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Contributors

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Camphor - Menthol; a Supplementary Report.

BY SETH SCOTT BISHOP, M.D.

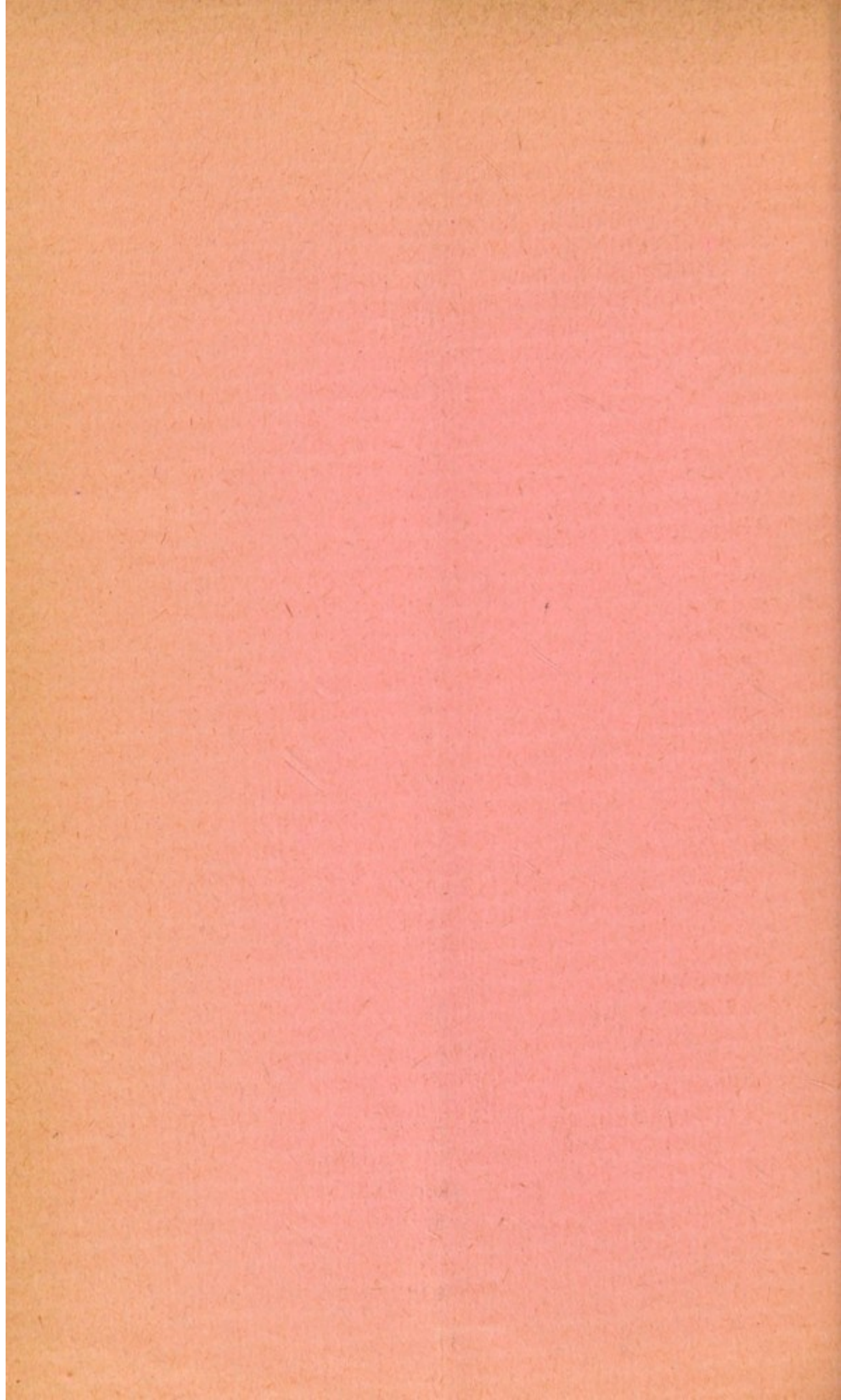
SURGEON TO THE ILLINOIS CHARITABLE EYE AND EAR INFIRMARY; PROFESSOR OF DISEASES OF THE NOSE, THROAT AND EAR, CHICAGO SUMMER SCHOOL OF MEDICINE; PROFESSOR IN THE POST-GRADUATE MEDICAL SCHOOL AND HOSPITAL, ETC.

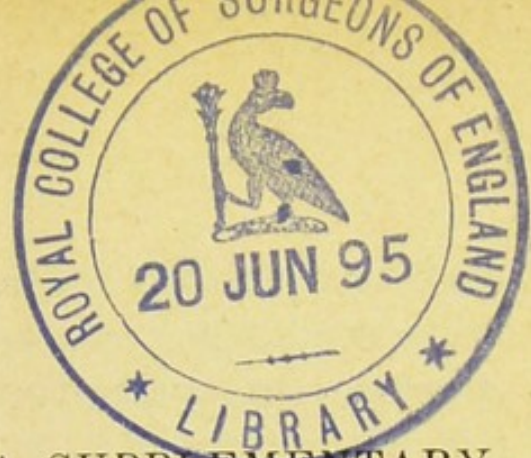
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CAMPHOR-MENTHOL; A SUPPLEMENTARY
REPORT.

BY SETH SCOTT BISHOP, M.D.

Since the introduction of this remedy at the meeting of the Mississippi Valley Medical Association in 1891, and published in the *JOURNAL*, it has come into quite general use for catarrhal conditions of the upper respiratory tract. But inquiries have not ceased to come from various parts of the country concerning the method of its application, and for the details of my experience with it since. The purpose of these notes is to answer such questions.

Although I did not recommend its use until long after I had discovered that the union of these two camphors resulted in a fluid of the chemic formula $C_{10}H_{18}O$, and after I had satisfied myself that we possessed a valuable remedy in this new drug, I am now able to express greater confidence, and to verify my former statements by the experience of others, as well as by my daily use of it up to the present time. The experimental stage has passed, and the efficacy of this medicine is clearly established. Specialists who were at first skeptical as to its virtue, have since adopted it as a standard remedy in both private and dispensary practice. I have taken pains to ascertain the results of their experiences, and add them to my own.

The field of application in which camphor-menthol has proved most efficacious is in the following dis-

eases: coryza, hay fever, intumescent rhinitis (intermittent and alternating nasal stenosis), hypertrophic rhinitis, simple sore throat, acute laryngitis, tracheitis, bronchitis, and cauterizations to prevent hemorrhage and inflammation.

The indications for its use are made clear by a consideration of its physiologic action. It contracts the capillary blood vessels of the mucous membrane, reduces swelling, arrests sneezing and irritation, checks excessive discharges, and corrects perverted secretions.

For home use and ordinary office treatment, I do not employ a stronger solution than the 3 per cent. in lavolin, and for very sensitive cases, like hay fever sufferers, the 1 or 2 per cent. solution at first. The lavolin itself is a bland and soothing protective to the membrane, and in the combinations indicated we have undoubtedly the most effective and harmless remedy known. This means a great deal to both patient and physician, for most of the sprays in use give indifferent results—or worse. Indeed, so great has been the disappointment with the old local medicaments, that a well-known writer on nasal diseases entirely abandoned them several years ago.

Patients should be instructed to treat themselves thoroughly every night at bed time, by throwing a spray of the 3 per cent. solution from a lavolin atomizer into both nostrils while slowly inhaling. The rubber bulb should be forcibly and rapidly compressed at least eight times for each nostril. For the throat, larynx or bronchial tubes, the spray should be thrown through the mouth also during inhalation.

In diphtheria, croup, etc., in infants, when it is

very difficult to throw a spray into the throat, the medicine may be made to reach the parts by volatilizing it, by placing a few drops of the pure undiluted camphor-menthol in hot water, and causing the patient to breathe the medicated steam, or a few drops can be heated in a spoon over a lamp, and its fumes will impregnate all the atmosphere of the room. Enough medicine need not be used to cause uncomfortable smarting of the eyes. Inflammation of the throat, larynx, trachea and bronchi can be effectually treated by inhaling the camphor-menthol steam from the benzoinol inhaler.

I have found that we can prevent hemorrhage and inflammation, following galvano-cauterization of the turbinated bodies, by gently packing a pledget of cotton wet with a 20 per cent. solution of the camphor-menthol between the burned tissue and the septum, and leaving it there twenty-four or forty-eight hours. It is then replaced by a fresh dressing and, at the end of four or five days, instead of finding sloughs filling the passages, swelling and stenosis, the tissues appear shrunken and mummified, and the strait is clear. Unless the electrode has been allowed to cool before removing, no hemorrhage or only slight oozing occurs. There is also less discomfort following this method than after others. The cotton should not be saturated to dripping with the solution, so as to allow it to trickle down into the throat, and if too much is used, it occasions a copious serous secretion. Advantage of this power of the strong solution to cause stimulation of the glands, and osmosis, can be taken in treating ozena and dry catarrh of the nose and throat. The weak solutions dim-

inish secretions; the strong ones increase them.

Much suffering can be prevented in people who take cold easily, by using the pocket camphor-menthol inhaler. Any one can easily construct it. I have them made, however, with an excess of camphor, while the pure camphor-menthol contains a larger proportion of menthol. By inhaling this for a moment, the instant the irritation of a cold is felt in the nose or throat, the attack can be stopped. Patients who carry these inhalers in their pockets are able to prevent colds during the seasons when they have heretofore suffered repeatedly.

In my first paper on this subject, I gave the directions for preparing this formula, but I have since come to prefer a preparation that is made more cheaply and elegantly for me by Truax, Greene & Co., of Chicago.

Columbus Memorial Building.