper, to make some remarks on the proper mode of conducting investigations of this kind, pointing out the principal circumstances which must be attended to, and the cautions to be observed, in order that the results arrived at may be worthy of such confidence as to entitle them to be applied to practice. We are led to do so, in the hope that our remarks may be serviceable to those who feel inclined to advance the cause of Homœopathy, by extending our knowledge of the pathogenetic effects of medicines.

In investigating the action of medicinal substances on



the body, allowance must be made for the modifying effect of all those circumstances which influence the action of other morbid causes; for it is in this light that medicines are truly to be regarded.

*Age and Sex.*—Among these modifying circumstances may be first mentioned age and sex. The medicine must be tried on individuals of all ages and both sexes, for obvious reasons; but, besides the difference arising from the distinct nature of the sexual organs, it is found that some medicines suit one sex better than the other, even in complaints which are common to both, *e.g.* crocus and platina are particularly adapted for the female sex, and nux vomica for the male. The same remark has been made with respect to children and aged individuals, in complaints not connected with the sexual functions.

*Temperament.*—Individuals of different temperaments also should be chosen as subjects of experiment, and all differences in the character and intensity of the symptoms observed in each temperament should be carefully noted, for it has been found that certain medicines are particularly adapted to certain temperaments, *e.g.* nux vomica, bryonia, nitric acid, &c., to the nervous and bilious temperaments, pulsatilla to the lymphatic, and so forth. The influence of habit of body is also not to be overlooked.

*Idiosyncrasy.*—An important modifying influence is idiosyncrasy. Idiosyncrasy may be of two kinds, *i.e.* it may give rise to an action differing altogether in its nature, or differing only in degree from the normal action of the substance. The effect of a substance administered



to a particular individual may be altogether peculiar, as in those rare cases where odours usually disgusting produce a pleasant impression on the olfactory nerves, or where simply nutritious articles give rise to anomalous affections, or where particular medicines produce an action altogether foreign to their usual symptoms. From such peculiarities as these, no useful instruction can be gained. But, in the majority of instances, idiosyncrasy is nothing more than an increased susceptibility to the normal action of the medicine, as, for example, when the dust of ipecacuanha produces asthma, or a fraction of a grain of mercury produces salivation. These are merely the normal effects of the substances in question; and their inertness in similar doses in most cases is, as well remarked by Hahnemann, only apparent, for they do act more or less on all individuals in the same manner, but the susceptibility is only developed in a few in health, to such an extent as to make it perceptible. In disease, however, they act in all cases when homœopathically indicated; and a diseased state of the system may thus be looked upon as equivalent to an idiosyncrasy in relation to the homœopathic remedy. But the progress of chemistry has furnished us with further confirmation of this opinion. The excessive itching of the body, which has long been observed in some rare cases to follow the exhibition of opium, was generally looked upon as the effect of an idiosyncrasy or peculiarity in the individual, and not to be accounted for by anything in the medicine itself; but, since chemical analysis has shewn the composite nature of opium, it has been



found that one of its constituents, viz. codeine, produces in almost all individuals, when given in sufficient dose, a species of febrile nettle-rash, attended with excessive itching over the whole body. The itching occasionally observed to follow the exhibition of opium may, consequently, be considered to have been nothing more than the effect of an unusual susceptibility to the normal action of codeine. Idiosyncrasy is, therefore, often a valuable adjuvant in the proving of medicines, as it gives a peculiarly distinct and, as it were, exaggerated picture of the specific action of the substance.

*The provings must be often repeated.*—Independently of the reasons already given for multiplying the experiments, it is desirable, for another reason, to repeat the provings on a large number of individuals, for, as slight variations in the different functions are experienced by every one, even when in the best health, it is only from their repeated occurrence that we are justified in ascribing many of the common symptoms to the effect of the medicine.\* In order, therefore, to avoid the admission of accidental symptoms, none should be adopted, unless they have been found to present themselves in several of the provers. By comparing also one proving with another, and ascertaining the degree of constancy with which the different symptoms have appeared, we may discover those most characteristic of the action of the me-

\* Widmann, when in the best health, noted down for some time all his sensations, and was astonished at the number and variety which he experienced; and if he had been proving any medicine at the time, these symptoms might have been put down as the effects of the medicine, had the precautions above mentioned not been attended to.—*Hufeland's Journal*, Nov. 1823.



dicine. It is to be remembered also, that all individuals are not susceptible of all the effects which a medicine is capable of producing, one action appearing in one individual, and another in a second, and so on; and thus a large number of experiments is required before we can obtain a complete view of the action of a medicine, just as a correct idea of the character of an epidemic can only be obtained by the comparison of a large number of cases.

*Form and Preparation.*—The medicines should be used in the form that is most easily reproduced, as it is essential that a preparation precisely similar to that proved should be always employed. Such specimens should, therefore, only be chosen as are well characterized, and of known genuineness and purity. The simplest form of administration should be adopted: of fresh plants the expressed juice mixed with a little spirit of wine may be given; of dried plants a tincture, powder, or infusion fresh prepared. Salts should be dissolved and gum resin mixed in a large quantity of water just before taking them. Insoluble substances triturated for a length of time with 5, 10, 50, or 100 parts of milk sugar.

*Dose.*—As a general rule, we must begin with a small dose, and increase it gradually till distinct symptoms make their appearance. To obtain a complete knowledge of the action of a medicine, it is necessary to give it both in large and in small doses, but the latter are by far the best adapted to develop its specific effects, for very many medicines are evacuants in large doses, and produce their own expulsion, thus preventing their specific action from being fully developed; for example, if



mercury were always given in purgative doses, we should learn very little of its other infinitely more characteristic effects. Large doses of some substances produce also a certain amount of chemical action, which either overpowers, or, at least, prevents us from observing distinctly their proper specific dynamic action. The most useful doses are, therefore, those which are just sufficient to produce distinct symptoms; such doses are also the best, as they produce chiefly primary symptoms; while large doses cause many secondary symptoms, and act so rapidly that the observer is confused. The dose may be repeated once or many times daily, and for many days in succession; but in that case it is often difficult to separate the primary from the secondary symptoms, and also the course of the symptoms cannot be so accurately observed. It is, therefore, often useful to give a single pretty large dose, and watch its effects. This plan is chiefly useful with some vegetable medicines whose sphere of action is small, and of which the first dose sometimes exhausts, for a time, the susceptibility of the system to the action of the substance.

*Diet.*—The diet and regimen of the prover must be regulated with great care. Moderation in all things, and abstinence from every thing tending to exercise any medicinal or distracting influence, are necessary. All fermented and spiritous liquors, coffee and spices of every description, all green vegetables and roots, with the exception of green peas, kidney beans, carrots, turnips, cauliflower, and potatoes, and even any one of these, should it disagree in the most trifling manner with the stomach, must be avoided during the proving. Also all over-exer-



tion of the mind and body, deep study, strong mental emotion, and violent passion, unfit the individual for these experiments.

*Directions for Individual Provers.*—Each one must write down his name and age, and description of his person, indicating the temperament, complexion, colour of the hair and eyes, stature and habit of body, &c. Anonymous observations should be rejected, except in the case of females and non-intelligent provers; but, in these instances, the person under whose direction the experiments are conducted is to be held responsible for their accuracy. These precautions may seem unnecessary, but, unfortunately, they are not so; for, incredible as it may appear, individuals have actually been found base enough to sport with the lives of their fellow-creatures, by the publication of false provings for the sake of gain.\*

*Observations by the prover on himself before beginning.*—The prover should choose a period when he is in the best health, and regulate his diet according to the above directions, at the same time avoiding all causes of unusual mental and bodily excitement. As every one, however, is liable, even in the best state of health, to slight variation in the sensations and functions, each prover should observe himself accurately for a week or ten days before commencing his experiments, and should write down all

\* A miscreant, called Fickel, published, under feigned names (Heyne and Hofbauer), two books of fictitious provings. From their internal evidence alone, Drs Trink and Helbig of Dresden shewed that these were false, and that both publications were the work of the same individual. They were, at length, traced to Fickel, who was, at the same time, detected in other knavish practices, and was forced to fly from Leipzig to avoid imprisonment.



his sensations just as if he were taking the medicine. Having thus discovered what symptoms he is liable to naturally, he must afterwards carefully avoid setting them down among the effects of the medicine. Most persons have also some weak point in their constitution which is liable to suffer from any cause that in any way deranges the general health, whether that cause act specifically or not on the organ in question. The prover must, of course, avoid enumerating these symptoms also among the effects of the medicine.\* Should there occur, in the course of the proving, such a deviation from the diet or regimen, as would throw doubt on the results, the subsequent symptoms must be included within brackets; and if any interruption of greater moment should arise, the proving is to be altogether suspended for a time.

Having duly attended to all these preliminary precautions, the prover should begin to take the medicine whose action he wishes to investigate, in any of the doses already mentioned; and when symptoms begin to shew themselves distinctly, he should describe them as accurately as possible, observing the following cautions:—

*Primary and Secondary Symptoms.*—One of the most important things to be kept in view is the distinction of symptoms into primary and secondary; for it is familiar to all, that any unusual action or excitement of any part is invariably followed by a corresponding degree of quite the opposite state, and, therefore, it is the primary symp-

\* A considerable interval should be allowed to elapse between the proving of different substances on the same individual, as the symptoms are apt to recur, even after weeks or months, on any disturbance of the system.



toms alone that are valuable, as shewing the specific action of the substance; the secondary being merely the result of the previous excited action of the organism. For example, if a medicine, by its immediate and direct operation, excite purging, this is necessarily followed by a state of constipation for a longer or a shorter period, as a mere consequence of the exhaustion which follows the primarily excited action, and the constipation is therefore not, in any way, a characteristic effect of the substance which caused the purging.

The secondary action should, therefore, either not be written down at all, or if written (which it sometimes may be, as it may contain something expressive of the precise character of the primary symptom), it should only be placed after the primary in the same paragraph, and *never as an independent symptom*. In the proving of Chamomilla, for instance, constipation is mentioned several times, but Hahnemann\* expressly states, that, on all these occasions, it is merely the secondary effect of previous diarrhœa; and, accordingly, it is never found useful in constipation, but is specific in several forms of diarrhœa. This is a point of the greatest importance, for if not attended to we cannot distinguish between the homœopathic and antipathic action of the medicine, and are, therefore, in danger of falling back into the old routine practice. It is a point, also, which only the prover himself can rightly distinguish; for we find the exhibition of the medicine followed by two opposite classes of symptoms, the one being the true specific action of the medicine, while

\* Reine Arzneimittellehre, bd. 3. Art. Chamille. Sympt. 180-183.



the other is of no value at all. If these are then all simply written down, a confusion arises which no one afterwards can unravel, and the proving is consequently rendered worse than useless.

*Alternative Symptoms.*—It is found that some medicines produce, at different times, symptoms which are quite opposite in their character, both of which, however, are truly primary, not being the secondary results of any previous excitement. These can easily be distinguished by the prover, who must carefully avoid confounding them with the really secondary symptoms.

*Course of Symptoms.*—It is to be remembered that the object of proving is to ascertain, not so much the mere symptoms which follow the administration of a medicine, as the pathological state on which they depend; and, therefore, it is not sufficient to note down the symptoms in a detached and isolated form, but their course and connection must also be carefully observed and accurately described. Instances will, no doubt, occur to the reader (among the different forms of fever, for example), in which the course of the symptoms furnishes one of the best means of diagnosis between different morbid affections of similar character.

*Connection of Symptoms.*—Attention to the connection of the symptoms is still more important, as leading more directly to a knowledge of the precise seat and nature of the pathological change. For example, pain in the lumbar region, as an isolated symptom, is of little diagnostic value; if it occur, however, in connection with vomiting, it would lead us to suspect the presence of some affection of the kidney, yet without enabling us to deter-



mine the precise nature of the affection ; but if to these two symptoms be superadded general fever and ischuria, then the diagnosis of nephritis becomes complete.

*Isolated Symptoms.*—But the fact must not be lost sight of, that individual symptoms will frequently arise in the course of the provings ; and as these symptoms are often of great value, as indicating the therapeutic powers of the substance, they must be carefully registered.

*Description of Symptoms.*—In describing the symptoms, the greatest minuteness and accuracy must be observed ; the character of the sensation should be indicated as accurately as possible, which is often best done by some familiar comparison. And as the etiological relations of the action of a medicine are of the greatest consequence in displaying its character in a definite manner, it should be carefully noted how the symptom is affected by different circumstances, such as, position of the body, motion or rest, eating or fasting, day or night, in a room or the open air, state of the weather, &c. ; and, in short, no circumstance, however trifling, which excites, aggravates, or relieves any symptoms, and which may in any way tend to indicate the characteristic action of the medicine, must be omitted.

A few special examples may probably be the best way to illustrate the minuteness with which it is necessary to examine and describe the symptoms.

*Head.*—To put down simply headache as a symptom of a medicine, would give little information as to its specific action, as that is one of so general occurrence. The pain must be described as accurately as possible, and this



often can be best done by a comparison with some familiar sensation. It must be stated, for instance, if it is shooting, tearing, throbbing, &c., or creeping, buzzing, vibrating, &c.; or if pressure, whether from within, or without, or downwards; or if it is like a cord round the head, or a sensation of weight or lightness, fulness or emptiness, heat or cold, &c. Also state accurately the part of the head affected; or if it varies, state the course and direction of the pains. At the same time state any symptoms that accompany the headache. This is of great importance, as the accessory symptoms are often the best means of distinguishing the character of the affection: among these are usually affections of the eyes, nausea, variation of the countenance, shivering, or heat, &c. In short, any sympathetic symptom, however trifling, that may tend to mark the character of the primary affection, should be noted. The state of the mind that attends each variety of headache is also to be accurately noted. Also note the circumstances in which the pain is aggravated or ameliorated, such as lying down or walking about, time of day, eating, &c.

As an example, we may take symptom 67 of Hahnemann's proving of *Rhus toxicodendron*.\*—'On awakening from sleep, immediately on opening the eyes, he is seized with violent headache, at first in the forehead behind the eyes, as if the brain were torn, like that after intoxication from brandy, increased by moving the eyes; then in the occiput, like a bruise of the cerebellum.'

Or *Nux vomica*,† symptom 84.—'Headache, begin-

\* *Reine Arzneimittellehre*, vol. ii. Jourdan's Trans. tom. iii.

† Vol. i.



ning some hours before dinner, increased after eating ; then violent shooting pains in the left temple, with nausea and very acid vomiting, all which symptoms disappeared on lying down in the evening.'

Or Belladonna,\* symptom 96.—' Pain close above the orbits, with the feeling as if the brain were pressed out, preventing the eyes being opened, and forcing the patient to lie down, with strong contraction of the pupils, and feeble voice.'

As another illustration we may take cough. Its character should be accurately described, whether deep, tickling, hollow, short, hard, spasmodic, dry or moist. The expectoration should be minutely described, whether easy or difficult, copious or scanty, mucous, purulent, frothy, bloody (if pure blood, whether bright or dark), according to the colour, taste, and smell ; and it should also be examined with the microscope, and a few simple chemical tests. It should also be stated what the cough is more immediately excited by, such as itching, tickling, dryness, oppression, &c. in the larynx, trachea, or chest ; also the circumstances that bring on, or aggravate, or ameliorate the cough. And the prover should not neglect to mention minutely the sympathetic or accompanying symptoms, which are very often the only means of obtaining a characteristic of the substance ; such as, pains (accurately described) in the chest, head, or abdomen, dyspnœa, palpitation, nausea, eructation, vomiting, epistaxis, pain in the eyes, ears, &c.

Examples from Hahnemann's *Materia Medica*.—' Dry

\* *Op. cit.* vol. i.



cough during the night, which goes off on sitting up, but returns on lying down again.' Pulsatilla, symptom 617.

' Dry cough, as if coming from the stomach, preceded by a creeping and tickling at the epigastrium.' Bryonia, symptom 398.

' Tickling cough from irritation at the bifurcation of the bronchiæ, from the first loose, with greenish, nauseous, sweetish-tasted expectoration, worse in the evening before going to bed; attended with hoarse voice and rawness of the trachea after each cough.' Stannum, symptom 364.

It is unnecessary to multiply examples, as these may be deemed sufficient: I may therefore say that the same degree of minuteness is to be extended to the observation of all the organs and functions of the system. The state of the mind and temper are also to be carefully observed and noted.

In conclusion, it must be observed, that, as the object of proving is to obtain as perfect a knowledge as possible of the artificial diseased states produced by the medicinal substance, all the care, skill, and knowledge, that are required for the diagnosis of natural diseases are required equally for investigations of this kind. Perhaps these qualities are even more essential in this case, for we have not, in the great majority of instances, the aid which pathological anatomy affords. The first step is to give a perfectly faithful account of all the phenomena, quite unbiassed by any theoretical views or speculations on the part of the observer. The strong tendency to theorize



existing in the human mind may render this task difficult ; but it is absolutely necessary to lay aside any peculiar notions we may entertain, so that our knowledge may be made useful only in directing our attention to all the circumstances which might indicate the exact nature of the affection, carefully abstaining, however, from drawing any deduction ; for, by this introduction of hypothetical reasoning, we should at once take away the purely positive character of the observation.

The works of Hippocrates contain a description of nearly all the diseases that are at present known, and some of his descriptions are as characteristic as any to be found in the works of modern authors, just because he was content to be a faithful observer of nature. His *observations* are consequently as fresh and correct as if made yesterday ; but when he introduces any pathological views, or attempts to theorize, his remarks bear the stamp of the rudeness and ignorance of the times. In like manner, Hahnemann, who may be regarded as occupying the same position with respect to the pathogenetic effects of medicines, that Hippocrates does with regard to diseases, has contented himself with giving pure observations of facts, without ever attempting to theorize upon them, using his physiological and pathological knowledge merely as a guide to what it might be useful to note. His provings consequently contain the germ of all that is now known of the specific effects of medicines, and *they* are as fresh as if made yesterday, being remarkable for containing nothing at all of the theories of the day, most of which, indeed, are since exploded. A purely positive



observation is for all time, and possesses the same value after the lapse of centuries as it does at the moment when first made; but any theoretical view, however scientific, or in accordance with the state of knowledge of the day, must of necessity be imperfect, and only of temporary value. The prover should therefore confine himself entirely to the observation of fact, and leave it to others to draw deductions; or, if he does draw deductions, the facts and the reasoning should be kept quite separate and distinct.



## CHAPTER VI.

### ON THE THEORY OF SMALL DOSES.

BY DR SAMUEL BROWN.

THE homœopathic method of cure is not an absolute novelty. The irregular administration of specific remedies is the oldest way of healing wounds and removing inward maladies ; and it was practised long before the art of medicine had assumed a professional character. Bacon blamed the physicians of his age for overlaying the traditional records concerning the special virtues of simple herbs by their 'magisterial, multi-compounded and confounding prescriptions.' Physicians, however, have not always contradicted, instead of elaborating, the crude conception implied in the ancient popular practice. On the one hand, many of the best of them have devoted themselves to the cultivation of the medical sciences, willing to leave the art as they found it, and instinctively aware that scientific knowledge had to become more extensive and precise before it could be translated into rational practice ; and, on the other, the great improvements which have been made from time to time by the distinguished benefactors of the healing art, do actually come under the homœopathic formula, when investigated with a view to scientific classification. The



astonishing effects, as testified by Willis, of the exhibition of sudorifics in carrying off the fatal sweating sickness of 1485, at a time when it had been destroying ninety-nine cases out of a hundred; the old practice of applying rosewater in diseases of the eye; the successful prescription of spirituous liquors in purely inflammatory fevers, of mercury in syphilis, of peruvian bark in intermit- tent fever, and of sulphur in itch, and the practice of vac- cination, are so many exemplifications of the homœopathic principle of cure. A medical reader, who will take the pains to study the learned introduction to the Organon of the Healing Art, will be astonished to find how easily a mul- titude of the best attested and most striking cases of the happy treatment of disease, in the annals of medicine, arrange themselves under the same category; while he will at least allow that, if it be not necessary to have re- course to the particular hypothesis in question for the pur- pose of rendering these cases intelligible, another one must be discovered, for they fall under no formula yet invented. One might even assert with safety, that the very exist- ence of the phrase *contraria contrariis*, with its logical antithesis *similia similibus*, in the terminology of the profession, shews that the *initiative idea* of homœopathy has never been wanting. Accordingly it is by no means wonderful that Basil Valentine, Paracelsus, Stahl, De Haen, Boulduc, Detharding, Bertholon, Thoury, Störck, and others, have successively inculcated the maxim embodied in the latter with more or less of generality. It was the ingenuous, learned, and synthetical Hahne- mann, however, as all the world is aware, who so strongly felt its practicable meaning as to abandon, once for all,



the routine practice upon the prevalent principles, mixed and motley as he found them in the schools, and to follow the long-known clew into the arcana of the labyrinth, inspired by the faithful hope of discovering some high and homogeneous theory of therapeutics, which might enable him to restore the oldest practice of the world, on the foundation of a scientific basis at once extended and profound. Many admirable men had become aware of the comparative uselessness of the practice of physic, and even suspected it not innocent of aggravating disease and hastening death ; but this truly great physician had the precision to solidify his instinctive apprehension into a conviction of the understanding, the honesty to act on his decision, the bravery to face the overwhelming difficulties of a new investigation, and the reward of eventually succeeding to his own satisfaction. Whether all or any of his great conclusions be founded on the immutable truth of nature or not, the satisfaction with his own results, of such a man, is worthy of the most steadfast consideration by the world.

There are very few medical men now-a-days but become more and more diffident of their art, as well as more and more willing to trust the unimpeded operations of restorative Nature, the older they grow in the service of the profession ; and, indeed, a whole country of physicians seem to have, in some degree, and tacitly, come to the conclusion, that it is better to defer the invention of a therapeutic art, till the advancement of physiology and pathology shall enable them to enter on the work under more propitious auspices, while meantime they will practise their *médecine expectante*, watching and gently guid-



ing the progress of diseases. These French physicians repose upon the authority of ancient and classical usage ; for it is a fact, that the practice of Hippocrates was liker the quiet skilfulness of a judicious nurse, than the energetic counteraction of a modern doctor. The very worst that can be said, then, of the method of Hahnemann is, that, while it is consistent with a coherent hypothesis of the healing powers of medicines, and appears to revive and methodise the primitive practice of early ages, it is the consummation of the plan of doing nothing, with the aid of a confessedly admirable code of diet and regimen. Even in such an aspect of the question, therefore, Homœopathy is the distinct expression of the present practical tendency of the most enlightened school of medical sciences in the world ; and this consideration should recommend it to the profession, as well as to the public. This negative result is of itself something, and should commend the system in general to candid examination, in case it may contain something positive also, and worthy of the most strenuous inculcation. Let those who are accustomed to the employment of microscopes, bruise the pilules of this and that dilution on the fields of vision of their instruments, and say if they actually contain decillionths of grains of platinum, copper, gold, sulphur, and such other substances as are susceptible of microscopical examination. Let anxious physicians, and especially the practitioners of the *médecine expectante*, make trial of the so-called homœopathic method, believing it to be only the perfection of letting nature alone, and then report whether, with their daily results before them, they can any longer suppose that they have not been em-



ploying very powerful reagents, instead of globules of nothing.

Speculative homœopathists may say it is not fair to their cause to imply, as is done here, any inseparable connection between the therapeutical maxim they adopt and their incidental administration of invisible doses. It is allowed that there is no necessary implication of such a bond; but to all practical intents there is a real one. Homœopathy is universally practised with infinitesimal quantities of the medicines administered. There are, in fact, no rules of art constructed for the practice of the homœopathic principle, except with extremely diluted mother-tinctures and impregnated globules of sugar; so that, if any one will practise Homœopathy otherwise, he must address himself to the task of working out an elaborate code of practicable directions for himself and his followers. The practice with invisible doses is so incorporated with the homœopathic formula, that they cannot be separated in the sick-room; although there is no doubt that they are by no means essentially united, so as to be inseparable by the mind. One might venture, indeed, to avow, in the name of the whole ingenuous part of the profession, that it is this connection with invisible quantities, that has rendered the principle *similia similibus* so unacceptable. It is the insensible medicines the profession fights against; and with good reason, till they be rendered welcome to the mind, by some theoretical light and likelihood thrown around the exhibition of them. What reasonable man will give trial to so momentous a scheme, as a new way of dealing with the dying, unless it be first commended to his understanding, as being full of verisi-



militude? Some homœopathists, with the mock-heroic sense of persecution common among the best of innovators, as well as among the worst, are fond of indulging in philippics against the prejudices of the old-schoolmen, as if any one ever was consciously the slave of his foregone conclusions. The truth, on the contrary, is, that there is a vast amount of candour latent among the members of the medical profession, as well as in every other body of men. Once render a plan of action conceivable to them, and they will be the last to grudge it a jury, as fearless as intelligent. Let the disciples of Hahnemann be content to be sneered at, and let them bend every energy to excogitate a congruous and easily comprehensible doctrine of insensible doses; till it shall gradually become as difficult for their present opponents to imagine how their common predecessors could throw such enormous quantities of deleterious drugs into their patients, as it is now not easy to conceive of well-educated men prescribing the decillionth of a grain to a fellow-sufferer in extremity, without concluding that they are either fools or impostors. In a word, this is the great stumblingblock; and, if it were removed, the way would be clear. Not that the want of apparent consistency, with everything else that is known of the operations of nature, would be a decisive argument against invisible medicines, or against any new practice in any other art. By no means; but, in a matter of so grave importance, one must demand some rational initiative before one can be warranted in abandoning a patient to a method of treatment, as startling in enunciation as it is novel in detail. Once satisfied by preliminary reflection that these



impalpable quantities have the copious testimony of Nature in their favour, the physician may conscientiously proceed to administer them in accordance with the homœopathic formula, and eventually decide the urgent inquiry by a cautious, prolonged, and assiduous appeal to his own experience. This is the manly course for the critical practitioner to pursue ; but the advocate of homœopathy has a previous duty to perform : He must harmonize the principle, implied in this practice with invisibles, with the general theory of Nature, so far as that has yet been discovered and received.

There is, indeed, another procedure which has some show of reason in it. The homœopathist may advance his proposition regarding doses as an empirical result, achieved more by the sedulous prosecution of an accidental observation than by forethought, and assert that he will abide by it in defiance of theoretical consistency, having forever established it by the grateful bedside—for himself. Reformers are generally very positive in their temper, and frequently take their innovation for the one fixed and everlasting centre of the world, to which all things must be conformed, or else fall down into loose disorder. One resolute homœopathist after another, accordingly, declares the efficacy of his diminutive pills to be as great as Hahnemann alleges, till there has gathered around the standard of the reformer a body of protestants, so large, so intelligent, so learned, so successful in research, and so able to write, as to constitute a worthy opposition to the predominant school ; and out of the conflict of the two, the philanthropical student of the history of sciences may predict the best results. To the scientific specta-



tor, in fact, this new aspect of the medicine of modern Europe suggests the assurance, that neither party has grasped the whole truth of a possible healing art; that now they must act and react on one another, till a third be eliminated from the contest, destined to strike out an opposition to its own included errors in the course of time: and this new antagonism shall again be resolved by the progress of discussion and discovery.

To return; the numerous able works, asserting the utility of homœopathic practice, on the ground of sheer experience among the sick, are calculated to impress their opponents with the conviction, that there is certainly enough of practical truth in the principle to authorise them to give it a candid trial, since so many of their equals, in whatever is scientific and virtuous, are ready to stand by both the principle and the practice. Let them take the fact of the number and merit of homœopathic physicians and books as their certificate of right to make experiments upon their patients; especially since it shall only be doing nothing at the very worst; and, still more especially, as they are well used to the art of prosecuting experimental investigations of a far more formidable kind, in connection with the custom of exhibiting sensible doses of the most potent and untried of chemicals. Such is one view of the question; but still a theory of small doses is the desideratum.

The professor of mathematics at Prague has endeavoured to supply this want according to his habits of thought, his ability, and his means. Professor Döppler is not a physician, nor yet a homœopathic partisan, but



simply brings the light of a certain physical distinction to bear on the question at issue; being ready, neither to oppose the prevailing school of medicine, nor to abet the followers of Hahnemann; but, having been disturbed, and probably vexed, by the noise of the uncharitable fight around him, being willing to say whatever his own communication with science, elsewhere than in medicine, might enable him to advance to the point.

We suffer from the extreme division of labour in the sciences, though not nearly so much as the world shall eventually have gained; but the disadvantages of this endless isolation on points and little spaces would be very much counterbalanced, if there were some true connection of the physical sciences by living men, instead of only so apparent an union by books. Let there be a helpful chivalry amongst us. Let us honour one another's sincere thought; and strive to further, by every generous means, either its perpetual establishment and promulgation, its judicious modification, or its kindly extinction. Let us revive the fine sense of honourable difference, which controlled and beautified the conflicts of the deadliest foes in the knightly lists of old. Nay, let us come a mark beyond our ancestors, and, knowing there is no such thing as war in nature, but only action and reaction, ending in the supremacy of the better, or else the production of a third which shall be better still, help each other to weapons and opportunity, in order that, if 'God and the right' be not on our side, we may be beaten without delay. In such high-minded contest it were far from ignoble to be vanquished, and all the more glorious to conquer; for victory should be then achieved,



not in the name of one's school, but in behoof of the generous antagonist himself, mankind, and truth.

Döppler published his mathematico-physical considerations on the question of the bulk of medicinal doses in Baumgartner's and Holger's *Journal of Physics*, in 1837. The gist of the argument, he leads out, is to the effect, that the question of greatness, respecting material operations, is altogether relative to the kind of operations investigated. The quantity of caloric in the whole world, if it were expressed, and could be condensed by some Faraday or Thilorier on one scale of the most delicate of balances, would not make it kick the beam so sensibly as the thinnest breath of air, if at all; yet, that latent heat is so magnificent in power, that certain local disturbances of its equilibrium are productive of earthquakes and volcanoes: and Newton used to boast, with that quiet pleasantry of illustration which was as characteristic of him as his sure induction, that, if he were the master of fire, he could pack the planet in a nut-shell. Electricity, too, is said to be imponderable; but the sudden restoration of the interrupted balance, between such quantities of the subtle fluid as are contained in opposing clouds, themselves so diminutive in comparison with the body of the earth, is the cause of the thunder-storm. Nothing created is great or little, except comparatively, and in relation to its effects and the method of operation. Hence there may arise on the very threshold of the inquiry the preliminary question, Whether a medicine act on the frame by virtue of its ponderable quantity; or by the extent of its surface, which is brought in contact with the surfaces of the structures on which it reacts? This



query must be ultimately answered by the extensive observation of physicians, seeking a reply to it; but to the physicist it is plain, that, if the latter be the true rationalé of the operation of medicines (so far as that is physical), the homœopathist, prescribing the decillionths of grains, may, after all, be giving greater doses, in reality, than the allopathist when he exhibits his ounces. So reasons Döppler; and, distinguishing that physical superficies of a body, which is the sum of the exposed surfaces of its exposed particles, he shews that the triturations, practised by the homœopathic pharmacist increase the latter surface, that is, the surface that shall be brought into reaction with the tissues, at a very rapid rate. A cubic inch of brimstone broken into a million of equal pieces, a sand-grain each in size, is magnified in sensible surface from six square inches to more than six square feet. It is calculable in this way that, if each trituration of the homœopathist diminish his drug a hundred times (an extremely moderate allowance I aver), the sensible surface of a single inch of sulphur, or any other drug, shall be two square miles at the third trituration; the size of all Austria at the fifth; of Asia and Africa together at the sixth; and of the sun, with all his planets and their satellites, at . . the thousandth? No; but at the ninth!

The method of trituration is very simple. A grain of the drug to be prepared is carefully rubbed down in 99 grains of soluble, insipid, and pure sugar of milk, which is extensively made in Switzerland from the residuary whey in the manufacture of cheese; a grain out of this 100 is triturated with other 99 of the sugar of



milk: a grain of this mixture of the second dilution is, in its turn, diffused through 99 grains of fresh sugar, so as to produce the third dilution; and so on to the thirtieth, or beyond it.

In connection with the trituration of insoluble solids it has been objected, that if, for example, a million of separate particles be contained in a grain of the third trituration, and that trituration be then diffused through 100 drops of pure water, each drop will contain 10,000 particles; that one of these drops, diffused in 100 of pure water, will give 100 particles in each drop; that the next dilution will yield only one particle for each drop; that consequently, in the next again, there must be 999 drops of water without a single particle of the original metal, or other insoluble body; and that, in fine, the higher dilutions of the homœopathic practitioner are hereby for ever demonstrated to be null and void, at least in the case of insoluble substances. This looks very shrewd, and even has an air of the recondite about it. But who assured the sagacious amateur that the effects of trituration in the way of diffusion, though indefinitely inferior to those of true solution, are to be calculated by petty millions of particles? Besides, there is every probability that the diffusion through the milk-sugar is, at a certain point, consummated to the degree of solution itself by chemical reaction throughout the mass. Molten iron solidified has no action whatever on dry air, and, even when subdivided by filing, does not oxidate itself, without the disponent help of water and carbonic acid; but let it be reduced from the state of hydrated peroxide by hydrogen, at a temperature not too far above the boil-



ing point of water, and no sooner is it shaken out of the apparatus, in which the operation has been conducted, than it bursts into combustion. All bodies can unite chemically with each other, if the proper circumstances be afforded them ; and all solid bodies must suffer mutual reaction, if presented to one another in fine enough division. This is exactly the case in the instance under notice : The insoluble body, say the metal, unites chemically with the sugar, becomes everywhere diffused in a degree of division far removed beyond computation by numbers, and the saccharine compound, probably still insoluble in the true sense of the term, readily passes through the closest filter, and remains suspended invisibly among the particles of the solution. This is surely the reverse of incredible to the chemical analyst. In a word, let such dilet-tanti as found objections on their own limitation of mechanical subdivision, and on their own inadequate conception of the nature of particles, remember the rigorous calculation of an eminent astronomer of their own day, that Encke's comet, vast and wide-spreading as it sweeps through the firmament, is composed of an air so attenuated, that if, by some transcending force, it were compressed to the density of our atmosphere, it might be folded in a walnut ; and they will never attempt the gratuitous task again.

Now, these reflections of Döppler's are certainly important ; but we must not assign them too much value. Even if the supposition on which it proceeds be correct, namely, that surface, not substance, is operant in therapeutics, yet it makes very little for the homœopathic practice, in opposition to the other. It is



strictly applicable, even in theory, only to insoluble medicines ; and how few are insoluble ! To triturate a drug, which water, or the juices of the stomach, can dissolve, would be a weary wealth of labour wasted, so far as expansion of its surface is concerned ; for perpetual trituration and breaking down of agglomerated particles, such as can be brought under the grasp of mortar and pestle, of agate or even the closest grain and the finest polish, were far short of the searching analysis of a solvent. Why, solution of a solid is always preceded by chemical combination ; and then the liquid compound is diffused through the free solvent, in conformity with a law like that of gaseous diffusion. Consequently, in the cases of soluble medicines (that is, in the vast majority of instances), the allopathist actually makes himself and his patient surer of bringing the sensible surface of his physic to bear on the sensible surface of the organism, than the homœopathic practitioner with his triturated powders. In fact, all that this ingenious theory can do for homœopathy is to render it intelligible that utterly insoluble bodies, such as platinum, gold, diamond, or ignited silica, may be made potential medicaments by trituration ; and that is not much. Let us do honour, however, to the professor, for scouting the vulgarity of those pedantic sciolists, who point their petty ridicule at the homœopathic medicines, on account of their minuteness in the unessential properties of size and weight. It is surely time to fling away such partial, and really gross, conceptions of the forces of nature. The very direction in which a power is applied, or in which a weight is allowed to operate, is so immensely more significant than the weight



itself, that Archimedes, after having showered imponderable arrows of sunfire on the enemies of Syracuse, and burned up their vessels of war, wanted but a point to plant his lever, in order to move the world with his puny arm! What is the weight of water with which Watt clips thick iron like paper into shreds; and sends his huge leviathans, throbbing in their irresistible struggle, across the Atlantic, with all but the regularity of the freighted planets themselves? Are not a few pounds of weight transformed into tons, by the mere disposition of them by Bramah, on the principle of the old hydrostatic paradox? Paradox! One had thought the day of paradoxes was over forever now. Everything great is a paradox at first; because our own ignorance makes it strange. To the last of the Ptolemaics it was paradoxical to think that the sky is not a hyaline vault studded with heavenly lights. It was paradoxical to the scholastic contemporaries of Torricelli that nature can endure a vacuum. It was paradoxical to the Stahlian chemists that phlogiston is a nonentity. It was paradoxical to the Royal College of Physicians, that Harvey's circulation of the blood should not be persecuted, by exclusion from their precious fellowship, as an irreligious heresy! It is our own limitation that is the originator of such paradoxes as these.

Illustrations of the manifestations of great forces by little bodies, drawn from the region of pure physics, as distinguished from the study of animated objects, might disabuse us of this vulgarity; and it would be worth while to marshal an array of them before contemptuous objectors, to confound their inbred prejudices. Davy,



fearlessly following the principle of electrical induction by contact, discovered that half-a-dozen square feet of the copper sheathing of the British fleet are rendered electro-negative (that is, the polarities of all the innumerable particles, which make up that extent of surface, are reversed) by a zinc nail driven through the centre of the space, and are thereby protected from the corrosive action of the sea with its stores of oxygen, chlorine, and iodine, everywhere ready to be let loose upon metallic substances. Nay, Sir John Herschell finds, that the relation to electricity of a mass of mercury is such, that it may be reversed by the admixture of an almost infinitesimal proportion of a body, such as potassium, in an opposite electrical condition : and with such electrical conditions are all chemical actions, whatsoever, inseparably connected ; while every one is aware that physiological phenomena are complicated with chemical changes, as well as chemical disturbances with mechanical alterations. So impressed is Herschell with this class of observations as to observe, ‘ That such minute proportions of extraneous matter should be found capable of communicating sensible mechanical motions and properties, of a definite character, to the body they are mixed with, is perhaps one of the most extraordinary facts that has appeared in chemistry.’

This discovery of Davy’s and Herschell’s appears to have suggested to Prout the theory of merorganization. Sugar from the cane, or from diabetic urine, are as similar in composition to the sugar of milk, to manna, and to gum-arabic, as the several varieties of cane-sugar resemble each other : and Prout is of opinion that some body or bodies, other than oxygen, hydrogen, nitrogen,



and carbon, are necessary to the constitution of every substance capable of being digested, and of becoming an integrant of any organic structure; so that the sulphur, phosphorus, iron, and other elements, which at first sight seem to be adventitious ingredients of living bodies, are essential to organization. He explains the extraordinary differences between organic proximate principles of a very similar composition by the presence, of different kinds and in different quantities, of this small proportion of apparently incidental matters. According to Prout these bodies infuse the dissimilarity of properties. Starch is sugar made to differ from it by infinitesimally small quantities of certain merorganic substances, which effect a total alteration of its proximate qualities. Mülder has applied this view to the illustration of the manner in which he conceives those three staple ingredients of the animal tissue, fibrin, gelatin, and albumen, to arise out of protein as from a common root. Dr Daubeny having, in a memoir read before the Royal Society, in 1830, on the saline and purgative springs of Britain, expressed his doubt of the possibility of any medical action being exercised by so insignificant a quantity as one grain of iodine, shed through ten gallons of water (the largest proportion he had ever found), felt himself constrained to announce, in 1831, that the considerations above stated, 'now induce him to attach more importance to the circumstance of its presence; for it is just as possible *à priori* that this quantity of iodine should infuse new properties into the salts which accompany it, and cause them to act in a different manner upon the system, as that less than a millionth part of potassium should create so entire a change in the relations of



a mass of mercury to electricity.' The excellent professor sagaciously and charitably adds, that it is not 'unlikely that the system of the homœopathists in Germany may have grown out of some facts that had been observed with respect to the powerful influence exerted on the system, when even very minute quantities of certain active principles were added to common medicines.' This is a generous suggestion; but it is certainly more remarkable still for its good-natured ignorance of the system to which it professes to relate. Dr Prout was probably nearer the mark when he hinted, in his Gulstonian lectures, that on some principle of this kind the fatal effects of miasmata, diffused through the atmosphere, may yet be interpreted.

Even unorganized nature, then, is an admirable commentary on the narrowness of such partial interpreters as insist upon reducing every manifestation of force to the standard of weight and measure. This, however, is not a physical, but a physiological inquiry. There is that which is a thousandfold more delicate, and more susceptible of every influence, not substituted for, but super-added to, and incorporated with, mere physical sensibility to reaction of every kind. Every thing that has been said about material forms, into which the breath of life has not been inspired, must be affirmed, and more urgently affirmed, of the living frame, with its fearful, though harmonious complication. The physician and his forces have to deal with a quivering epitome of all the species of susceptibility in creation, one kind reacting on another so as to produce a combination of harmony so highly strung, that the prick of a pin shall grate upon every fibre, and a cooling odour, in a hot atmosphere, im-



part refreshment and delight to every nerve. According to the experiments of Leuchs, if the 10,240th of a grain of tartrate of mercury be diffused through the substance of a sweet-pea, the beautiful germ of a graceful flowering herb, which lies folded up within its horny pericarp, shall never come out and be expanded, though you imbed it in the softest mould and solicit it by every art. Before Androclus will a lion, with a paltry thorn in his royal palm, crouch in his rock-built palace, and humbly crave deliverance from the insignificant prickle that has unstrung his fibrous frame. But man is a creature of such exquisite and manifold sensibility to the agency of even physical reagents, that, when the compacted balance of all the parts is disturbed in any one way, and idiosyncrasy is produced, the feel of velvet produces nausea in some ; a ' professor of natural philosophy faints under a sprig of lavender ;' an Erasmus cannot so much as taste fish without a fever ; a Cardinal Haüy de Cardonne swoons at the smell of a rose ; a Scaliger falls into convulsions at the sight of cresses ; and a Tycho Brahe trembles in the awful presence of a hare.

Let a dyspeptic German partake of a sausage in that condition of eremacausis, as Liebig calls it, in which some of its highly complex particles are in the act of falling down into simpler ones at the touch of external oxygen, and the others are ready to do so in their turn ; and it would not be very difficult to comprehend, with the excessively chemical professor, how such decaying molecules, once introduced without assimilation into the current of the circulation, and carried to the lungs, should rapidly spread the tendency to decay, by slow



combustion, among the equally complicated molecules of the blood ; from which it might gradually creep upon the softer solids, and at length fall to gnawing the very ligaments and bones, till the hectic, produced by so universal and devouring an irritation, should put the wan and wasting victim out of pain.

Almost any man in a somewhat asthenic condition of body, passing a fen over-night, and inhaling the overhanging vapours, is seized with a shivering ague, which may engorge his spleen and embitter him for life ; yet the malaria of even the Pontine marshes cannot be extracted, by the most solicitous analysis, from the atmosphere in which it is concealed. All kinds of miasmata have eluded ponderable observation ; yet their effects are, many of them, as sudden, certain, and terrific, as those of the deadliest banes. The morbid ingredient of the smallpox, even when conveyed by inoculation with sensible quantities of matter, must be very trifling ; but the train of symptoms which ensues is not insignificant. The impregnative principles of scarlatina, typhus, and the plague, the victim of the last of which, it seems, must not be approached within several feet on pain of almost certain infection, are surely potent enough in pathogenesis : but what is the bulk, or the weight, of a sufficient quantity to destroy ?

In a word, all the diseases which are known to be produced by the entrance of something foreign into the system, through the natural channels, are introduced by insensible quantities ; so insensible, that we cannot say of what, and so penetrating, that there is no excluding them, but by avoidance. The glass-mask of



Alasco itself, even were it not to break, would not protect the daring experimenter from the torpedo-touch of the invisible, inodorous, and impalpable external cause of cholera morbus, if the internal disposition were not wanting :—the internal disposition; for there are two parties to the production of the anomalous or morbid, as well as the normal or healthy phenomena of life; external agents and the reacting organism. In connection with this simple first principle of physiology stands a silly misunderstanding of Homœopathy, which the majority of its opponents have palmed upon themselves. It is to be understood that Hahnemann and his followers never either inculcated or supposed, that insensible doses can react so powerfully on the healthy frame as to bring out symptoms. Yet the celebrated Andral tried if he should infect himself with intermittent fever by eating globules, impregnated with infinitesimal weights of quinine!

It must not be forgotten that a specific, or specifically exalted, susceptibility must concur with the specific reagent, or degree of common reaction, in order to the elimination of the desiderated phenomena. The internal disposition must not be absent any more than the external disponent. There are two ways in which the former, and two in which the latter, may become abnormal, and so be rendered the causes of morbid manifestations of vitality. That is, there are four simple ways in which disease may be educed; retaining the term disease for the expression of the sum of the abnormal symptoms of life, presented at any given time. The susceptibility to the action of a material reagent may



be merely increased or diminished, so that the effect of the latter, naturally pleasant, shall be painful. In ophthalmia the eye is intolerant of ordinary light; in otitis the ear of ordinary sound; in erysipelas the skin of the gentlest heat; in the idiosyncratic case of Caspar Hauser the organ of tact was so sensitive, that the tenderest touch dealt the unfortunate patient a heavy blow; and so forth. On the other hand, the natural externals of the organism may be merely increased in quantity, or intensified in force; too much oxygen, and repletion of every kind, cold and heat, being familiar as causes of many kinds of disorder. Then the responsivity of the frame, or any part of it, to the natural reagents without may be altered, not only in degree but in kind: as is the case in the numerous instances of perverted secretions from various organs; when the tears, for example, instead of being bland, become acrid and corrosive, or when, instead of the mild mucus from the nose, an offensive purulent matter is discharged. Lastly, the externals may be changed, wonted reagents removed, or unaccustomed ones brought to bear upon the organism; and this embraces the maladies produced by medicines or poisons.

Such are the ultimate efficient elements of disease. In nature they are generally complicated. For the provocation of maladies by miasmata, there must be specific alteration of susceptibility in the frame to become diseased, as well as the presence, in insensible quantities, of the malarious ingredients among the ordinary constituents of the atmosphere. Now it is this natural combination of circumstances which contains the principle fol-



lowed by Hahnemann. He does not expect an insensible dose of medicine to produce symptoms in a healthy organism, but in an organism in which sensibility to the reaction of that medicine is, for the time, unnaturally exalted. Then it is manifest that when the organism is labouring under symptoms the same, or nearly the same, as those which a given drug is known to produce when administered to a healthy subject in large doses, its susceptibility of the effects of that drug is already exalted. Again, it is exactly in this contingency that the homœopathist expects his insensible dose to act sensibly upon his patient. One is ill of intermittent fever, and his sensibility to the action of any body which is calculated to produce intermittent fever, when given in large doses, is anomalously high; but cinchona is such a body (and any one can try whether it is or not upon himself), and consequently it is in intermittent fever that Hahnemann predicts, that an insensible quantity of cinchona shall tell on the system with effect. The effect he anticipates is not the doubling of the malady, but its counteraction or cure, in conformity with the therapeutical maxim from which he starts. It appears, then, after all, that, if that maxim be true, the administration of small doses is the most natural practice in the world. In fact it is exactly as deducible from the homœopathic theory, as the exhibition of sensible quantities is corollary from the enantiopathic principle of cure. Doses of ounces and doses of decillionths are equally rational, when viewed in connection with the respective therapeutical rules, in obedience to which they are severally prescribed; and the contest is only between those rules of cure themselves; if indeed



they cannot be brought into harmony. It is my decided opinion that there is no inherent discrepancy between either the principles or the practices of the rival schools.

It appears, that on the arena of Physiology there exists at present one of those strong manifestations of polarity among the elements of opinion, which occur so frequently on the wider field of the world itself. There are three central ideas in the science. Not one of them has ever been absent. Now one of them has been predominant, and now another; but they have invariably been all present. There is the material, or mechanico-chemical element, which recognises the actual substances of which the living body is composed. There is, secondly, the purely dynamical point of view, or distinct apprehension of a law of vitality, regulating phenomena indubitably different from those which are chemical and unchemical. And, lastly, there is a synthesis of the two, more or less perfect at different times and in different minds; and this is the structural principle of Physiology. It has reference to the law of development, and studies the *processus e latente*, to revive the expressive phraseology of Bacon, by which the aliment of living bodies is woven into suitable structures and convenient forms, in conformity with the law of vitality. The structural physiologist labours, by his dissections, to discover the law of development. The chemist undertakes to trace the material changes which accompany, and are necessary to, development. And the complete physiologist aims at nothing less than the law to which both of these are subordinate.

The successive so-called reformations in medicine have



consisted in the sudden advancement, by influential men, of one or other of these first elements of Physiology to an undue prominence, from a position of previous undue neglect. To take one example, Paracelsus dissipated the cloudy speculations concerning the union of soul and body, which were entertained by the degenerated Aristotelians of his day ; and founded that rude iatro-chemistry, which is now brought forward in an elaborated form by Liebig and his disciples. Although Gay-Lussac and Thenard are the true leaders of the recent movement in organic chemistry, Liebig has stated its connection with physiology the most boldly of their followers, and may be considered as the representative of a large school of chemical physicians. He is the Coryphæus of the new iatro-chemistry and its eager proselytes. In him the chemical element of physiology is suddenly developed to excess. In Hahnemann and his followers there is the idea of vital dynamics, in direct opposition to, and exclusive of, the iatro-chemical principle. Liebig has arisen to counteract the excessively dynamical character of Hahnemann's conclusions. They are not only opposites ; but they are polar. They are mutually positive and negative. It is between these extremes that the battle of opinion is fought. There is little scientific charity on either side. Liebig denounces the homœopathists with impetuous contempt. Hahnemannians laugh at the doctrines of Giesesen as gross and mechanical. Yet they are both in possession of most important truths ; although there appears to be little prospect of a direct coalition.

In the mean time, there is a class of investigators, deaf to the clamour of both these great extremes. They



concern themselves comparatively little with the merely chemical phenomena of living bodies ; and they contemplate the phenomena of vital dynamics with the eye of delighted curiosity, rather than of determined science. They are the structural physiologists ; men like Müller and Schleiden, Owen and Goodsir. The phytologists and scientific anatomists of Europe look with distrust and dissatisfaction upon the incondite and unskilful attempts of Liebig and his school, to construct a chemical physiology. At the same time, they have no consideration for homœopathy. They are not loudly condemnatory, like the chemists, but they will not investigate it. In truth, they are intent upon the law of development, to which they have been consecrated ; and they pursue their admirable researches with devotion and success. If, however, these three great lines of advance are divergent, they must therefore be converging too, and that toward some deeper centre than the present extremity of any of them. Organic chemistry shall certainly become another science altogether. At present it is only the chemistry of exorganic bodies. It never lays hold on an organic body but the life escapes. It works among the mere exuviæ of that higher force, which the true physiologist apprehends, and endeavours to expound. It is the chemistry, not of life, but of death.

On the other hand, the homœopathic physiologist must learn to take more cognisance of the substantial stuff of which the body is composed, and by the coming and going of which it is sustained. His science is too gasiform. He must fix it in the solid bones, the firm flesh, and the liquid blood of living systems. As a speculator, he is in



danger of becoming attenuated and mystical. But for the best thing about him, viz. the fact that he is a successful and eminently practical physician, his theory might have evaporated long ere now. As it is, there is no man of science, of the present day, stands so much in need of being implored to study other departments profoundly. The apostle of homœopathy should be a very learned man, in order to harmonize the new doctrine, at first sound so discordant, with the old culture and the swelling sciences. This is the task he must perform. His solemn duty is to promulgate his truth, not like a sectarian, but as becomes a catholic member of the universal school of scientific investigation.



## CHAPTER VII.

### ILLUSTRATIONS OF HOMŒOPATHIC PRACTICE.

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WHATEVER weight may be attached to the arguments by which the various systems of medical treatment have been supported by their advocates, still, in the end, the practical value of such systems can be decided only by the test of experience.

To furnish data, however, by which the comparative merits of the different methods of practice may be estimated, it is clear, that, owing to want of control over the patients, neither private nor dispensary practice will suffice. This can be done only in hospitals, where the patients are entirely under the direction of the physician, and where the results may be exposed in a statistical form.

Although, therefore, we cannot in this chapter display the relation, in point of efficacy, which the homœopathic bears to the ordinary method, nor even prove its applicability to general practice, still our object will be amply fulfilled, if, by the narration of a few well marked cases, we can demonstrate experimentally the reality of the homœopathic method of cure, which is still doubted by many per-



sons who have not taken the trouble to investigate the subject ; and especially if we can, at the same time, illustrate some of its more obvious practical advantages.

These advantages we consider of sufficient importance to induce all reflecting medical men, who are sincerely desirous for the advancement of our art, when once convinced of the truth of the homœopathic principle, to devote themselves with zeal and energy to the study and further development of the method of practice founded on it.

Viewed in a purely practical light, apart from all theoretical speculations, homœopathy is exceedingly simple, and may be defined to be the art of curing diseases by the specific action of medicines, *i. e.* the power which medicines possess of simply and directly curing disease, without the intervention of any other apparent action on the system. The foundation on which it is based is, the adoption of the homœopathic principle\* as the law of

\* Although it is not our intention to enter into any theoretical disquisition on the homœopathic principle in this volume, yet I cannot refrain from directing attention to the remarkable analogy which its apparent paradox finds among the phenomena of the physical sciences. *Two loud sounds may be made to produce silence, and two strong lights may be made to produce darkness. \* \* \** The explanation which philosophers have given of these strange phenomena is very satisfactory, and may be easily understood. When a wave is made on the surface of a still pool of water, by plunging a stone into it, the wave advances along the surface, while the water itself is never carried forward, but merely rises into a height and falls into a hollow, each portion of the surface experiencing an elevation and a depression in its turn. If we suppose two waves equal and similar, to be produced by two separate stones, and if these reach the same spot at the same time, that is, if the two elevations should exactly coincide, they would unite their effects, and produce a wave twice the size of either ; but if the one wave should be just so far before the other that the hollow of



specifics, according to which the remedy is to be chosen ; and the administration of the remedies in doses so small that they do not exert any physiological influence on the economy, and are in almost all cases destitute of sensible properties, such as colour, taste, smell, &c.

From these two elements arise all the practical differences between the homœopathic and the ordinary method of practice, which frequently afford a contrast so

the one coincided with the elevation of the other, and the elevation of the one with the hollow of the other, the two waves would obliterate or destroy one another, the elevation, as it were, of the one filling up half the hollow of the other, and the hollow of the one taking away half the elevation of the other ; so as to reduce the surface to a level. These effects will be actually exhibited by throwing two equal stones into a pool of water, and it will be seen that there are certain lines of a hyperbolic form, where the water is quite smooth, in consequence of the equal waves obliterating one another, while in other adjacent parts, the water is raised to a height corresponding to both the waves united.

‘ Now, as sound is produced by undulations—waves in the air ; and as light is supposed to be produced by waves or undulations in an ethereal medium, filling all nature, and occupying the pores of transparent bodies, the successive production of sound and silence by two loud sounds, or of light and darkness by two bright lights, may be explained in the very same manner as we have explained the increase and the obliteration of waves formed on the surface of water.’—See *Brewster's Letters on Natural Magic*, p. 195.

The almost literal correspondence of the above explanation with Dr Fletcher's theory of the action of homœopathic remedies, or rather his adaptation of the Brunonian theory to the explanation of the homœopathic principle, cannot fail to strike those who are familiar with it.—See *Fletcher's Pathology*, p. 490.

But it is not at all meant to be brought forward as an argument for the truth of homœopathic principle ; on the contrary, I am fully aware that nothing can, in general, be more fallacious than physiological explanations derived from the phenomena of the physical world, but it may serve to meet the objections of some who are deterred, *in limine*, by the apparently paradoxical nature of its fundamental principle from entering on the study of Homœopathy.



strong, and, in many respects, so favourable to the former; as, for example, the precision often attained in the choice of the remedy; the absence of depletive measures, thus rendering it peculiarly applicable to complicated cases; the simplicity of prescription; the tastelessness of the medicine; and among others that might be enumerated, one that is no little recommendation in dispensary practice—the very small cost of drugs.

There are several other points of great interest in homœopathy, but as the two above mentioned propositions are by far the most important, we shall confine ourselves chiefly to the illustration of them in selecting the following cases.\*

#### ENTERITIS MUCOSA.

We may first notice a simple case of subacute inflammation of the mucous membrane of the intestinal canal. The patient, M.W., was a girl, five years old, of sanguine-lymphatic temperament, and had previously enjoyed good health. Three or four weeks before admission, she began to lose her appetite and appear ill, but had continued to go to school till about a week before, when she was seized with shivering, cough, pains in the bowels, tenesmus, &c. For these symptoms she got a powder from a druggist, which did no good, and she continued to get worse till brought to the dispensary, when she presented the following symptoms:—

1st, Frequently in the course of the day, pain in the bowels and passing of scanty, black, fœtid stools, followed

\* These cases are taken from the practice of the Liverpool Homœopathic Dispensary.



by tenesmus; belly swollen and tender to the touch; no worms passed.

2*d*, Tongue furred and pale, with red spots; lips dry, cracked, and foul; picks the nose much; face pale and puffed, with stupid expression.

3*d*, No appetite; great thirst.

4*th*, Somnolence in the day; sleep restless, starts, screams that she is falling; pupils dilated and sluggish.

5*th*, Emaciation; great weakness and languor; some short cough.

This is a very simple case, it may be said, and if treated on rational principles, would easily be cured in no long time. It may, therefore, be useful to examine what is called by practitioners of the ordinary method, treatment on rational principles, and compare it, and its issue, with the homœopathic treatment.

An opinion of the nature of the case, such as the following, would first be formed. 'The seat of the primary pathological change, is evidently the mucous membrane of the intestinal canal, especially the colon, and this is indicated by the first and second groups of symptoms. The symptoms of deranged digestion and nutrition are evidently consecutive, and those of disordered cerebral action and the cough are sympathetic. The only rational mode, therefore, of curing such a case, is to remove the primary diseased state; and the *cause* being thus removed, the consecutive and sympathetic symptoms, which are merely *effects*, will also be removed.'

Thus far the mode of procedure is perfectly rational, and thus far both methods agree; but in the manner in which the desired object is to be effected, they differ widely. A very little reflection will shew that the ordi-



mary method is in reality in many respects unmingled empiricism (I use the word in its proper signification); while the homœopathic method, if it be empirical, may at least aspire to the title of rational empiricism. Let us examine, first, the way in which such a case would be treated, according to the ordinary *soi-disant* rational method. One of the first things that strikes us is the extreme diversity of the means which would be employed by different practitioners in a case like this: scarcely any two, it may be said, would treat it precisely alike, each founding his treatment on his notions of pathology and the action of medicines, which, in many cases (especially in respect to the latter), are exceedingly vague and imperfect. We can therefore scarcely be surprised to find among these means many of the most inconsistent and contradictory character. These, it is clear, cannot all be right, and doubtless many of them, if not positively injurious, are at least useless. Among the most common modes of treating the case before us, we may notice the employment of castor oil, or some other mild purgatives; leeches and fomentations to the abdomen; calomel; mercury with chalk; Dover's powder, or opium in some other form; ipecacuanha, alone or with rhubarb; astringents, &c. &c.

Any one, or several of these, would be used almost quite indiscriminately, according to the prevailing fashion of the day, or according to the fancy of the practitioner into whose hands the patient happened to fall; and not unfrequently the whole list would be gone through, and a great many more besides, before the termination of the case.

How far these means, even when successful, act according to the reputed rational principles, it may be not amiss to inquire a little more in detail.



To begin with the treatment by castor oil; one of the commonest modes of treating mild cases of diarrhœa and dysentery. It is difficult to conceive on what rational principle any one, who does not admit the truth of the homœopathic principle, can administer in these diseases a medicine which produces purging and even tenesmus. The common explanation of its action—viz., that it acts by removing diseased secretions—is obviously a mere attempt to get over a difficulty which it is quite inadequate to resolve, as in nearly all cases these diseased secretions are the effect, and not the cause, of the disease; and therefore this procedure would be about as rational as attempting to cure a cold in the head by blowing the nose, or a hæmorrhage by wiping away the blood. But, in reality, most practical men do not pretend to administer it according to any rational principle, but admit that they give it simply because they know by experience that it produces good effects; *i. e.* the practice is purely empirical.

The means usually termed antiphlogistic, when considered as a whole, have as little pretension to rationality; for, to begin with inflammation, its nature is as yet far too imperfectly known to enable us to understand thoroughly the ultimate action of any remedial agent upon it. Indeed, on one of the fundamental points in the nature of inflammation, viz., whether it be an increased or a diminished vital action—two diametrically opposite opinions—the profession are nearly equally divided, so that as both, with singular inconsistency, use the same curative means, at least one half must act quite empirically. And as there are a great many other points in inflammation on which most practitioners hold no opinions at all, in reality



the vast majority treat that diseased state in a purely empirical manner.

Among the so-called antiphlogistic means that might be used in this case, the detraction of blood by leeches applied to the abdomen may, with propriety, to a certain extent, be called rational; for, whatever other changes occur in inflammation, one of its principal features is unquestionably a preternatural accumulation of blood in the capillary vessels, and any beneficial effects produced by means which directly diminish this preternatural accumulation of blood are thus susceptible of a rational explanation. Still that does not explain all the action of the leeches; for it is well known that they are more efficacious when applied to the abdomen in such affections, than when applied to any other part, although, as remarked by Magendie, there is no direct communication between the vessels of the intestine, and those of the integuments of the abdomen; so that even here there is something empirical. Our only objection to leeches in this case is, that, as we shall see presently, they are wholly unnecessary, for it can be cured as well, if not better, without them.

The beneficial operation of calomel in such a case is usually referred to its action as an antiphlogistic, a purgative, or an alterative. The first of these, meaning simply anti-inflammatory, is on a par, in its pretensions to be an explanation, with the celebrated answer about the cause of the hypnotic power of opium, 'Quia est in eo virtus dormitiva.' And if we study the physiological action of mercury, and endeavour to discover on what action on the healthy body this supposed anti-inflammatory power of that medicine depends, we shall find that, so far from pos-



sessing any power of lowering capillary action, as might have *a priori* been expected, it has quite the opposite effect, and, in fact, produces inflammation of those very organs, the inflammation of which it is most signally efficacious in curing, *e. g.*, iritis; so that here again the only rational way of explaining its action, is the admission of the homœopathic principle.\*

The action of purgatives has been already noticed, and that of alteratives will be considered presently. The exhibition of astringents, in a case like this, can have no pretensions to rationality, as the diarrhœa is a mere symptom of an ulterior morbid state, the removal of which latter necessarily entails that of the former also. The same objection applies to opium, if, indeed, the cerebral symptoms be not considered to afford a sufficient counter-indication for its use here. The use of diaphoretic and other so-called derivative or counter-irritant agents, must, how-

\* The action of mercury in inflammation has always been a stumbling-block to those who deny the truth of the homœopathic principle; and quite recently the researches of M. Andral have thrown additional obstacles in their way, by shewing that, in the inflammatory affections produced by mercury, the blood displays that increase in the quantity of the fibrine which accompanies all other inflammations. This at once overthrows the theory of those who attempt to explain the anti-phlogistic action of mercury, by supposing that it causes a dissolved state of the blood, or diminishes the quantity of fibrine. 'Par consequent,' says M. Andral (*Hæmatologie Pathologique*, p. 89), 'lorsqu'on l'administre pour combattre certaines phlegmasies aiguës, la peritonite par exemple, ou n'est pas en droit d'admettre que son action antiphlogistique dépend de ce qu'il crée dans le sang une disposition *inverse* à celle qui coïncide dans ce liquide, avec l'existence d'un état phlegmasique.'

Whereinsoever, therefore, the anti-inflammatory power of mercury resides, it certainly does not reside in any power which that medicine possesses of producing in the healthy body a *contrary* state, either of the solids or fluids.



ever, be admitted to be rational; for although practitioners have not in general any definite idea of the nature of their action, still, as experience has shewn it to be a general law that a diseased action may often be cured by setting up another disease in a different part, this is, to all intents and purposes, a sufficient explanation to entitle the practice to the title of rational. But this painful and uncertain indirect method cannot be compared with the direct or specific method in a case like this, as we shall see presently.

The last of the medicines which we shall notice, that might be given in this case, are those belonging to the class of alteratives; if, indeed, this can be called a class; which is really little better than a receptacle for all those remedies that cannot be forced into any other class, and to which the pride of fancied rationalism is unwilling to give their true name—*specifics*. In the present case, *Hyd. c. cretâ* would probably be given for the ostensible purpose of correcting or altering the secretions. But surely this intention is at least an exceedingly vague one; for the intestinal canal is susceptible of hundreds of distinct kinds of action, and hundreds of medicinal agents are capable of producing each its own peculiar action; it is, therefore, a very easy matter to alter the action in any case, but as there are so many different kinds of morbid states and different kinds of medicinal action, and only one kind of healthy action, how are we to know that the alteration will be precisely what suits the case, and not an alteration for the worse?

It is certainly a fair question to ask him who prescribes any of these medicines, Do you know the action of this



medicine on the healthy body, and if so, have you any law which assures you that that action is such as will counteract the morbid action in this case? He would be compelled to answer, 'No, I never studied its action on the healthy body, and the knowledge of it would be of little use to me, as I do not know any law or principle that expresses the relation between the action of a medicine on the healthy body, and its specific effects in disease. My only reason for giving it in this case is simply that I know from experience that it has been useful in similar cases.' In this instance likewise, therefore, the treatment is empirical.

Thus, in the treatment of the case before us according to the ordinary method, the design, as we have seen, is perfectly rational, but in the execution of it, from the want of accurate knowledge of the action of medicines, and of a guiding principle for their administration, the practice is empirical, and often little better than mere routine.

The homœopathic method of treatment differs widely from the foregoing modes, and is conducted on more scientific and rational principles. The case before us is looked upon as a special affection of a portion of the intestinal canal, the ultimate pathological nature of which our knowledge does not enable us to determine, but which we know we could cure if we could find a medicine capable of producing, in a healthy subject, a precisely similar pathological state. It seems necessary here to advert shortly to an objection frequently urged against the homœopathic method, viz., that it is a treatment of the symptoms only, and does not take cognisance of the disease.

This error arises from a twofold source. *1st*, The confusion that exists in the minds of many writers, both



in favour of and against homœopathy, respecting the mutual relations of nosology, pathology, and morbid anatomy. It must be confessed that Hahnemann has given some countenance to the objection, by denouncing, under the term pathology, all abstract speculations on the ultimate nature of morbid action, and all nosological systems, as tending, by classifying diseases according to certain partial outward resemblances, to bring under one name several morbid states essentially distinct—a practice totally irreconcilable with a specific method of cure: while, on the other hand, some of the adversaries of homœopathy, by taking the term pathology in a limited sense, and confounding it with morbid anatomy, have construed the above denunciation of abstract speculations into a disregard of morbid anatomy, and other objective departments of the science of pathology.

Although, as above said, the object in homœopathic treatment is to adapt one morbid state, by similarity of its symptoms, to another, without any attempt or wish to penetrate into the ultimate nature of the proximate cause, yet, in reality, it is that proximate cause which is the sole object of treatment in the homœopathic, just as much as in the ordinary method; for we must not be deceived in the belief that pathology has as yet taught us, or perhaps ever can teach us, any thing more than the *discrimination* of morbid states from each other, by the attentive study of their symptoms, under which term must be included physiological, anatomical, chemical, and physical.

By the attentive study of the outward signs or symptoms, we are enabled to recognise the existence of one hidden entity, viz., the proximate cause, as distinct in its



rise, progress, and termination, from many other equally hidden entities ; and it is solely on this power of discrimination of one proximate cause from another, and not on any fancied knowledge of its essential nature, that the hope of rational treatment, by whatever method, rests. For example, a constant series or group of symptoms enables us to recognise the existence of a morbid state, distinct from any other morbid state, called inflammation ; and this we shall suppose we have learned, by long experience, to cure whenever it occurs, with the necessary modifications which its seat may suggest, provided we can recognise it. Suppose, then, a patient is brought to the physician, presenting bronchial respiration, dulness on percussion, and pain in one side of the chest, dyspnœa, cough with rusty sputa, frequent pulse, general fever, &c., he, if a pathologist, immediately recognises the proximate cause of these symptoms to be seated in the lungs ; and of the kind which produces the symptoms proper to what is termed inflammation, as it occurs in these organs ; and being able, as we have above supposed, to cure inflammation, he has merely to apply that treatment, with the modifications that the seat may demand, in order to conduct the treatment of the case (as an individual case) in a rational manner. But if he wishes to go a step higher, and attempts to explain the action of his remedies in inflammation itself, there he is at fault, from defective knowledge, both of the ultimate nature of that process, and of the laws of the action of medicines. The homœopathist, however, can go a step higher, and can explain the action of his remedies in inflammation, by referring it to the general law of the action of medicines, termed the



homœopathic.\* It is plain that the homœopathic practitioner requires the same amount of practical pathological skill to enable him to discriminate proximate causes

\* Though the homœopathist can thus advance, with certainty, further than the allopathist can do, without having recourse to one or more of the hypotheses which have been suggested, to explain the proximate cause of the disease, and the action of the remedy,—hypotheses, be it observed, which are often dissimilar, and even opposed, some of which are held by one class of allopathists, and scouted by another,—his advance does not lead him nearer to a knowledge of the proximate cause of the disease, and he is far from supposing that it does. He merely knows and avers, that a proximate cause (be its nature what it may), which produces a certain group of symptoms, can be removed; and in the particular case is removed, by a remedy which has the power of producing a closely similar group of symptoms, and, of course, a closely similar proximate cause as the source of them. His superiority over the allopathist lies in this, that, without assumption of any kind, and in virtue of an incontrovertible law, or general fact, discovered and constantly attested by observation, and observation alone, he can tell that his remedy acts by virtue of a particular property,—unknown, indeed, in the manner of its action, but ascertained to exist by its effects. Doubtless, he may, if he please, speculate on the manner in which it acts, and also on the nature of the proximate cause of the disease which it cures; but then if he make the result of such speculations the ground of his selection of a remedy (among several that may be deemed, in a general way, applicable to certain classes of symptoms), he forsakes the guidance of the general fact referred to, and is just as liable to error as the allopathist. The homœopathist may safely speculate, without limit, on the nature of diseases, and on the operation of remedies, provided he adheres in practice to the rules of the homœopathic law. In point of fact, homœopathists (many of them at least) are just as inquisitive about the proximate causes of disease as most other practitioners are; and if they have not yet speculated much on the manner in which their remedies act, it is simply because the subject is so difficult, in the present state of our knowledge of physiology, and of the intimate properties of matter in general, as to render the attempt utterly hopeless. By and by the difficulty may lessen, and when it does, homœopathists, who have leisure and inclination to search into the philosophy of their art, will not be wanting.

The allopathist has less difficulty to encounter in following, to a certain extent, the operation of his remedies. A scruple of julap purges,



(though simply as entities of an unknown nature) from one another, and adapt to each the appropriate remedy, otherwise he is liable in all cases, and certain in many cases, to be misled by partial outward resemblances (for there is no disease each of the symptoms of which is not common to many other diseases), and mistake one morbid state for another, and thus give a wrong medicine; and not only that, for he is equally liable to make the same mistake in finding the remedy, even after he has obtained a correct notion of the disease.

It is true that an ignorant person, by blindly following the homœopathic law, and merely covering the symptoms, without attempting to analyse them, sometimes, or even

and a scruple of ipecacuan causes vomiting,—the former operation may remove a headach, and the latter may relieve a cough. But a homœopathic dose of belladonna, or of bryonia, does no more than cure the headach and ease the cough; it can point to no diarrhœa, or convulsive retching, as the instruments of its power; after it disappears in the mouth we learn nothing of its doings till it soothes the sufferings for which it was given. It may be easy for the allopathist to give some reason why his purging, or his vomiting, should produce its effect on the head, or on the chest; and, whether right or wrong, no one can refute his asertion, that purgatives determine to the bowels, and thereby relieve the head; and that emetics, by exciting the par vagum in the stomach, relieve the par vagum in the lungs. It is quite possible that it may be as he says, and quite as possible that it may not. At all events, no one can *disprove* his allegation. We, however, have no intermediate commotions, to afford us grounds for an hypothesis to explain the curative action of our remedies. If they produced vomiting or purging, we might entertain and express the same or similar views of their action as the allopathist does of his drugs. But we have nothing, absolutely nothing, on which to hang the fragments of a conjecture, even of what our remedies do after they are swallowed, till they cure. To speculate and theorise in circumstances like these were a folly of the grossest kind, and well might we be deemed, if we did, the enthusiastic visionaries that our opponents suppose us to be.



frequently, succeeds in curing cases that have baffled the best directed allopathic treatment; and this has given countenance to the foregoing objection to the homœopathic method; and it has been also said that any uneducated person is able to practise it by merely following certain rules, without knowing what he is treating. But this arises from the very perfection of the law, which thus occasionally enables therapeutics to take a step in advance of the other departments of pathology; and even the most learned and skilful pathologist still finds, in the practice of medicine, not a few cases to which his pathological knowledge affords him no clue, and to which he can find no precise parallel in medical records; in such cases, the most well-read and sagacious physician is glad to have an empirical law, by which he may possibly hit on the specific remedy, to fall back upon. Such cases, however, still remain exceptional; and though an ignorant person may make brilliant cures, still to practise medicine, *as a whole*, on the homœopathic principle, requires an equal or greater amount of pathological knowledge than the ordinary method. It is a common observation, in places where Homœopathy is well known, that though an ignorant homœopathic practitioner may continue to make from time to time remarkable cures, yet he is no more capable to sustain his reputation, as a practitioner of medicine, than an ignorant allopathist: indeed, less so, from the greater precision required, and the adventitious circumstance of novelty, which exposes him to a severer ordeal.

*2dly*, The want of reflection on the nature of the action of medicines; for it is generally overlooked that no medicine can produce symptoms alone, but that all the



symptoms, even the most trifling, must have their *proximate causes*, just as well as those of natural diseases; and that, in fact, each remedy is an exciting cause of disease, or a remedy, according to the circumstances in which it is administered. The study of the action of medicines is thus a branch of pathology, and one certainly not less important than, and as difficult as, that of natural diseases; for we have seldom opportunities of receiving the aid of morbid anatomy.

But when thoroughly studied, and we have a pathology of the action of medicines, then will therapeutics become really a branch of pathology, and the art and science of medicine present one harmonious whole; the same knowledge and skill being employed to investigate the operation of the causes of disease and that of the remedies; and therapeutics being simply the adaptation of one morbid state to another, thus producing its extinction, and the consequent restoration of health.

Without, therefore, any conjectures or *à priori* speculations about the virtues of medicines, the homœopathic practitioner proceeds to search, among those medicines, the effects of which have been *ascertained by experiment on the healthy body*, for the medicine capable of producing an affection the most nearly resembling the case under consideration.

The case under consideration, as indicated by the first group of symptoms, would seem to be met by a great number of medicines, such as, for example, *mercury, chamomilla, belladonna, arsenic, sulphur, colocynth, veratrum, &c.* *Mercury*, especially, produces, in a marked



degree, diarrhœa, with colic, tenesmus, and all the other symptoms in the group; but neither it nor any of the others produce stools of a *black*\* colour so characteristically as *arsenic*, which produces also other symptoms of the group.

In the second group of symptoms, the state of the tongue in this case is little characteristic. The dry, cracked and foul state of the lips is of more value as a symptom, and is produced by a good many medicines, such as *arnica*, *bryonia*, *mercury*, *veratrum*, &c.; but some of these do not suit the primary symptoms, and none have this symptom more characteristically than *arsenic*.†

The pale and puffed face is also to be found as an effect of many medicines, but of scarcely any so well marked as *arsenic*.‡

In the third group, the want of appetite is a symptom of no value; but the thirst is evidently a sympathetic symptom, as there is no particular heat of skin, or sweating, or other cause to account for it, and it is, therefore, to a certain extent, characteristic of the primary affection. In respect to this symptom, no medicine is more suitable than *arsenic*.§

The fourth group of symptoms is suited by several medicines, for example, *belladonna*, *hyosciamus*, *opium*, *stramonium*, *digitalis*, *nux vomica*, *arsenic*, &c. Of these *belladonna* certainly suits, in this instance, better than

\* Hahnemann's Chronische Krankheiten, 2d edit. art. Arsenik Symptoms, 585 and 586.

† Ibid. Symptoms 289 to 297.

‡ Ibid. Symptoms 263 to 274.

§ Ibid. Symptoms 372 to 385.



arsenic; but as they are merely sympathetic symptoms, and the primary and other symptoms are so much better met by arsenic, it is to be preferred here also.

The other symptoms are of little value, except that the weakness was greater than might have been expected from the duration of the disease; it is, therefore, to a certain extent, characteristic, and, in this respect, no medicine is so suitable as *arsenic*.\*

*Arsenic*, therefore, corresponding perfectly in all the essential symptoms, is obviously a medicine completely homœopathic in this case, and, if the principle be correct, must certainly be the specific remedy. Accordingly, a dose of the 12th dilution (quadrillionth of a grain) was prescribed to be dissolved in a tea-cupful of water, and a tea-spoonful taken twice a-day. The result was, that in a few days, without the use of any other means, the patient was perfectly free from all complaint.

#### MENORRHAGIA.

M. B., æt. 28, of lymphatic-sanguine temperament; pale, leuco-phlegmatic. Had had three children, and been previously healthy. On admission, she stated that six weeks before, when three months pregnant, she had a fall, which brought on abortion, attended with profuse hæmorrhage. She recovered so far as to feel tolerably well, when, about a fortnight before coming to the Dispensary, she was seized with gnawing pains in the stomach, and other gastric symptoms, and two days after, the catamenia came on; but the discharge was so copious that it

\* Hahnemann, *loc. cit.* Symptom 934.



soon assumed the character of hæmorrhage, and had continued increasing till the date of admission.

Her present state is—Discharge profuse, dark-red blood with clots ; great pain across the small of the back, and pains like labour pains.

Face and lips pale, ringing in the ears, and palpitation of the heart ; pulse rapid and feeble ; appetite bad ; tongue flat, flabby, and pale ; gnawing pain in the stomach.

The influence of *Secale cornutum* on the uterus, and its power of producing hæmorrhage and contraction of that organ, and, in fact, bringing on labour pains, is well known to practitioners generally. In addition, the appearance of the patient, the previous abortion, and the dark colour of the discharge, shewed that medicine to be perfectly homœopathic in this case. A dose of the 2d dilution (10,000th of a drop of the tincture) was therefore given, and ordered to be dissolved in a tea-cupful of water, and a tea-spoonful taken every three hours.

The patient returned in a week, and reported, that after the first dose the pains went away completely, and the hæmorrhage began to diminish, and ceased entirely in two days. Tongue natural, appetite better, tinnitus and palpitation gone.

#### EFFECTS OF A BLOW, COMMOTIO CEREBRI.

A. C., a boy of three years old, of lymphatic-sanguine temperament. The child had been healthy at birth, and remained so till a year ago, when he was found paralytic on one side, without any known cause or previous illness, as reported. Under the use of blisters and leeches he had recovered in three months, and remained well up to



the present time, except that the affected limb seemed smaller and colder than the other.

A fortnight ago he received a violent blow on the nose, and soon after was seized with headach, fever, and sickness, which have continued since. His present symptoms are,—

He complains of constant pain, and great heat in the head. In the morning coldness and shivering, followed about 2 P.M. by heat and dryness of the skin all over the body, not succeeded by perspiration. The heat continues during the greater part of the night, attended with much thirst, sleeplessness, restlessness and sickness, and towards morning he falls into a heavy sleep with sonorous breathing.

No appetite; foul tongue and breath. Cannot pass urine during the day, but at night passes a considerable quantity of strong-smelling high-coloured urine. Nothing remarkable was observed in the state of the pupil.

In this case another feature, almost peculiar to homœopathic or specific practice, is brought prominently forward, viz., the aid that is derived in therapeutics from taking into consideration the *character* of diseased action, as manifested by the nature of the exciting cause. In the ordinary practice, the most skilful detection of the exciting cause is often of little use in the treatment, for in general it is either a poison circulating in the system, and incapable of being directly removed, or it has already ceased to operate before the physician is called, as in the case of mechanical injuries, cold, mental emotions, &c., and he has to combat their dynamic effects, which he can only do on the common principles suggested by their seat and more general pathological nature, such as inflamma-



tion, spasm, &c. But, in addition to these, the homœopathic practitioner takes into consideration the *character* or *kind* of inflammation or spasm produced by a particular exciting cause. For example, if we suppose two cases of colic, in every respect, apparently, exactly alike, but the one produced by wet feet, and the other by anger or vexation of mind ; in the former case, Dulcamara would be the specific, and in the latter Colocynth. In like manner, in the case before us, the remarkable influence (noticed by Hahnemann) of Arnica, in the dynamic effects of mechanical injuries, at once suggests to us the propriety of administering that remedy, *provided that, in other respects also, it is homœopathically suited to the case.* But, before going farther, the question will naturally present itself to the minds of many persons, ‘How can Arnica or any other medicine be, strictly speaking, homœopathic in mechanical injuries ; it cannot produce wounds or bruises?’ No, certainly not ; but it is to be recollected that bruises, &c., are not simply mechanical breaking or tearing, or compression of the living tissues, but are accompanied (or rather followed) by a peculiar morbid process, in fact an inflammation of a peculiar kind (generally tending to effusion of blood). Now, arnica produces effects very similar to those which follow injuries, and in this respect it is homœopathic, not only in respect to the affection at the bruised part, but also to many sympathetic effects in other parts of the system. To return to our case, we shall now see if it is homœopathic in other respects as well as in relation to the exciting cause.

The first symptom, pain in the head, is too indefinite to lay any stress on ; the next, viz., heat in the head, is



of more importance in the choice of the remedy, and is one of the characteristic symptoms of Arnica.\*

The shivering in the morning and forenoon, † followed by heat without perspiration, the heat with thirst, and restlessness with sleeplessness, ‡ and the heavy sleep with loud breathing, § are quite homœopathic to the action of arnica. So are the foul tongue and breath, || as well as in a marked manner the retention of urine. ¶

The arnica being then perfectly homœopathic, both in respect to the etiological condition and the existing affection, it was accordingly administered in the 6th dilution (billionth), to be taken night and morning. The result was that in a few days the child was perfectly relieved from all the above symptoms.

#### SCIATICA.

W. J., æt. 44, a tall man of sanguine-bilious temperament; had previously enjoyed perfect health. Five months ago, while at work, he felt a sudden pain across the loins, so that he could not straighten himself. The pain soon extended to the hip, where it has affected him ever since, and latterly to such an extent, that he has been unable to work for the last seventeen weeks; and is pale and emaciated, and worn out with suffering. During that time he had been subjected to a variety of

\* See Hahnemann's *Reine Arzneimittellehre*. Bd. i. art. Arnica. Symptoms 16 to 20.

† *Loc. cit.* Symptom 573.

‡ *Loc. cit.* Symptoms 575 and 579.

§ *Loc. cit.* Symptoms 554, 562. || *Loc. cit.* Symptoms 151, 315.

¶ Symptom 279.



different modes of treatment, but without any relief. His symptoms, when admitted on the 10th March, were violent pain in the hip-joint, moving in shocks down the thigh ; pain much aggravated at night, and *accompanied* by great *shivering* ; he is unable to stand upright ; the hip feels cold ; urinary and other functions normal.

The characteristic symptoms in this case, viz., the aggravation of the pain at night, and its being attended with shivering, corresponding completely to the action of *Pulsatilla*,\* that remedy was accordingly administered in the 18th dilution (sextillionth) twice a-day.

17th.—Pain not so bad ; in other respects the same. Continue *Pulsatilla* in the 6th dilution (billionth).

29th.—The pain is quite gone from the hip, and he is, on the whole, so much better as to be able to return to his work. He complains still of pain in the calf of the leg, shooting down to the feet, worse at night, *accompanied* by *numbness of the leg*.

This last circumstance points now to *Chamomilla*† as the proper remedy ; it was therefore given in the 3d dilution (millionth).

14th April.—The affected leg is quite well, but on change of weather he has had occasionally slight pain in the other leg. *Rhus toxicodendron*, 6th dilution.

When inquired about, at the beginning of June, the patient had continued quite well.

In this case we have to remark the much greater efficacy of the 6th than of the 18th dilution of *pulsatilla*.

\* Hahnemann *Reine A. M. Lehre*. 3d edition, vol. ii. pp. 274, 318.

† *Ibid.* 2d edition, vol. iii. p. 86.



## PERTUSSIS, DIARRHŒA, AND EPILEPSY.

The next case that we may notice is one of peculiar interest, as it displays in a striking manner one of the greatest advantages of the homœopathic method, viz., its peculiar fitness for complicated cases. This is a class of cases in which all truly practical men will hail with gladness any improvement in the practice of our art; for how often does it not happen that the physician is obliged to stand by, as it were, with his hands tied, and witness the progress of the disease to a fatal termination, the patient being too weak to admit of the (supposed) necessary depletive or other energetic measures being put into operation; or in a complicated case, that the treatment necessary for one affection is counter-indicated by another: nay, has it not even frequently happened that the patient has been cured of the disease under which he laboured, and yet sunk from the effects of the treatment?

M. W., a delicate child, *ætat.* 2.

Since the commencement of teething, has been subject to epileptic fits, which come on quite irregularly. They are preceded by a scream, and in the fit the eyes are open and fixed, and the whole body convulsed.

For many months she has had diarrhœa, with frequent thin dark-coloured motions. Not vaccinated. Four weeks ago took small-pox, and, when scarcely convalescent, a week ago was attacked with hooping-cough.

When brought to the Dispensary on the 8th of January, the following symptoms were observed:—

Pale and emaciated appearance; livid marks from the small-pox still visible on the back, legs, &c. Cough,



with distinct whoop ; it comes on chiefly at night, when she has seven or eight fits, accompanied by pain in the sternum and blueness of the face, but without expectoration or vomiting. In the intervals the breathing is short, and she complains of pain in the anterior part of the chest. Thin, watery, dark-coloured, sometimes bloody stools, seven or eight times a-day. Up to the 25th, she received Belladonna 12 and 6, Ipecacuanha 3, Arnica 6, Tart. emet. 4 ; but the attendance was irregular, and the disease on the whole continued to make progress. The diarrhœa ceased, but the cough became more violent, and was accompanied with more pain and with prolapsus ani ; it assumed also this peculiarity, that in the middle of each fit there was a pause for about two minutes, and then it began again. Within the last few days, also, the dyspnœa became greater, and there was constant great thirst, general fever, and soreness of the whole body. On the 25th, she was too ill to be brought to the Dispensary, but the course of the disease, and the above symptoms, left no doubt that inflammation of the lungs had supervened, although a personal examination was not obtained that day ; accordingly, Phosphorus 6, was given, to be dissolved as usual, and administered every four hours.

On the 27th, the pain in the chest was much diminished, the breathing freer, and the other symptoms much relieved. On the 29th, she was free from pain in the chest, in all respects better, and the cough had assumed the character of simple hooping-cough, but not so frequent nor so violent. The fit ends in sneezing. To have two single doses of Hepar Sulphuris, dil. 3.



On the 3d of February, it was reported that on the 1st she had a bad epileptic fit, in which she bit her tongue, 'turned black, and lay as dead for about two hours.' Since then she has been delirious, grasping at every thing, kicking, and apparently terrified at imaginary objects; she is quite sleepless, and cannot lie still in one position for a minute, but is constantly tossing about; much thirst; skin alternately hot and bathed in perspiration; bowels confined; the cough is not so bad. Belladonna 12, every six hours.

5th, Has slept a good deal; no longer delirious; less feverish; cough more frequent, and during a fit of it she grasps the head and supports it with her hands; head hot, and tender to the touch; she lies in a dozing state, waking often; some appetite; bowels open. Conium 3, every six hours.

7th, All cerebral and febrile symptoms have subsided, and the cough is not so bad. Drosera 2, three times a-day.

Under this she recovered rapidly and completely, and when again seen (in June), had remained perfectly well, with the exception of one slight epileptic fit.

#### CHRONIC BRONCHITIS.

R. F., ætat. 58, of nervous-bilious temperament, had been previously quite healthy, with the exception of weakness in the back, which had troubled him since he had a fall fifteen years ago.

March 22. 1842.—A year ago, when working in a damp cellar, he was attacked with a cough, &c., which



have continued to trouble him since in spite of various remedial means. His present symptoms are :—

Cough, coming on in fits, particularly after lying down at night ; these fits of coughing are accompanied by great dyspnœa and pain in the back, and last till he expectorates a small quantity of tough yellow mucus, generally about half an hour ; appetite bad ; gnawing pain in the epigastrium an hour or two after meals ; for the last month diarrhœa, six or seven loose motions daily ; frequent desire to pass urine, which is scanty, clear, and passed with difficulty.

He received Arsenic 12, to be taken in water, a dose twice a-day.

On the 12th of April he returned and reported himself completely relieved in all the above symptoms, except the pain in the back.

#### PLEUROPNEUMONIA.

A man, æt. 28, of bilious temperament and robust frame, called on me on the 3d of Feb., complaining that he had been attacked the day before with pains in back and side, and cough. These symptoms still continued, and in addition he had headach, shivering, pains in the limbs, and prostration of strength, so that he was obliged to leave his occupation. He received Aconite 3, and Ipecacuanha 3, a dose alternately every 3 hours.

On the 4th I found him in bed, where he had passed a restless and sleepless night. The cough was almost constant, attended with expectoration, which had not been kept ; shooting pains in the right side of the chest, aggravated on coughing and on deep inspiration ; breath-



ing short and difficult, the number of the respirations 36 ; pulse 104, but soft ; skin hot and moist ; tongue foul, no appetite, much thirst ; urine high coloured ; prostration of strength.

*Physical signs.*—In the lower and posterior half of the right lung there was complete dulness on percussion, and absence of vesicular murmur, which was replaced by bronchial respiration and occasional crepitating râle.

Prescription—Phosphorus 3, every 4 hours.

5th Feb. In every respect much better. He had slept much, and often for several hours in succession. Cough less ; sputa scanty, but viscid and rusty ; scarcely any pain in the side, except on deep inspiration ; pulse 86 ; skin cool ; bowels not opened. Physical signs the same, but more diffused crepitating râle. *Cont. Med.* In the evening, after having talked too much with a friend, he became worse again, and the pulse rose to 100, skin hot, increased cough and dyspnœa, with pain in right side.

Two doses of Bryonia 3, were ordered at an interval of 3 hours, and then the Phosphorus to be continued every 3 hours.

6th, Pulse 80. Cough again less, and pain only on deep inspiration. Sputa still rusty and viscid ; less thirst ; some appetite ; bowels confined ; tongue coated.

*Physical signs.*—Complete dulness in the whole inferior half of lung, except a small portion anteriorly ; no respiratory sounds can be heard, except occasionally subcrepitant râle at the edge of the dull part.

Prescription—Interpose two doses of Bryonia 2, and continue the Phosphorus as before.



9th, Pulse 60. Little cough ; with white, tough and frothy sputa, no longer rusty ; no pain in the chest, only feeling of tightness on deep inspiration ; appetite good ; tongue nearly clean ; bowels once moved with an injection of tepid water. Has slept for 7 hours without waking. The dulness diminished in extent, and some indistinct respiratory murmur is heard at parts previously dull, but none at the parts which are still dull.

Prescription—Tincture of Sulphur, a dose every 3 hours.

Next day he was dressed, and in 4 or 5 days the dulness had quite disappeared, and he was able to resume his usual occupations.

We would almost consider that in many instances of the treatment of acute inflammations, the medical art has reached its limit of perfection in the homœopathic method.

The patient, attacked with a disease, the tendency of which is either fatal, or to serious and tedious organic derangement, has merely to lie in bed, with such a restriction of diet as the disease would almost of itself enforce, swallowing, at stated intervals, a minute dose of medicine, and in a time as short as the nature of the morbid process will allow, he is restored to health, without any painful or depletive measures, or even the nauseous taste of medicine.

The degree of certainty of this favourable result, too, has not been hitherto equalled by any mode of treatment ; for the reports of the Homœopathic Hospital at Vienna shew a mortality in pneumonia, varying in different years from 1 in 13 to 1 in 20, or even smaller.



## GASTRODYNIA.

G. W., a man *ætat.* 39, of bilious-nervous temperament. His health had been generally good, with the exception of a similar stomach complaint about twenty years ago, and six years ago he had typhus fever, which was followed by ulceration of the left leg.

For his present complaint he had (as he said) taken, without any benefit, almost every kind of medicine that could be thought of.

When admitted on the 22d April, he presented the following symptoms, which had affected him for the last three years :—

Sharp pain in the epigastrium, as from a knife, shooting through to his back, and sometimes to the right side ; worse before meals, and on stepping hard, though he is never quite free from it. It comes sometimes in paroxysms so violent that he is obliged to bend double, and cannot straighten himself. These paroxysms are accompanied by eructation of wind and sour fluid, and sometimes by sickness and vomiting of yellowish fluid, occasionally tinged with blood ; the epigastrium is tender to touch, and the pressure of tight clothes insupportable ; appetite good, and tongue pretty clean ; bowels costive ; lightness of the head, and occasional dimness of vision.

A drop of the second dilution of *Nux vomica* ( $\frac{1}{100000}$ ) was administered dry on the tongue at the Dispensary, and he was told to come back in a week, a few inert powders being given with him to take in the interval.

On the 30th he stated that, for the first three days after taking the medicine, he felt aggravation of his com-



plaints, but since then he has been gradually getting better ; bowels still confined.

A drop of the first decimal dilution ( $\frac{1}{10}$ th) was now given in a powder of milk sugar, along with several inert powders, and so numbered that we could know, although he did not, on which day he took the medicinal powder.

On the 10th of May he stated that he had been quite free from cramp, or any pain in the stomach for several days. The bowels are now regular ; lightness of head and dimness of sight relieved ; he complains of distension and nausea after meals. He perceived no aggravation after any of the powders.

Three doses Chamomilla 1 ( $\frac{1}{100}$ ) one every other day.

17th May ; no sickness or distension after meals ; but he has had some smarting raw pain in the stomach and under the breast, relieved by eating. Arsenic 12 (quadrillionth) one dose, and 6 (billionth), one dose to be taken at an interval of a week.

On the 7th of June he came back on account of a blow he had received on the leg, which had caused the old ulcer to break out afresh. He stated, that for some time he had been quite free from complaint in the stomach ; and said he 'felt as if he had a new stomach.'

This case is interesting in respect to the dose. After the first dose of *Nux vomica*, there was a marked aggravation of the symptoms, followed by decided amelioration. This affords an example of what is called the homœopathic exacerbation—a phenomenon which is generally to be looked on as a favourable sign, as it shews that the remedy is quite homœopathic to the case ; but its occurrence is by no means necessary to the cure, nor is it even a



common attendant on it; on the contrary, as far as our experience goes, it is met with only in a small number of cases, being in fact rather a rare phenomenon. It is generally attributed to the dose being too large, while, at the same time, the remedy is quite homœopathic. This is undoubtedly true in many cases; but there are nevertheless other cases in which it will not apply at all as an explanation. In the case before us, had it been acted on, the practitioner would have reasoned and acted thus—‘the medicine is evidently rightly chosen, but the dose was too large; it had better therefore be repeated in a higher dilution, the 12th or 18th for example.’ Undoubtedly, if this had been done, the improvement would have continued to make progress, and no farther exacerbation would have been experienced, and the case would then have been quoted as a proof of the correctness of the above opinion. Nevertheless, nothing would have been more erroneous than such a conclusion; for there was actually given a second dose, in quantity a thousand times greater than the first (in fact, one of the largest doses used in homœopathy, viz., 1—10th of a drop of the strong tincture of *Nux vomica*), and yet not the least exacerbation was produced, but merely a rapid and permanent amelioration.

There is another circumstance that has been observed in reference to the dose of homœopathic medicines, which appears to us to afford a more satisfactory explanation of the fact above narrated; but we forbear to enter farther into the subject here, as we think it desirable that all theoretical speculation should be avoided as much as pos-



sible in homœopathy, till a greater number of facts have been collected by competent observers.

In selecting the foregoing cases, it is not at all intended to hold them up as specimens of extraordinary cures which we are enabled to effect by the increased resources of homœopathy, but merely as examples of the difference of modes of treating ordinary cases, such as we meet with in practice every day; nor is it meant to imply that all cases are equally successful. On the contrary, we are quite aware and ready to admit, that, in many cases, we are able to give only partial relief, or none at all; which indeed we can easily conceive must of necessity occur, when we consider, on one hand, the nature of disease, many forms of which are necessarily irremediable, and others are so variable and uncertain in their symptoms, as to make it impossible, even when they are curable, to fix at once, in every case, on the appropriate remedy; and, on the other hand, the still imperfect state of pathology, and the comparatively limited resources afforded by our *Materia Medica*.

But, as said before, our present object is not to give a comparison between homœopathy in its present state, and the ordinary method, but merely by a few well-marked cases to shew the truth of the homœopathic law, and the practical application of it.

This, we conceive, is the only way in which the superiority of any mode of treatment over others can be forcibly impressed on the mind; for, in a statistical calculation made from a number of cases, the mere difference of



a few per cent. in the treatment of cases, often very different, although nominally arranged under the same head, gives far too vague and abstract an idea to make much impression on the mind of an inquirer, and in reality affords but too often food for the doubts of the sceptic of the utility of medical treatment altogether.

It is, indeed, only by having constantly in the mind striking examples of homœopathic cures, and thus keeping in view the degree of perfection to which the practice of medicine might be raised if we could carry out the application of the principle to its full extent, that we can derive encouragement to undertake the arduous task of adopting a new therapeutic law, involving no less than a complete reformation of medical practice. For much yet remains to be done before homœopathy can approach the degree of perfection to which it is capable of being raised, and the practice of it at present is beset with numerous difficulties, some of which will always attend it, as being inseparable from specific treatment.

It requires, in practice, a more careful examination of the case, a more accurate knowledge of pathology, and discrimination of nicer shades of diseased action, the abandonment of the complicated and useless classifications of the nosologists, the extension and improvement of our means of diagnosis; and, above all, a more extended and accurate knowledge of the action of medicines, both on the healthy and diseased body, but more especially on the former. As our knowledge, however, advances in these respects, we may look for the attainment of a degree of perfection in the healing art hitherto considered beyond our reach.



It behoves, therefore, all medical men earnestly to join in the work of reforming the practice of medicine, the road to which has been opened by the discovery of Hahnemann; and it is the peculiarity as well as the excellence of this method, that it is in the power of every one to contribute his share to the work, as it requires merely careful and accurate observation of the specific action of the individual articles of the *Materia Medica*.



## CHAPTER VIII.

NOTICE OF THE HOSPITAL OF THE SISTERS OF CHARITY  
IN VIENNA, WITH A TABULAR VIEW OF ALL THE DIS-  
EASES TREATED THERE FROM 1835 TO THE END OF  
1843.

BY DR FLEISCHMANN, PHYSICIAN TO THE HOSPITAL.

THIS Hospital was opened in 1832. Dr Mayerhoffer treated, up to the 1st of November of the same year, 193 cholera patients, of whom 105 recovered, and 88 died. In this epidemic he began to make himself well acquainted with homœopathy, and, up to the time of his retirement, he treated most of his patients homœopathically.

It was under the management of Dr G. Schmid from July 1833 to January 1835 ; in which time there were 582 patients received, of whom 468 recovered, 34 were dismissed as incurable, 56 died, and 27 remained in the Hospital.

In January 1835, the management of the Hospital was committed to me ; and at the very outset, I got rid of all other drugs ; for I wished rather that to the system should be given a decided trial in my hands, than that the result should be ambiguous from my mode of treatment. I treated all patients, without exception, homœopathically. When the visitation of cholera reappeared in 1836, I reported the happy issue of my treatment to the



Government, and the minister Count Kolowrat, who is ever forward to advance and protect whatever is good and useful, graciously took up the matter; and very soon afterwards his Majesty issued an order cancelling the statute which forbade the practice of homœopathy.

Since that time there began in Austria a new era for homœopathy, which diffused its beneficial operation on all sides. The homœopathic physicians could now prosecute their profession without fear of transgressing the law, and their number has tripled itself in Vienna. There is scarcely a province in Austria, out of which there have not come physicians to study homœopathy practically in this hospital; and many who have since prosecuted the practice with zeal and success in Germany, Italy, France, and England, received their first instruction in this hospital. In Linz, an hospital has been opened, and the results are most gratifying; and in two other provinces, similar establishments are in progress of erection.

The new method has made more impression upon the public, as is exhibited, among other things, by the increase of out-patients at the hospital. In 1839, the number of out-patients was scarcely more than 3000; in 1840, it was 4106; in 1841, 4300; in 1842, 4798; in 1843, 6826.

Homœopathy has not only extended itself externally, but it has consolidated itself internally. Those who have recently adopted it are, for the most part, young, energetic men, who strive to keep pace with all the improvements in medicine, and do not hesitate to shake off the gaudy trappings which mysticism and quackery had hung upon homœopathy.



Medicines are diligently being proved over again; a journal is established, in which every one may communicate the result of his experience, and advance the science according to his ability. We look with confidence to the gracious resolution of the Government respecting the desired Chair of Homœopathy; and thus, by the combined efforts of those who are in earnest with homœopathy and medicine generally, will the clouds which still bedim our sky disperse.

TABULAR VIEW OF THE CASES TREATED IN THE HOMŒOPATHIC HOSPITAL OF THE SISTERS OF CHARITY FROM 1835 to 1843.

“ Il n’y a rien de plus positif, ni de plus éloquent, que les chiffres.”

NAPOLÉON.

	Remaining from 1834.	Admitted.	Cured.	Dismissed uncured.	Died.	Remaining.
Abscess in the brain, . . . . .		3			3	
Amenorrhœa, . . . . .		10	10			
Aneurism of the heart, . . . . .		1			1	
Aphthæ, . . . . .		5	5			
Apoplexy, . . . . .		9	4	2	3	
Ascites, . . . . .	1	13	10	1	3	
Asthma, . . . . .		2	2			
Bronchocele, . . . . .		1		1		
Burns, . . . . .		18	16			2
Cancer of the stomach, . . . . .		2			2	
of the uterus, . . . . .		3		2	1	
Caries of the bones, . . . . .		5		5		
Cataract (commencing), . . . . .		2		2		
Catarrh, . . . . .	1	43	44			
Chest (rheumatic and gouty affec- tions of the), . . . . .	1	47	47		1	
Chlorosis, . . . . .		80	79			1
Cholera, . . . . .		24	21		2	1
Chorea, . . . . .		4	3	1		



	Remaining from 1834.	Admitted.	Cured.	Dismissed uncured.	Died.	Remaining.
Club-foot, . . . . .		8	6	2		
Colic, rheumatic, . . . . .		1	1			
inflammatory, . . . . .		1	1			
menstrual, . . . . .		15	15			
painter's, . . . . .		28	28			
Congestion of the abdominal vis- cera, . . . . .		2	1		1	
Convulsions, . . . . .		12	12			
Cough, . . . . .		9	9			
chronic, * . . . .		130	119	1	7	3
spasmodic . . . . .		18	18			
Croup (Bräune), . . . . .		1	1			
Delirium tremens . . . . .		4			4	
Diarrhœa, . . . . .		114	112		2	
Distortion of the foot and knee,		7	7			
Dropsy, general, . . . . .		12	11		1	
Dropsy, ovarian, . . . . .		1		1		
Dysentery, . . . . .		44	42		2	
Emphysema of the lungs, . . . . .		2			2	
Epilepsy, . . . . .		1		1		
Epistaxis, . . . . .		1	1			
Erysipelas of the face, . . . . .	4	177	177	1	2	1
of the foot, . . . . .		31	31			
Fever, bilious, . . . . .		9	9			
catarrhal . . . . .		175	168		3	4
cerebral, . . . . .	3		3			
continued, . . . . .		294	279	1	10	4
gastric, . . . . .	2	516	512		3	3
inflammatory, . . . . .		37	36		1	
intermittent, . . . . .		229	227		1	1
low, . . . . .		1	1			
milk, . . . . .		1	1			
putrid, . . . . .	2	1	2		1	
rheumatic, . . . . .	1	556	555			2
typhus (abdominalis), . . . . .	3	816	669	2	140	8*
worm, . . . . .		1	1			

\* Giving a mortality of about 19 per cent., while the average mortality of Continental typhus is about 33 per cent.; and, according to Chomel, this average is pretty constant, whichever of the various methods of treatment employed by allopathic practitioners be adopted.—See Chomel's Lectures upon Typhus Fever.



	Remaining from 1834.	Admitted.	Cured.	Dismissed uncured.	Died.	Remaining.
Fractures, . . . . .		1	1			
Frozen feet, . . . . .		5	5			
Furunculus, . . . . .		1	1			
Gangrene of both feet, . . . . .		1		1		
Gastricismus (dyspeptic affections),	1	116	116			1
Gastric derangement, . . . . .		25	25			
Gastrodynia, . . . . .		31	31			
Gout, acute and chronic, . . . . .	2	100	97	1	4	
in the hip, . . . . .		6	6			
in the head, . . . . .		34	34			
Hæmatemesis, . . . . .		1	1			
Hæmoptysis, . . . . .		50	47		3	
Hæmorrhage, . . . . .		20	19		1	
from the trachea, . . . . .		1	1			
from bursting of a blood-vessel, . . . . .		2			2	
Hæmorrhoids, . . . . .		18	18			
Headaches, chronic, . . . . .		6	6			
gastric, . . . . .		8	8			
gouty, . . . . .		3	3			
nervous, . . . . .		1	1			
rheumatic, . . . . .		43	43			
Heart (organic disease of the) . . . . .		15		7	8	
(palpitation of the), . . . . .		2	2			
Herpes, . . . . .		20	19	1		
Hoarseness (chronic), . . . . .		6	6			
Hydrocephalus, . . . . .		6			6	
Hydropericardium, . . . . .		2	1		1	
Hydrothorax, . . . . .		7	1	1	5	
Hypochondriasis, . . . . .		3	3			
Hysteria, . . . . .		6	6			
Inflammation of the articulations,	1	210	203		2	6
aorta, . . . . .		3	3			
bladder, . . . . .		3	3			
brain (membranes), . . . . .		17	15	1	1	
bronchial tubes, . . . . .		15	15			
cellular tissue, . . . . .		3	3			
ear, . . . . .		4	4			
eyes, . . . . .	1	30	30	1		



	Remaining from 1884.	Admitted.	Cured.	Dismissed uncured.	Died.	Remaining.
Inflammation of the eyes (strumous),		20	20			
gland (parotid), . . .		3	3			
gland (thyroid), . . .		1	1			
heart (endocarditis),		29	29			
intestines, . . .		6	1		5	
kidneys, . . .		1	1			
larynx, . . .		4	3		1	
liver, . . .		6	6			
lungs, . . .		300	280		19	1*
mamma, . . .		1	1			
muscles, . . .		1	1			
muscles of the chest,		3	3			
ovaries, . . .		3	3			
pericardium, . . .		2	2			
peritoneum, . . .		105	100		5	
pleura, . . .		224	221		3	
psoas muscle, . . .		1	1			
spinal marrow, . . .		1	1			
spleen, . . .		2	2			
throat, . . .	1	299	299		1	
throat (gangrenous),		1			1	
uterus, . . .		1	1			
veins, . . .		2			2	
Influenza, . . .		52	51		1	
Insanity (amentia), . . .		2		2		
Jaundice, . . .	1	35	36			
Leucorrhœa, . . .		2	1			1
Liver (affection of the), . . .		1	1			
Mania (acute), . . .		12	10	2		
Marasmus, . . .		1			1	
senilis, . . .		6		1	5	
Measles, . . .		25	23		2	
Medullary sarcoma of the liver,		1		1		
of the eye, . . .		3		2	1	
Menorrhagia, . . .		14	14			
Miliaria purpurea, . . .		7	4		3	

\* This is a much more common disease in Vienna than in Britain. See Report of Dr Skoda's division of the General Vienna Hospital for the treatment of diseases of the chest, in the *Österr. Med. Jahrbücher* for 1843-44.



	Remaining from 1834.	Admitted.	Cured.	Dismissed uncured.	Died.	Remaining.
Nervous debility (general), . . . . .		4	3			1
Nettle-rash, . . . . .		3	3			
Œdema of the lungs, . . . . .		14		1	13	
Paralysis, . . . . .		5	5			
rheumatic, . . . . .		2	2			
Phthisis, . . . . .		98		27	71	
Porriigo capitis, . . . . .		6	6			
Psoric eruptions, . . . . .		12	10	2		
Pterygium, . . . . .		1	1			
Ptyalism, . . . . .		1	1			
Purpura hæmorrhagica, . . . . .		2	2			
Rheumatism, acute and chronic,		188	188			
Scalds, . . . . .		1	1			
Scarlatina, . . . . .	2	33	31		2	2
Scrofula (general), . . . . .		7	4	1	2	
Small-pox, . . . . .		136	120		11	5
Spasms, . . . . .		43	43			
Spasms of the bladder, . . . . .		1	1			
chest, . . . . .		3	3			
stomach, . . . . .		33	32		1	
uterus, . . . . .		1	1			
Spleen (affection of), . . . . .		1	1			
Sprains of the foot, . . . . .		6	6			
arm, . . . . .		1	1			
Stomach (induration of), . . . . .		6		6		
(softening of), . . . . .		1			1	
Strabismus, . . . . .		2	2			
Swelling of the cheek, . . . . .		29	29			
cervical glands, . . . . .		2	2			
foot, . . . . .		4	4			
hand, . . . . .		3	3			
lip, . . . . .		1	1			
lymphatic (absces- sus lymphaticus), . . . . .		1	1			
knee, . . . . .		11	9	1		1
knee (white), . . . . .		4	4			
lacteal, . . . . .		1	1			
neck, . . . . .		2	2			
Tape worm, . . . . .		1		1		



	Remaining from 1834.	Admitted.	Cured.	Dismissed uncured.	Died.	Remaining.
Tetanus, . . . . .		2	2			
Trembling of workers in metal,		1	1			
Tuberculosis (general), . . . . .		1			1	
Ulcer of external thorax, . . . . .		5	5			
foot, . . . . .		55	52		1	2
hand, . . . . .		3	3			
lips, . . . . .		1	1			
lungs, . . . . .	1	43		25	18	1
nail (onychia), . . . . .		5	5			
scrofulous, . . . . .		30	26	2	2	
stomach, . . . . .		2		2		
throat, palate, and gums,		10	9		1	
Varicella, . . . . .		110	106		1	3
Vertigo, . . . . .		3	3			
Vomiting, . . . . .		25	25			
chronic, . . . . .		3	3			
Urine (incontinence of), . . . . .		1	1			
Wounds of various kinds, . . . . .		34	34			
Zona, . . . . .		4	4			
Total, . . . . .	27	6524	5980	112	407	52

NOTE.—The surgical cases were treated by Dr Breuning.

In addition to the above, 32,000 out-patients were treated during the nine years ending in 1843, who were prescribed for twice a-week at the dispensary of the Hospital.

#### CASES OF PNEUMONIA.

1.—Ferdinand K., aged 22, a gold-beater; eight days before his admission into the Hospital on the 7th of April, was seized, after having been exposed to cold, with violent shivering and stitches in the chest. The patient



complains of great weakness ; the head is hot ; the tongue is coated ; there is much thirst, and short and anxious respiration ; a stitch is felt in the right side with every breath he draws, with frequent severe dry, short, cough ; pulse full and hard, 120 ; percussion normal anteriorly, dull posteriorly ; bronchial respiration and bronchophony are audible behind.

Phosph. :—2d dilution every three hours.

On the 9th, the patient slept little, and was very restless ; respiration oppressed. The slightest motion brought on a cough which could not be allayed, and attended with violent shooting pain ; skin hot and dry, no change in the physical signs.

Phosph. :—The patient has passed perfectly sleepless nights ; the cough is not so frequent ; some thick expectoration ; some mucous rales are heard along with the bronchial respiration : pulse 100.

13th and 14th.—The restlessness and pain in side have decidedly diminished, the cough is less frequent ; the expectoration glutinous ; the skin moist ; the pulse 86.

On the 16th and 17th, the patient slept for four hours quietly ; the cough is slight, seldom, the expectoration tough ; the percussion less dull, and crepitation, and in some places vesicular respiration are audible. From this time the improvement went on rapidly, and the patient was dismissed quite well on the 24th of the month.

2.—Joseph G., aged 29 ; five days before his admission he was attacked with vomiting, followed by shivering and heat, with stitches in the side. He was admitted on the 12th of January. The head is hot and giddy ; the tongue coated ; the taste bitter, appetite bad ; thirst is



increased; respiration is short and anxious; the expectoration frequent, gelatinous, attended with severe cough and stitches; the pulse 100; the percussion dull under the right clavicle, and the respiration on that side generally bronchial.

Phosph. :—3d dilution every four hours.

Almost no change for the next three successive days. On the ninth day of the disease, a copious sweat occurred; the patient slept quietly for some time; the cough slighter and less frequent; the pain lessened so much that on the 18th of the month medicine was discontinued, and he was dismissed perfectly well in a few days afterwards.

3.—Elise K., aged 32, of a slight make, was admitted into the Hospital upon the 25th of November with the following symptoms, after having been for some days under allopathic treatment. The patient has an almost cadaverous smell, and complains, in a voice scarcely audible, of great weakness and violent stitches in the side. The head is confused; the brow covered with cold sweat; the cheeks have a circumscribed patch of red; the lips are blue; the tongue thickly coated, violent thirst, respiration oppressed; cough frequent, attended with tough rust-coloured expectoration; the extremities cold, the pulse small, weak, rapid, 124; percussion tympanitic under the left shoulder, at all other parts dull and empty; strong bronchial respiration.

Phosph. :—2d dilution every two hours.

On the 26th, the night was sleepless; constant delirium; dyspnoea is very great, the cough is very painful, expectoration difficult; there is great prostration on the evening of the same day. The patient is very restless;



the voice very weak and tremulous, considerable delirium, the expectoration of the sputa is effected with great difficulty; the limbs are very cold; the pulse scarcely perceptible.

Phosph. :—1st dilution every hour.

The symptoms continued unchanged until midnight, when she fell asleep for some hours, and from her sleep she awoke with consciousness.

Jan. 27.—Decided improvement. The patient answers questions quite naturally; breathing is easier; respiration bronchial at the upper part of the chest, and attended with râles over all the rest; the expectoration copious, easily detached; the skin warm, the pulse 114. As the improvement continued on the 28th, the 3d dilution of *phosph.* every four hours was substituted until the 2d of May, and after that the convalescence was allowed to proceed without medicine altogether, and she left the hospital perfectly well upon the 12th of May.

4.—Veronica H., aged 23, of a weak frame, irregular in her menstruation; was seized three days before her admission with shivering, followed by heat, oppression of the chest, and cough. On her admission on the 14th of April, she complained of oppression of the heart, loss of appetite, great thirst, stitches and pressure in her left side. The respiration is hurried and short; the cough attended with pain, without expectoration; percussion elicits a dull sound below the left shoulder blade, where there is bronchial breathing and slight bronchophony; pulse 90.

Prescription:—*Aconite*: 3d dilution every three hours. No change on the following day.



April 16.—Sleep much disturbed; thirst increased, skin hot; respiration oppressed; cough more frequent and more constant, attended with considerable pain; no expectoration; pulse 110; physical signs unchanged.

Phosph. :—3d dilution every three hours.

April 17.—No change.

April 18.—The patient has slept some hours; the skin is somewhat moist; the cough, though frequent, without effort, and with little pain. The expectoration copious and tough; pulse 96; percussion gives a less dull sound, and mucous râles are audible.

April 22.—Medicine discontinued; and the patient was discharged well on the 27th.

5.—Heinrich H., aged 21, of strong constitution, formerly in good health, was admitted into the Hospital upon the 23d of March, having been seized two days before with shivering, followed by heat in the chest, in consequence of hard work in the open air in cold weather. On his admission he complained of great prostration of strength, anxious dreams, pains in the head, intolerance of light, loss of appetite, great thirst and pain in the chest. The respiration is short, hurried; the cough frequent, brought on by the slightest movement, hollow, without expectoration; the skin is hot, dry; pulse 110; percussion posteriorly on the left side dull; the breathing strongly bronchial; bronchophony.

Prescription :—Phosph. : 3d dilution every three hours.

March 24.—The patient has slept little and restlessly; he coughs more easily, however, and expectorates rusty-coloured matter, mixed with blood. Pain is less; pulse 90. No change on the two following days.



March 27.—A quiet night ; the patient is lively ; less thirst ; skin moist ; the cough easy, with much expectoration, without pain ; respiration freer ; percussion-sound almost normal ; breathing slightly bronchial, attended with crepitation.

Phosph. :—every three hours.

On the 30th the medicine was discontinued, and on the 6th of April he was dismissed well.

6.—Ignaz H., aged 19, a peasant of strong constitution, lively temperament, always healthy previously, was admitted on the 28th of April, having been seized six days before with shivering, followed by pain in the side, cough, and bloody expectoration, for which he had taken various domestic medicines, without effect. The face is flushed, the eyes very bright ; the skin hot and dry ; the head confused and giddy ; the tongue coated ; complete loss of appetite ; much thirst ; respiration short and anxious ; on every effort to make a deep inspiration, and on the slightest motion, there are severe stitches felt in the right side of the chest ; cough frequent, fatiguing, with much bloody expectoration ; percussion on the right side anteriorly and below the scapula posteriorly dull ; sonorous and sibilous rattles are heard anteriorly, and bronchial respiration behind ; pulse 100.

Prescription :—Phosph. : 4th dilution every four hours.

The following day there was no change, except that the pulse fell to 90.

April 30.—The skin is cooler and moister ; the thirst more moderate ; cough slighter and less frequent ; the respiration easier ; the urine very turbid.



May 1.—The percussion sound is normal ; the breathing slightly bronchial ; much crepitation ; the patient coughs only 3 or 4 times a day, without pain ; pulse 80. On the 4th no medicine was required, and on the 10th he was dismissed perfectly cured.

#### PNEUMOTYPHUS—TYPHOID PNEUMONIA.

7.—Joseph F., aged 36, of a strong constitution ; never ill before, was admitted on the 5th of April, having been seized with shivering, followed by pressive and stabbing pain in the breast, which was much aggravated by his frequent cough. He presented the following symptoms on his admission : great restlessness ; sleeplessness, with considerable delirium ; the head pained and giddy, hot to the feel ; the face very florid ; the tongue coated, dry, almost cracked ; burning thirst ; the respiration quick, short, and difficult, attended with severe stitches in the right side ; the cough frequent, the sputa copious, thin, fluid, saffron colour ; the breath offensive ; the abdomen very sensitive, tympanitic ; frequent dark, watery, offensive, stools passed unconsciously. The skin hot, dry ; the pulse small, weak, 116. Percussion gives an empty sound on the upper anterior right side of the thorax ; on the lower part, both anteriorly and posteriorly, the sound is dull ; on the left side it is clear above, but slightly dull below ; the breathing is bronchial ; bronchophony is heard.

Prescription :—Phosph. : 2d dilution every three hours ; cloths to the abdomen, and a cold enema.

On the 6th and 7th no change, except increased delirium.

April 8th.—The patient was a little quieter, and slept



two hours. The skin is slightly moistened with perspiration; the tongue thickly coated, but no longer dry; the respiration still short and hurried, but fewer stitches; the expectoration tough and glutinous; the abdomen sensitive, but soft; only one brown pulpy stool; pulse, 110; bronchial respiration on the upper right side of chest, and numerous râles below.

Phosph. was continued, and the cold cloths and enemata discontinued.

April 9.—Decided improvement. The patient slept for several hours without delirium; and the respiration is easier and more prolonged; the pain only felt on taking a deep breath; the cough is trifling; the sputa are copious and easily detached; the diarrhœa has entirely ceased; the skin is soft, inclined to perspiration; the pulse is 110. Much mucous rattle is audible.

April 10.—Visible improvement; phosph. 4th dilution every second hour was given. On the 13th, when he was about to be pronounced convalescent, he was attacked with parotitis, which ended in suppuration, but which soon got well under the use of *merc. sol.* 3d dilution; so that he left the Hospital quite well about the end of April.

There is no doubt that pneumonia may be cured by various homœopathic medicines; yet I have been quite convinced, by the experience of many years, that it is cured by no medicine so rapidly and certainly, without any other aid, as with phosphorus; and I am inclined to believe, that a pneumonia which phosphorus does not cure is *as yet* incurable by the homœopathic method.



## CHAPTER IX.

### COMPARATIVE MORTALITY OF CERTAIN ACUTE DISEASES TREATED ALLOPATHICALLY AND HOMŒOPATHICALLY.

NONE of our professional readers can be ignorant of the advantages which have accrued, both to semeiotics and practice of medicine, from the general adoption, in the principal schools of clinical instruction, of the numerical method of ascertaining the importance of the phenomena of diseases, and determining the value of different modes of treatment. We may, therefore, spare ourselves the labour of a lengthened disquisition on the subject. The objections which have been urged against it do not at all affect the use we make of it in this chapter; and to shew that they do not, is the chief object of the observations with which we introduce the tabular statements that close our volume.

Before the numerical method, or simple arithmetical computation, was applied to practical medicine, it was very difficult to arrive at considerable accuracy in the general descriptions of individual maladies, or to attain an exact estimate of the relative usefulness of the expedients proposed for their removal. When physicians



took no other means of intimating the results of their experience, either in noting the phenomena of diseases, or in treating them, than the belief or impression which remained in their minds after the occasions of it had passed away, they were exposed to the very serious liability of imparting conceptions of what they had observed founded rather on opinions than on facts. And what made this the more disadvantageous to the progress of the art than may at first sight appear, is, that opinions even of such seemingly unmistakeable matters as the sensible phenomena of disease, and their indubitable course and terminations, founded on a retrospective belief of their general character, are far from being beyond the bias of favourite hypotheses. Many cases of the same disease do not occur to one practitioner but in the lapse of a considerable time, and with intervals, commonly lengthened, between them; and, as no one can maintain himself absolutely free from speculation on the nature of the diseases which he encounters, certain phenomena and results which seem to sanction the views which have been formed of them, will naturally assume the principal place in his remembrance and in his writings. Among the numerous objects presented in the course of almost every disorder, no one can be at a loss for some to countenance his particular pathological opinion, and, therefore, to claim the foreground of his picture; and so, without the severe guidance of arithmetic, and records to afford it, the natural history of disease is ever contaminated by the whispers of hypothesis.

The mortality which attended different methods of treatment was wont to be specially uncertain, and unfit



for a practical use. When physicians could not tell the per-centage of deaths which happened in their practice in a particular ailment, they were reduced to the indefinite assertion that they had found this or that remedy the most successful. But as none could give an exact account of his success, when they happened to disagree there could be no grounds for a general conclusion respecting the relative worth of conflicting advices.

It appears incontestible, that, for the purposes of assigning to particular symptoms their true character for constancy, and, therefore, their true diagnostic importance, and of ascertaining the comparative value of certain methods of treatment in the same disease, an arithmetical representation of the frequency of the several symptoms, and of the average mortality attending different modes of practice, is altogether indispensable. The exceptions which have been taken to the arithmetical method apply to neither of these objects. But exceptions are very justly taken against such an interpretation of the method as would render it an absolute arbiter of the line of practice to be adopted in every individual case. To take an illustration from allopathic experience—a physician who bleeds every one of his fever patients loses one in every six; another who gives wine to all his fever patients loses but one in every nine. The average success is incontrovertibly in favour of the stimulant practice; but does it follow that no fever patient should be bled, or that every fever patient should get wine? Certainly not. If the physician who confined himself to the stimulating, had sometimes adopted the depleting method, instead of one in nine he might have lost but one in



twelve. The necessities of individual cases are never to be disregarded at the instance of average results, otherwise there would be an end to discrimination in practice.

All that can be justly concluded in reference to the average success of opposite or dissimilar remedies for a disease, is, simply, that a greater number of cases occur which admit of being cured by the one than by the other; and not, assuredly, that all the cases that are capable of being cured are so by the remedy which displays the lowest average mortality. No doubt, by a conceivable minuteness of statistical calculations and classifications, averages might be struck in favour of this, or of the other practice, respectively, as preferable in particular circumstances of sex, age, temperament, vigour, predominant peculiarities in the symptoms, &c.; but, practically, such refinements would be found impossible beyond a very limited extent; and, therefore, each practitioner, while he keeps that remedy mainly in view which in common cases affords the greatest average success, must occasionally relinquish it for the direction of other dictates of experience and reflection, though they may not have been reduced to numerical precision.

These observations apply equally to the homœopathic and allopathic systems of practice; but they have not been intended to bear upon the comparison which our tables exhibit between the average results of the two. That is limited to a few of the most important acute inflammations, in consequence of the want of data for a more extensive comparison. The contrast which it presents between the average success of the homœopathic and of the allopathic method is so much in favour of the



former, that it may be fairly doubted whether results, furnished by a practice which should embrace both methods—in some cases the one, in some the other, according to the supposed necessities of particular cases—would display a greater amount of success. The mortality from the homœopathic method is so small in those inflammatory diseases, that it is hardly to be supposed that any system, or combination of systems, can afford more satisfactory results. To have enabled us to be fully satisfied on this point, we should have required a full detail of the cases which terminated unfavourably in the practice of Fleischmann, that an estimate might be formed of the benefit which might have followed the adoption, in the treatment of them, of the allopathic remedies. If, as we believe, the cases which were fatal in his practice were of that sort which are the most commonly fatal under the ordinary method, the conclusion in favour of the exclusive adoption of the homœopathic method, in those diseases, would be unexceptionable. Yet, in the absence of such a detail, the disproportion of success between the two methods is so very great, that there is no room for qualifying the preference which should be given, on the general ground of statistical averages, to the homœopathic practice. While such seems to be the fair inference from the subjoined tables, in so far as they establish a much stronger claim in favour of the homœopathic, compared with the allopathic, practice, the objection against seeking in the average numerical success of one remedy, contrasted with that of another, for an absolute guide in the selection of the means of cure, within the compass of homœopathy, retains all the force to which we have al-



ready adverted. No numerical results can ever supersede the necessity of discrimination in the treatment of particular cases, by the homœopathic, any more than by the allopathic, practice.

To the ordinary practitioner we have to suggest one pregnant theme for reflection before closing our remarks. Are such remarkable facts in favour of homœopathy, as are exhibited in the following tables, the results of leaving diseases to nature, as some men in their ignorance occasionally assert? The public source from which these facts are derived, and the acknowledged proficiency of Dr Fleischmann in the art of diagnosis—a proficiency attested by the foes as well as the friends of homœopathy—leave, as the alternatives in this matter, either the admission that the homœopathic practice is positive and powerful in the cure of diseases, or the assertion, that the secret of its success lies in a negative quality, the not opposing the curative resources of unassisted nature. If the latter be true, what a fearful judgment must necessarily be formed of the allopathic method! If unaided nature cures fourteen out fifteen cases of inflammation of the lungs, what should be said of that method of practice, which, by opposing her efforts, saves only four out of five. In other words, if, out of a hundred cases left to nature, only seven die, what is the value of that system under which, out of a hundred similar cases, twenty die? This view is one of momentous consequence to the practitioners of medicine; and we trust it will have its due effect in leading them seriously to reflect on their responsibility—on the awful circumstances in which they voluntarily place themselves, when they meet facts such as these with indifference or contempt.



*Mortality in Cases of Pneumonia treated Allopathically.*

Authorities.	No. of Cases.	Deaths.
* Grisolles, . . . . .	304	43
† Briquet, . . . . .	364	85
‡ Edinburgh Infirmary,	222	80
§ Skoda, . . . . .	19	4
	909	212
Total, . . . . .		

Mortality, 23.32 per cent., or nearly one out of every four.

*Mortality in Cases of Pleuritis treated Allopathically. ||*

Authority.	No. of Cases.	Deaths.
Edinburgh Infirmary, . . . . .	111	14

Mortality, 12.61 per cent., or about one in every eight cases.

*Mortality in Cases of Peritonitis treated Allopathically. ¶*

Authority.	No. of Cases.	Deaths.
Edinburgh Infirmary, . . . . .	21	6

27.61 per cent., or more than one out of every four.

\* Sur la Pneumonie.

† Arch. Gen.

‡ Report of the Edinburgh Infirmary from July 1839 to October 1841.

§ Oesterreresche Med. Jahrbücher for 1843.

|| Report of Edinburgh Infirmary, *ut supra*.

¶ Report of Edinburgh Infirmary, *ut supra*.



*Mortality of Cases of Pneumonia treated Homœopathically.*

Authority.	No. of Cases.	Deaths.
Fleischmann, . . . . .	229	19

6.70 per cent., or about one death out of fifteen cases.

*Mortality of Cases of Pleuritis treated Homœopathically.*

Authority.	No. of Cases.	Deaths.
Fleischmann, . . . . .	224	3

1.24 per cent., a little more than one in a hundred.

*Mortality in Cases of Peritonitis treated Homœopathically.*

Authority.	No. of Cases.	Deaths.
Fleischmann, . . . . .	105	3

4.76 per cent., or rather less than one out of every twenty-five cases.



Department of Chemistry

Chicago, Illinois

February 10, 1954

Dear Mr. [Name]:

I have your letter of the 8th and am glad to hear

that you are interested in the work of the

Department of Chemistry.

I am sorry that I cannot give you more information

at this time.

I will be glad to answer your questions when you

write again.

Sincerely,  
[Name]

Director

Department of Chemistry

University of Chicago

Chicago, Illinois

Enclosed are the following items:

1. A copy of the report of the

Department of Chemistry.

2. A copy of the report of the

Department of Chemistry.

3. A copy of the report of the

Department of Chemistry.

4. A copy of the report of the

Department of Chemistry.

5. A copy of the report of the

Department of Chemistry.



## APPENDIX.

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ON M. ANDRAL'S HOMŒOPATHIC EXPERIMENTS IN  
LA PITIE.

BY DR IRVINE OF LEEDS.

It is evidence of the intrinsic excellence of Hahnemann's system, that it has made its way without the sanction of great authorities in medicine. The coldness or disfavour with which the heads of the profession regard it, are, however, not the less to be regretted, having served too well to excuse, in the minds of many, an indolent inattention to its claims. The opposition has chiefly been made on theoretical grounds, and on these we have met it in the preceding parts of this volume. In one or two instances, however, distinguished practitioners of the old school have made actual trial of the system, before declaring it to be erroneous. This course is to be commended, in as much as that it implies a denial of the possibility of an *à priori* decision on the value of the system, and recognises experience as the sole rightful umpire in the matter. It is to be regretted, however, that the observers have deviated from the course, recommended alike by reason and usage, of stating the experiments in such detail as may satisfy the reader that they bear out the conclusions drawn from them. If this precaution may ever be safely



laid aside, it is clearly not in inquiries where a previous bias towards the conclusion arrived at, may, without breach of charity, be suspected.

Such trials of Homœopathy are by this omission put beyond our reach ; and we shall, therefore, say nothing further on them. We propose, however, to dwell at some length on one to which the remark is but partially applicable, having been made amenable to criticism by the publication of the details. We refer to the series of experiments, instituted several years ago by Professor Andral, at the Hôpital de la Pitié at Paris. And it seems of peculiar importance to take up these experiments, first, because none are so frequently and so triumphantly referred to by the opponents of Homœopathy, in proof of the inefficiency of the system ; and, secondly, because the high standing of M. Andral, both at home and abroad, entitle us to consider this trial as a favourable specimen of the class ; the more so as the Academy of Medicine evinced the high value they placed upon it, by making it the main ground of their decision against Homœopathy in the year 1835. We have, therefore, made a careful study of the published accounts of these experiments, contained in the sixth volume of the *Bulletin Général de Thérapeutique* (Sept. 1834), and would invite such of our candid opponents as may chance to peruse these pages, to look with us for a little into the details of the trial.

When we are told (p. 319) that a faithful application was made of the "principles and ideas" of Hahnemann ; that the diet was such as he prescribes ; that the experiments were made on an extensive scale, and continued uninterruptedly for several months ; finally, that the cases were noted down with "scrupulous attention," and digested in "immense and well drawn up tables," by M. Andral's "interne," M. Maxime Vernois ; the reader is inclined to suppose that all the conditions requisite to make such a trial conclusive were observed ; and when he then learns that out of 54 cases treated,



only 8 were permanently benefited, he is ready to conclude that the trial was most damaging to Homœopathy. Such an inference would, however, be premature, and we think erroneous; and we proceed to adduce our reasons.

Before proceeding to comment on the treatment pursued, we think it right to lay the cases themselves before our readers, as committed to writing, with 'minute attention,' by M. Maxime Vernois himself, and made public in the journal referred to. We shall thus at once escape any risk of unconsciously misstating the facts, and avoid the charge of intentional perversion of them. We only regret, that, for some reason unassigned, 19 of the 54 cases, or more than one-third, those, namely, occurring in the two first months, have been kept back. That there were good and sufficient reasons for so doing, we are willing to believe, but should have been better pleased had they been assigned; for not only is it not consonant with the usual procedure in matters of science to give but a partial view of the facts, but, considering the great importance and the public bearing of the subject in hand, nothing but the most cogent considerations could justify the withholding of any of the data on which the conclusions were based. If the results of these 19 cases were less favourable to homœopathy than those of the 35 which are given, M. Andral must have felt that, by detailing them, he would have added to the force of his conclusions, and would thereby have been able to deal a more effectual blow at the inefficacious and, therefore, dangerous system; if, on the other hand, they shewed homœopathy in a more favourable light, one would have supposed that candour and impartiality would have ensured their publication.\*

\* M. Andral made many more experiments after this article appeared, but did not publish any account of them. Indeed, he probably had not the means of doing so; for, so loosely had everything been managed, that, when giving his evidence on the subject before the Academy, he was unable to state the number of patients he had treated. See *Leon Simon, Lettre a M. le Ministre de l'Instruction Publique. Paris, 1835.*



We proceed to the cases, of which there are 35, which we have numbered for facility of reference.

*Aconite, 24th dilution.* 1st patient, aged 25. Disease, gastritis. Predominating symptom, intense fever. Effect, the pulse fell 2 beats in 24 hours; next day the eruption of small-pox appeared.

2d patient, Intermittent fever of a quotidian type; predominant symptom, action of the heart. No effect.

3d, Acute angina; predominant symptom, intense fever. Effect, diminution of the sore throat, and falling of the pulse.

4th, Phthisis; predominant symptom, frequency of the pulse. Effect, falling of the pulse.

5th, Acute arthritis; predominant symptom, frequency of the pulse. Effect, a violent headache.

*Arnica, 6th dilution.* 6th, Pulmonary symptoms; predominant symptom, great giddiness. No effect.

7th, Cerebral congestion; predominant symptom, violent vertigo. Effect, the patient said he experienced immediate relief.

8th, Hydro-pericarditis; predominant symptoms, giddiness and vertigo. No effect.

9th, Dysmenorrhœa, with chronic gastritis; predominant symptom, very violent headach. No immediate effect; improvement on third day.

*Belladonna, 24th dilution.* 10th, Hemiplegia; predominant symptom, confusion of sight. No effect.

11th, Bronchitis; predominant symptom, violent cough. No effect.

12th, Bronchitis; predominant symptom, violent cough. No effect.

13th, Affection of the optic nerve; predominant symptom, considerable confusion of sight. No effect.

14th, Heart-disease; predominant symptoms, giddiness, vertigo. No effect.

*Bryonia, 30th dilution.* 15th, Intermittent fever; predominant symptom, flying pains. No effect.



16th, Hypertrophy of the heart; predominant symptom, acute pain at the epigastrium. No effect.

17th, Acute arthritis; predominant symptom, pain at the shoulder. No effect.

18th, Pleurodynia, with bronchitis; predominant symptom, continual fits of coughing. No effect.

19th, Chronic gastro-enteritis; predominant symptom, violent pain in the left knee and shoulder. No effect.

*Colchicum*, 15th dilution. 20th, Acute arthritis; predominant symptom, violent pain, with redness and swelling of both wrists. Effect, abatement of the pain.

21st, Lumbago; predominant symptom, violent pain in the loins. No effect. This woman was bled.

22d, Tubercular consumption; predominant symptom, stitch in the left side. Effect, abatement of the pain.

*Hyoscyamus*, 12th dilution. 23d, Pulmonary consumption; predominant symptom, violent cough. No effect.

24th, Pleurisy, with bronchitis; predominant symptom, violent cough. No effect.

25th, Bronchitis; predominant symptom, violent cough. No effect.

*Mercurius solubilis*, 6th dilution. 26th, Mercurial trembling of the upper and lower limbs. No effect.\*

27th, Syphilis, ulceration of the glans. No effect; the ulceration making progress, destroyed the frenum; the disease was checked with mercurial ointment.

\* This case shews how little M. Andral understood the system he undertook to test. Homœopathy (as the name, indeed, indicates) proceeds on the principle of similarity, not identity; and we challenge any one to point out a single passage in all Hahnemann's writings, to justify such a practice as was here followed. Indeed, such an idea as is implied in this experiment is refuted by daily experience; for were it true, the last dose of a drug should neutralize the effects of its predecessors, and there would be no such thing as lasting medicinal disease. This case, then, has no title to the place it occupies in a series of experiments on Homœopathy.



*Nux vomica*, 24th dilution. 28th, A woman aged 21. Dysmenorrhœa, with chronic gastritis; predominant symptoms, very great dyspnœa. No effect.

29th, A woman aged 22. Dysmenorrhœa, with chronic gastritis; predominant symptom, dyspnœa. No effect.

30th, A female aged 18. Amenorrhœa; predominant symptom, inclination to vomit. No effect.

*Pulsatilla*, 24th dilution. 31st, Chronic gastro-enteritis; predominant symptom, diarrhœa. Effect, sensible improvement.

32d, A woman aged 22. Chronic gastritis; predominant symptoms, diarrhœa, with colic. No effect.

*Chamomilla*, 12th dilution. 33d, Diarrhœa without colic. No effect.

*Opium*, 6th dilution. 34th, Affection of the uterus and the heart; predominant symptom, obstinate constipation. No effect.

*Plumbum metallicum* (dilution not stated). 35th, Obstinate constipation, which had lasted eight days. No effect. It only yielded to purgatives.

Let us now inquire if there is virtue in these 35, or say 54 experiments to shake our confidence in Homœopathy.

The first condition which must be fulfilled to make experiments on this or any other system of any value, is, that the experimenter be thoroughly conversant with the principles of that system. This is so obvious as to need no proof. Now, it is manifest that M. Andral had either never read, or, having read, had forgotten the Organon of Hahnemann, when he made the experiments in question. Let any one peruse that part of the Organon which relates to the taking of the case (par. 84-105), and then say if every one of the cases we have transcribed does not manifest, on the part of Andral, an utter ignorance or neglect of the fundamental principles of the doctrine. Hahnemann repeatedly and earnestly enforces the maxim, that it is only by attending to the totality of the



symptoms that we can obtain such an image of the disease as shall be serviceable in determining the choice of the remedy. M. Andral, however, instead of drawing a finished picture of the disease, contents himself with indicating a single feature, that, namely, which he conceives to be the most prominent, thus acting with about the same degree of reason as a painter who should confine himself, in his portraits, to the delineation of the nose, the mouth, or whatever feature happened to be most marked in each particular individual. Portraits of this sort must be quite irrecongnisable, wholly destitute of character or expression, and for the purposes of comparison, which is the object of drawing them in Homœopathy, utterly useless. In some rare instances, it is true, extreme precision is not requisite, and had M. Andral determined with accuracy the condition of time, position, &c., under which the predominating symptom was aggravated or ameliorated, some possibility would have existed of finding its counterpart among artificial (medicinal) diseases, in other words, of discovering what medicine would be most likely to neutralize the diseased action, in virtue of its similarity. M. Andral, however, by uniformly neglecting to determine the conditions affecting this or any other symptom, deprived himself of even this chance of success. As if to make his infringement of Hahnemann's canons complete, the learned professor never takes any notice of the remote cause of the disease (except in the 26th case, which we shewed was not treated homœopathically), or of the temperament and moral state of the patient, on all of which points the founder of Homœopathy strongly insists, as essential to the proper treatment of the case.

M. Andral occasionally displays considerable originality in the selection of the "predominating symptoms," on which so much is made to hang. We were not prepared to find him, when prescribing for an affection of the heart and uterus (case 34), select the remedy by a reference to the state of the bowels; nor could we have anticipated, that a professor



of Pathology would have considered giddiness so important a circumstance in phthisis (case 6), as to make it the therapeutic indication, to the neglect of the pulmonary symptoms.

We object further to the conclusiveness of the experiments of La Pitié on the very serious ground, that M. Andral had not the means of *applying* homœopathic principles to practice. We might grant, for argument's sake, that his conception of the homœopathic law was as accurate as we have seen it to be erroneous, and that the symptoms had been noted down with as much circumstantial detail as they were with inexcusable brevity; still the experiments would be without value, for without materials to work with, where is the use of principles on which to work? M. Andral not having a knowledge of the German language, was unable to consult Hahnemann's *Materia Medica* in the original; no French translation was extant at the time he undertook these experiments, and an acquaintance with English was as yet equally useless to the student of Homœopathy. A seaman wishing to find his longitude, though thoroughly acquainted with navigation, and though perfectly exact in his observation, is yet quite unable to discover his position without reference to his nautical tables. In like manner, an accurate conception of the homœopathic law, and a scrupulous conformity to the rules for taking the case, are of no avail to one, who, as in the instance before us, has not the means of consulting the *Materia Medica*.

But while these considerations suffice to shew that these experiments were performed in such circumstances as deprive them of all pretensions to scientific value; and while, therefore, they cannot be allowed the slightest weight in determining the question at issue, it would still be gratifying could we award merit to M. Andral in taking the earliest opportunity of testing the practical value of an important truth. Did such a line of conduct proceed from an earnest desire to secure, without delay, for the alleviation of disease, the benefits



accruing from each discovery in therapeutics as it arose, while we might be inclined to question the wisdom of attempting the solution of so intricate a problem with means so inadequate, we could not but feel respect for, and express approbation of, the motives that led to it. It is, therefore, painful to find that facts will scarcely allow us to put so favourable a construction on the conduct of M. Andral. A French translation of Hahnemann's "Chronic Diseases" was published at Paris in the year 1832, and had, therefore, been a considerable time before the public when the trial at La Pitié was instituted. This work contained a most minute account of the action of twenty-two remedies, the names of which we subjoin, and which, with scarcely an exception, are of the highest value to the practitioner.\* Had M. Andral been anxious to practise the system to the best of his ability, he would have found in these medicines a rich store of materials for the cure of the most obstinate diseases. If, however, our readers will take the trouble to compare the list they have just read, with that of the medicines used in Andral's experiments, they will find that they have not *one* remedy in common; in other words, that *Andral abstained from using the only medicines of which he had the means of making a right application.*

M. Maxime Vernois, while admitting (in a pamphlet afterwards published),† the incapacity of his professor to perform homœopathic experiments, from not knowing the action of the medicines, excuses his ignorance by saying it was unavoidable (*ignorance obligée.*) What we have just mentioned, shews this not to be quite correct; but from whatever cause his

\* Graphites, Lycopodium, Magnesia, Magnesiæ murias, Ammonium carbonicum, Baryta carbonica, Calcareæ carbonica, Natrum carbonicum, Acidum nitricum, Petroleum, Phosphorus, Sepia, Silicea, Zincum, Carbo vegetabilis, Carbo animalis, Causticum, Cicuta, Kali carbonicum, Natrum muriaticum, and Sulphur.

† Homœopathie. Analyse de la Matière Médicale de Hahnemann, &c.



lack of knowledge proceeded, surely the consciousness that he did not possess the means of testing the system, should have prevented him from stating before the Academy that he had given it a fair trial in his wards, and found it wanting.

It is scarcely necessary to prove that M. Andral gave the wrong medicines in the majority of the cases above detailed, after shewing that by chance only he could be right. In fact, he was reduced, partly by the want of the *Materia Medica*, partly by his neglect of such remedies as had been published, to guessing at the medicine which would be prescribed by Homœopathy ; and as he did not avail himself of the assistance of any one better acquainted with the subject than himself, the results he obtained were such as might have been anticipated. These considerations make a detailed examination of the practice adopted quite superfluous ; we will, however, notice one or two of the cases, in order to shew into what an inextricable maze of difficulties a man is thrown, when deprived of the clue—the knowledge of the pure effects of the medicines.

Let us take as examples the four cases treated with *arnica*. As the symptoms, with a single exception in each case, are not recorded, it is quite impossible to determine on the proper remedy to be given ; but we may remark on the first case, that *arnica* is very seldom used in phthisis. If the reader wishes proof of this, let him turn to that article in *Jahr's Repertory*, and he will find that *arnica* is not to be found among the *eighteen* medicines most often useful in alleviating the sufferings of the consumptive. The next case is one of cerebral congestion, with great giddiness ; this was probably a case to which *arnica* was adapted, for we find its administration was followed by good effects ; but this good fortune was plainly owing to chance, for there is nothing in the case to point out to us, without trials, whether *arnica*, *belladonna*, or *nux vomica*, not to mention others, would prove specific ; so that there was at least twice as much probability



of the wrong medicine being chosen as the right, and, in the former case, the ill success which must have followed would have been laid to the blame of the system. We are at a loss to know why arnica was given in a case of hydropericarditis; we do not remember of a single case in which it was indicated; the presumption is, that arsenic, lachesis, or spigelia, were more appropriate to the case. As to the last case, we may observe, that it would perhaps be impossible to select any medicine out of the whole pharmacopœia less likely to prove beneficial than arnica. That this is not a simple assertion on our part, may be seen by once more turning to the Repertory of Jahr, when it will be found, that, though no less than thirty substances are enumerated as occasionally remedial in such cases, arnica is not there. We might proceed in this way through the remaining cases; but we think sufficient has been said to convince every one that these experiments had in them nothing homœopathic but the name. We may just refer, however, to two cases of diarrhœa (cases 32 and 33), which Andral, by departing from his usual practice of mentioning but a single symptom, has unwittingly given us the means of shewing to have been wrongly treated. The diarrhœa of pulsatilla, though not unfrequently accompanied with colic, is for the most part more free from pain than that produced by other medicines; so that, when we meet with such a case as No. 32, unless the temperament be strongly indicative of pulsatilla, we naturally search among other remedies for the specific, and none is more frequently required than chamomilla. On the other hand, pulsatilla is likely to be useful in such cases as No. 33, for which chamomilla is certainly *not* suited; so that, in these two cases, the only ones in which there are any land-marks by which to guide our course, Andral chose the medicine least likely, on homœopathic principles, to effect a cure. It surprises us to find cases of intermittent fever among those experimented on; for these affections are, without exception, the most difficult of any to treat on homœo-



pathic principles; requiring, in the first place, that the symptoms be detailed with extraordinary minuteness; and, in the next, that the physician have a most thorough acquaintance with the intimate character of the numerous medicines (Bonninghausen enumerates nearly sixty) which are required in their treatment. Much judgment is also required to know at what period to administer the remedy.

We have now to state a circumstance for which our readers are scarcely prepared. It is seldom, whatever system we follow, that one medicine suffices for the cure of a chronic complaint, even when the experience of years has guided the choice; and it is rare, indeed, that *one* dose of the medicine brings about the desired result. To this obvious principle, however, M. Andral shut his eyes when experimenting homœopathically; for we gather from an attentive perusal of the article already referred to, what the writer was doubtless ashamed to state in so many words, *That though three-fourths of the cases treated were such as required a long course of medicines to cure, none of them received more than one dose of the homœopathic remedy, the administration of which was followed by some days of inaction, at the expiration of which, if not cured, the patient was handed over to allopathy. It was expected, it would seem, that scarcely had the globule been swallowed, but the cure should be effected, if it lay in the power of Homœopathy to cure at all! Were ever conditions like these imposed upon a system before? Notwithstanding all this, however, we learn that, of fifty-four cases thus treated, eight made permanent recoveries, and seven others were better the day after getting the medicine. We are told that time of itself brings about such results ("le temps seul amène ce résultat"); but we would just suggest, that, in chronic diseases, and in many acute ones, time is just as likely to bring about progress as retrocession of the disease; and, to say the least, it is remarkable that the improvement coincided so closely with the taking of the medicine; at all events, it*



would have been but fair to follow up, by a repetition of the medicine, the good already begun ; instead of this, these patients were allowed to relapse, and thus to swell the list of failures.

The professed or implied object of such trials as these, is to obtain such a body of evidence as shall, on the acknowledged principles of medical statistics, suffice to establish the comparative efficacy of the old system and the new. Were it demonstrated by adequate statistics, that Homœopathy came short in its results of the dominant system, and that this inferiority depended not on any weakness incident to its recent birth and fettered growth, and which it might reasonably be expected to outgrow, but on some inherent and irremediable defect ; we say, were this satisfactorily proved, we should feel bound at once to abandon it ; but we are not sure that we should think the *utter inefficacy* of its infinitesimal doses to be thereby demonstrated. On the contrary, our respect for *Allopathy*, all defective as it is, would preserve us from such a conclusion. We would ask those who adduce the supposed inferiority of homœopathic practice as proving its absolute powerlessness, Do you not perceive that, in so speaking, you are casting a slur on the system you practise ? Do you not see that you are saying in other words, ‘ Every system that has *any* efficacy in it, must be equal or superior to ours ; our system has so little power over disease, that to have *less* is to have *none*.’ Happily for Allopathy, and for the mass of mankind who must long continue to be treated on its principles, the reasoning of such wholesale declaimers against Homœopathy is false, and therefore the degradation of the old system, which it implies, cannot be maintained. It would be just as reasonable to conclude that, because one body A, was proved to be hotter than another body B, *therefore* B contained *no* heat. The absolute powerlessness of a system of therapeutics, can only be proved by comparing it with the true zero of medicine, that is to say, the expectant method, and shewing that



the results are similar. This has not been done; till it be, the enemies of any new system dare not in conscience say it has no power.

But we are very far from anticipating *any* injury to Homœopathy from a statistical comparison of its results with those of the old system. On the contrary, we point with confidence to statistics, as one of the means destined to be most powerful in establishing the value of the system. Before, however, either favourable or adverse conclusions can be drawn from a body of cases, we must be assured that the system was fairly and intelligently applied, which we have seen was by no means the case in those before us; it is therefore useless to proceed to consider the inferences deducible from them, for from false facts no ingenuity can obtain true deductions. But we think it may not be amiss to consider for a little, whether, even supposing the facts to have been good, they were of such a nature as to be of service in a statistical inquiry.

The object of such trials being, as we have already observed, to institute a comparison between the merits of the two rival systems, it is obviously requisite that such diseases be chosen to operate upon, as admit of the display of the powers of medicine; for, where both systems are powerless to cure, no deductions favourable to either the one or the other can be drawn. It is therefore matter of surprise, that so intelligent a man as M. Andral (and a statist withal) should have included in his trials so large a proportion of intractable or absolutely incurable cases. Nothing would have been easier than to have avoided this, for M. Andral did not take indiscriminately all patients entering his wards during a certain period of time (which, though on the whole the fairest mode of proceeding, inasmuch as it secures an unbiassed allotment of cases, would also be in some measure objectionable, as it would necessarily include some patients incurable by any system, and therefore make the results, *quoad* these cases, indecisive of the question); on the contrary, he *selected* his patients, as we infer



from the following considerations. The experiments of which we have any account, lasted 35 weeks. They were 35 in number; each lasted a few days, say a week, or at most a fortnight, and they were carried on uninterruptedly. Putting these things together, it is evident that there can have been but one, or at most two or three patients treated homœopathically at a time, so that M. Andral had ample opportunity for selecting, out of a ward of at least twenty beds, cases amenable to treatment, and therefore of use in determining the question at issue.

Further, had the mode of proceeding so far been unobjectionable, still we should have been unable to state if the results made for or against the new system, for we are as yet unprovided with any statistics parallel to these in allopathy; to obtain such, it would be necessary to institute experiments on cases treated with single doses of the appropriate medicine. We might perhaps make some approach to the results, by ascertaining what per-centage of patients are cured in the first week of treatment.

Lastly, even had the cases been judiciously selected, we have Andral's own authority for stating, that their number was far too small to make the conclusions trustworthy. One of his pupils, Gavarret (*Principes Généraux de Statistique Médicale*, p. 108, note), quotes Andral as saying, "With thirty or forty observations, one may determine the diagnosis and pathological anatomy of a disease, but it needs years of research to arrive at a satisfactory result in therapeutics." M. Andral has thus pronounced his own condemnation, which supersedes the necessity of ours.



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