

Second report of Dr. John Francis Churchill's free stoæchiological dispensary, for consumption, and diseases of the lungs, windpipe, nose and throat : with remarks on the treatment of chronic lung disease / [John Francis Churchill].

Contributors

Churchill, J. Francis

Publication/Creation

[London] : [publisher not identified], [1887]

Persistent URL

<https://wellcomecollection.org/works/pf8r4zf8>

License and attribution

This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.

With the Author's
Compliments.

SECOND REPORT **CEDE PAR**
S.H.A.P.

Dr. JOHN FRANCIS CHURCHILL'S
FREE

Stœchiological Dispensary,
FOR CONSUMPTION,
AND DISEASES OF THE
LUNGS, WINDPIPE, NOSE AND THROAT,
WITH REMARKS ON THE TREATMENT OF
CHRONIC LUNG DISEASE.

ADVICE and TREATMENT GRATIS FOR THE POOR DAILY, at 2 O'CLOCK.

SUNDAYS EXCEPTED.

Open to Members of the Medical Profession on presenting their card.

London:
99, MARYLEBONE ROAD, W.

First and Second Reports Post Free on demand.



22501240216

THE MINUTE BOOKS OF THE CHURCH OF THE DISSEMBLED.





THE INHALING ROOM AT DR. J. F. CHURCHILL'S FREE DISPENSARY.

SECOND REPORT
OF
Dr. JOHN FRANCIS CHURCHILL'S
FREE
Stœchiological Dispensary,
FOR CONSUMPTION,
AND DISEASES OF THE
LUNGS, WINDPIPE, NOSE AND THROAT,
WITH REMARKS ON THE TREATMENT OF
CHRONIC LUNG DISEASE.

ADVICE and TREATMENT GRATIS FOR THE POOR DAILY, at 2 O'CLOCK.
SUNDAYS EXCEPTED.

Open to Members of the Medical Profession on presenting their card.

London:
99, MARYLEBONE ROAD, W.

First and Second Reports Post Free on demand.

1887.

SECOND REPORT
OF THE
DR JOHN FRANCIS CHURCHILL,
F.R.S.
SOCIETY FOR
THE
RELIEF
OF CONSUMPTION
AND DISEASES OF THE
LUNGS, MINDPIPE, NOSE AND THROAT,
WITH REMARKS ON THE TREATMENT OF
CHRONIC LUNG DISEASE.

WELLCOME INSTITUTE LIBRARY	
Coll.	Wellcome
Coll.	ram
No.	WF 200
	1887
	C 56 s
	Followed:

33, MARYLEBONE ROAD, W.

Printed and Published by the Author, 1887.

SECOND REPORT
OF
DR. JOHN FRANCIS CHURCHILL'S
Free Stæchiological Dispensary,
FOR CONSUMPTION,
AND DISEASES OF THE
LUNGS, WINDPIPE, NOSE AND THROAT,
WITH REMARKS ON THE TREATMENT OF
CHRONIC LUNG DISEASE.

Non vi sed saepe cadendo.

SINCE my First Report ending June 30th, 1886, the following are the results obtained from that time up to December 31st, 1886:—

Total attendances	3736
Total cases treated	183
Remained under treatment	137
Cured	45
Relieved	65
Under treatment, December 31st, 1886	27
Died	4

The patients who presented themselves at the Dispensary, and who from various reasons, were not able to remain under treatment, but attended for periods varying from one to six days, in no case sufficiently long to give any indication as to the effect of treatment, were to the number of 45. Of these

- 25 were Consumptive.
- 13 suffered from Bronchitis and Asthma.
- 3 were Throat Complaints.
- 5 various.

46

In my First Report I called attention to three points in particular:

The smallness of the Mortality.

The slight influence upon the patients of unfavourable weather.

The freedom from haemorrhage of the Consumptives.

The results then pointed out have again been very apparent.

RATE OF MORTALITY AND INFLUENCE OF WEATHER.

In my First Report I called attention to the small effect produced in most instances upon the patients by unfavourable weather. The same thing was observed in the second half-year. Although the winter was very severe, there were no deaths among those suffering from simple Chronic Lung diseases, and there were only four among the 137 patients treated. These four were all very advanced cases of Consumption. Two were old patients, remaining under treatment at last report, the two others came later. The two who died since the first Report added to the one then mentioned, would raise the proportion of deaths in the first series of cases of Consumption, to 3 out of 33, that is, one in 11. These three added to the two which have occurred among the 30 recent cases, make altogether five out of 63 (the whole-number of Consumptives), or less than one in 12, not 8 per cent.

As I showed in my First Report this will compare very favourably with all similar data hitherto published, where the mortality in one instance was 95 per cent., in another more than 99 per cent., and in a third more than 99½ per cent. See also how this stands compared with a report recently published in the Bulletin of the French Academy of Medicine (April 14th 1885) by Drs. Leudet, father and son, who state that out of 312 cases of Consumption treated in their private practice, during several generations *among families in easy circumstances*, they had only observed 12 recoveries.

But this does not exhaust all the conclusions that flow naturally from this point. If we look more closely into the cases, it is apparent that the fatal result was at least hastened, if not induced by accidental circumstances, by the existence of serious complications, or by leaving off the treatment.

One case (No. 268) was suffocated in a few hours by the dense fog that prevailed towards the end of November. He was in a very precarious condition when he first came, had been under treatment a little over two months, had made slight improvement, but died in a few hours on November 26th. In my view the death of this patient was as much the result of an accident as it would have been, if he had been run over by a cab, because his extreme weakness prevented him from getting out of the way of it in time.

The second case (266) died suddenly December 8th, almost certainly of embolism (the formation, in the veins, of a clot which was carried into the heart). Before coming under treatment he had been ill for two years, had been rapidly failing in strength, and had become profoundly anaemic. During the three months he attended at the Dispensary, he had kept his ground, his symptoms had to some extent been alleviated, and the progress of the disease appeared to be arrested. His end came suddenly. As he sat by the fire-side, he complained of feeling faint, and died before aid of any kind could be rendered.

Of the other two cases I have no certain data. They were not attending my Dispensary at the time of their death. One (No. 135) had been ill with constant cough and expectoration for 12 months before coming under treatment, she presented signs of advanced consumption, and was also suffering from kidney disease. For sometime she held her own, her cough and expectoration having considerably diminished, she, however, discontinued attending after rather more than four months' treatment, and I heard afterwards that she had died.

The remaining case (No. 204) was one of advanced Phthisis of both lungs. Before coming to my Dispensary, she had been ill two years, and had attended a special hospital for 12 months. She was in a very critical condition when first coming under treatment, and subject to frequent attacks of severe haemorrhage. She attended for about three months, but as the weather became unsettled, was unable to continue, in consequence of the distance from her home being too great, and I heard afterwards that she had died.

The opinions I have just expressed with regard to the fate of these patients naturally call for some explanation, and this gives the opportunity of explaining my views of Chronic Lung Disease, and more especially of Consumption.

ON THE TREATMENT OF CHRONIC LUNG DISEASE.

As I have repeatedly asserted for many years past, the results of the treatment of a case of Consumption can be foretold with as much certainty as that of any complicated chemical process, or of any physiological experiment, provided two points be steadily kept in view. One, the allowance to be made for the personal condition of the patient; the second, the account to be taken of the variations of external conditions, such as: sudden change of temperature; sudden shocks to the system, and corresponding disturbance of the circulation; accidental inflammation of the diseased organs set up by these causes or by over-work, that is to say, by more fatigue than the lungs, in their diseased condition, are able to bear, etc.

I have taught for many years past, and I pointed out in my First Report, that any medical treatment claiming to be fixed upon a scientific basis must be founded upon the principle that its therapeutical or curative action is coincident or correlative with a certain *ascertained degree of physiogenic or pathogenic action*.

With regard to the treatment of Consumption, this line of conduct was *clinically* determined and minutely described by me many years ago. Yet I daily meet with cases, where the Hypophosphites are said to have failed, and where it is evident that the rules for their successful use, have been ignored or directly violated. I know of no text-book on Therapeutics in which the directions given for the use of the Hypophosphites are not inadequate or ludicrously incorrect, if the word ludicrous can be properly applied to a circumstance, which involves a tragic fate for some millions of human beings.

Now all scientific action is conditional, and all results given without a determination of the conditions they require, rest upon no scientific basis. *This is the present state of Therapeutics.*

In Chemistry, every one is ready to admit that the success of a process depends entirely upon a strict adherence to the conditions which it requires. In Physiology, no one would expect that an experiment which had been successfully performed, would give the same result another time, if the same process were not rigorously followed. In Surgery, every single step of a received and accepted operation is carefully and minutely laid down.

When we come to Therapeutics all this is altered. Every man goes by his own rule of thumb. He takes little or no care to enquire into the *conditions*, upon which the success of the treatment may depend. In fact, in most instances, if he enquired into these conditions, he would find that they are not known. The originator of the treatment, himself, has seldom determined them, or seems even to be aware that they are of any consequence. Hence it is that, hitherto, almost all therapeutical art is simply

the expression of individual opinion, some for, and some against, nothing definite, nothing fixed or settled. One generation of medical men is all for bleeding, another generation is all for purging. One generation is all for alcoholic stimulants, another for tonics, and another again for small doses or infinitesimal doses, or no doses at all.

Yet, in the meantime, Medicine progresses on the whole. Certain facts from time to time emerge from the desolate waste of inefficiency, like peaks amid the flatness of the desert. We have learnt to cure Intermittent Fever. We have got rid of the Itch, which was still a common complaint even among the highest in station, little more than fifty years ago. We have in Mercury and Iodine, two assured specifics, against a class of diseases, the ravages of which could be noticed every day in the streets in my youth. Vaccination has almost done away with Small-Pox, and PASTEUR will, perhaps, by-and-bye, do the same thing for Rabies. Now most, if not all of these improvements in medical practice, which after all is the true aim and object of all medical science, are not the outcome of any of the medical doctrines of the time in which they originated. They did not spring from the teachings of the schools. They either came from outside of the profession, or were the result of merely empirical observation. In the case of Rabies, PASTEUR is not a physician, and has never studied medicine; he is a scientific chemist, and a professor of Chemistry in the Normal School of Paris.

My discovery of the Hypophosphites as a remedy for the Tubercular Diathesis, was brought forward as part of a *pathological theory* concerning the nature of the complaint, which assumed to account (as it really does) for all the facts which had been ascertained concerning it. As the reality of my discovery so far as the curative results are concerned, was confirmed by the independent testimony of a large number of other physicians, it might have been supposed that this, the first example of a *Scientific Hypothesis* in Pathology and Therapeutics would have had a special claim upon the general attention of the profession. I can do myself the justice to say, that I never had any illusion on this point. Thirty years ago, I wrote "that it would take three generations of medical men before my discovery rose above the mists of controversy into the serene region of scientific truth." We are in the second generation since this was said, and the question has progressed thus far: my remedies have been put into the official Pharmacopœias; the Medical Profession all over the world are using them; manufacturing Chemists, Pharmaceutical Speculators, and quacks of every colour, and in every country have laid hold of the Hypophosphites, and are each pushing them for his own purpose, either under their proper name, or under some disguise, with or without some more or less mendacious claim to originality. The Public, on the whole, are certainly the better for this, and as I showed in my First Report, there has been a steady decline in the mortality from Consumption. But to a very great extent this is independent of the scientific action of the Medical Profession. It is nothing compared with what it would be if the use of this my first discovery were scientifically directed, guided, and enforced by them. But they have left the scientific part of the question standing just where it stood twenty years ago. If I may be allowed such a comparison, I would say that I have done what Columbus did when he discovered America. He showed that this was effected by steering West. Until he did so, the best navigators in the world had steered North and East, and South, but they would not steer West, at least, not beyond a certain point, because they

supposed that somewhere in that direction the world came to an end, and that they would fall into the void of space. They were not accustomed to long voyages, they seldom ventured out of sight of land, they had not long been acquainted with the Mariner's Compass, and the means of determining their position at sea were unknown. This comparison offers many analogies with the treatment of Consumption by the Hypophosphites. Many unprofessional, that is unskilled, navigators steer West, many of them reach the promised land, but too many fail to do so. Some of them are wrecked almost as soon as they have left harbour. Many are lost at sea. Some are cast ashore when already in sight of land. Of the scientific navigators who might and ought to take this course, many will not do so, because they have no hopes of a safe arrival; they have so often failed by other routes, that they think this one no better than the rest. Many of them, like the old mariners, are accustomed to only short voyages, and never having done anything but creep along the shore, have not a faith robust enough to hold on their course throughout often a long and complicated navigation, with many a disheartening alternative of calm or storm. They have had hitherto no scientific means of directing their course correctly, and so far they have generally neglected the means for doing so, which I have pointed out. This is caused by two facts. One that the medical profession, at the present day, do not believe in the action of specifics: and the other, that medical practice is by custom, scientific tradition, and many social contingencies, altogether astray in the treatment of chronic disease.

With most medical men there is no such thing as a specific, and most Chronic Diseases, particularly those of the Respiratory Organs, are looked upon as incurable. It is in vain to point to such things as Vaccination, Quinine, Iron, Mercury, Sulphur, and Iodine, and to say that what has been found in these cases may be found in others. The doctrine still remains: there is no specific, and writers, in the medical journals, are jubilant when they solemnly arraign and condemn a man as an impostor and a quack, because he pretends to have discovered a specific: that is, according to the way in which they choose to put it, a remedy which cures a disease in all cases.

Now what in reality is the meaning of a specific? A specific, if called by a non-scientific name, simply signifies a certain means of doing a certain thing in a certain way, that is under certain ascertained conditions. All mankind, believe in specifics, act by specifics, live upon specifics. The cobbler, the painter, the weaver, the gardener, the mason, the engineer, the astronomer, the chemist, the physiologist, all these people from morning to night, when they do anything, do it by, with, and through specifics. They propose to themselves to do a certain thing, they have ascertained or have been taught, that to do it they must employ certain means, and in cases where they do not succeed, they do not impute the fault to the means, but to their own mismanagement of them. So in medicine, when the physician has a specific, he can only make it act successfully under certain conditions. If those conditions exist the specific produces its effects, if they are wanting, nay, if only one of them is wanting, it fails. Only here the conditions to be fulfilled are often very numerous, not always under the control of the practitioner, and sometimes so minute, so involved, or so evanescent as to escape the attention of the inexperienced, the inattentive, or those who are prejudiced by a foregone conclusion.

The second point is that none of the conditions (most of which are evidently necessary) for the successful treatment of chronic diseases have

hitherto been accurately determined, and much less are they acted upon. Of these I wish to say a few words.

In order that it may have a practical bearing, and be thus a positive test we will suppose for the sake of argument, that there are such things, as specifics, and that we have two in our possession : One the Hypophosphites, a specific for the tubercular diathesis and the other, my Inhalant "Spirone," claiming to be a specific for all inflammatory and congestive conditions whatever, of the mucous tissues and especially of that of the respiratory apparatus. Let us see how these are to be handled, and, if that is done properly, what are the therapeutic and curative results, which according to the present received views of medical science we are entitled to expect, and to demand as a proof of the legitimacy of their pretensions.

Beginning with the Hypophosphites. It is very evident that not only the ultimate result of their action but even their immediate therapeutic effects, will depend upon the condition of the patient when beginning the treatment. The extent of anatomical destruction, or organic impairment already produced by the disease : the amount and degree of the inflammatory action, and of the septic condition ; the existing symptomatic disturbance (as manifested by cough, &c.) ; the antecedent constitutional or diathetic condition ; the degree and intensity of the secondary complications such as haemorrhage, diarrhoea, &c. : all these circumstances have to be taken into account with regard to a forecast as to the issue of the malady, and the patient's chance of recovery. It would be absurd to suppose that the result of any curative treatment, however specifically powerful it may be imagined, can be independent of these conditions.

Again the Hypophosphites being the most powerful of all known haemagogens, produce (in the first instance) upon the system an increase in the quantity and the quality of the blood, which gives rise in turn to increased nervous energy, both of the organic and the relational systems. It would again be absurd to suppose that the results of this action will in all cases be the same, whether it be allowed to take its course without any superintendence, or whether it be carefully watched and restrained within the definite limits which I have ascertained, by long continued clinical observation, and *have shown are the conditions of the curative results.*

All this I determined and pointed out many years ago, and cannot here enter more fully into the details of the matter.

The same is true with regard to my Inhalant "Spirone." The scope and extent of its curative action will depend upon the nature of the complaint, and upon the organic conditions of the patient. Its therapeutic effects, particularly when first used, will vary, not only with the general, but also in many instances with the local organic sensitiveness of the patient, and the *immediate apparent* effect will depend very much upon the skill with which these individual requirements are satisfied. Not only must these be attended to, but *the action of the remedy must be kept up for a sufficient time to produce all the structural improvement possible.* This may sometimes demand a very long time, and it will not always be an easy matter to induce patients to understand and comply with this requirement. From an experience extending over thirty years I find that patients who had become confirmed invalids, or even sometimes complete wrecks, have been restored often to comfort, many times to robust health, but this has taken a long space of time, averaging from one year to three years or even more. As the accuracy and certainty of the physician's prognosis increases with his experience of similar cases,

he will in time get to have over his patients a control and an influence which before he did not possess, because he will be able honestly to give them the assurance of the possibility, and very frequently the certainty of attaining a definite, and hitherto unattainable result, provided all the necessary requirements are carefully and steadily complied with.

Now this is altogether a new state of things, with regard to chronic disease, and especially with regard to chronic diseases of the respiratory apparatus. I feel certain that any physician who will carefully act upon these lines in the treatment of his patients, will find that I have understated the results to be obtained by the use of my discoveries, and patients on the other hand (at least the more sensible part of them) will allow themselves to be influenced and guided by this assurance from the outset. The others, that is the majority, will more slowly (but in time also) come to understand that chronic diseases of the respiratory apparatus, are always curable up to a certain point, but that *this result requires the intervention of a scientific direction as much as does the cure of an acute disease and can only be reached by slow, steady, persistent, and properly directed action.*

The great difficulty which will be still remaining in the cure of Chronic Respiratory Diseases, is the shortness of time during which patients carefully follow their treatment; and this in its turn is a consequence of the uncertainty which has hitherto attended all attempts at curing long-standing disease. Patients are always too ready to leave off their treatment as soon as it has produced a certain amount of relief. They have become accustomed to the low grade of vitality induced by impaired health, and are ready to put up with it again as soon as any special or sudden stress or aggravation is removed or relieved, because they do not fully understand that chronic disease leads in all cases to a curtailment of the chances of life, and either from their own personal experience, or from observation of those around them, they see that medical science has hitherto offered no assured means of cure.

What has chiefly led me to make these preceding remarks, is the difficulty I daily meet with at my dispensary, of inducing patients to follow the treatment of any chronic complaint for any length of time, after they have received a certain amount of relief, particularly if the relief has been sufficient to enable them to resume work, which they had been compelled to leave aside. This is the reason why the reports of many of the cases treated cannot be fully given to their final and definite result.

But as I have already said above, the proof of the specific action of a remedy does not rest solely upon the curative results which it may produce, because these, particularly in chronic disease, imply numerous extraneous conditions, which cannot always be realized.

The specific action of a remedy is I contend legitimately established whenever, within the limits of personal variation, its therapeutic action is found to be uniformly the same, and when its curative results, are constant up to the point where they are not interfered with by the failure of some necessary condition or by the intervention of some disturbing cause. All these limitations are evidently indispensable in so complex a science as therapeutics.

From this point of view I have thought it would be interesting to ascertain what has been the therapeutic action of the treatment followed at my dispensary upon all the patients actually in attendance, at a certain time (March, 1887). Each patient was simply asked how he found himself compared with his condition before he began the treatment, the following answers were returned.

Table Showing the Immediate Effect of the Treatment.

No.	Date.	Occupation.	Age.	Sex.	Disease.	Previous duration	Length of Treatment.	Result.
1886.								
171	May 20	Clerk.	20	M	Ch. Bronchitis	3 years.	10 mths.	Much better ^{*1}
254	Aug. 24	Musician.	38	„	Ch. Br. & Emphy.	4 „	7 mths.	Better ^{*2}
258	„ 30	None.	22	F	Consumption.	2 „	7 „	Much better
285	Sep. 24	Agent.	42	M	Asthma.	9 „	6 „	Better ^{*3}
319	Oct. 12	None.	36	F	Ch. Pharyngitis.	5 „	5 „	Much better ^{*4}
329	„ 26	„	41	„	Consumption.	5 „	5 „	Better ^{*5}
336	Nov. 4	Scavenger.	62	M	Ch. Bronchitis.	5 „	1½ „	Much better ^{*6}
364	„ 22	Writer.	45	„	Ch. Br. & Asthma	18 „	4 „	Much better ^{*7}
365	„ „	Painter, &c.	43	„	Ch. Br. & Emphy.	6 „	4 „	Better ^{*8}
383	Dec. 11	Carman.	29	„	Consumption.	9 months	3½ „	Better ^{*9}
1887.								
399	Jan. 12	Schoolboy.	4	„	Cough after			
399a	„ „	Infant.	2	„	Whooping Cough.	1 month	2½ „	Better ^{*10}
400	„ 15	Schoolboy.	8	„	Consumption.	12 mths.	2 „	Better ^{*11}
407	„ 21	Carpenter.	68	„	Bronchitis.	1 month	2 „	Better ^{*12}
409	„ 22	Milliner.	41	F	Phar. & Laryn.	4 months	2 „	Better ^{*13}
414	„ 25	Seamstress.	30	„	Ch. Phar.	14 years	2 „	Better ^{*14}
418	„ „	Potman.	27	M	Laryngitis.	2 months	7 wks.	Much better
419	„ 26	Labourer.	42	„	Winter Cough.	5 years	7 „	Much better ^{*15}
424	„ 27	Servant.	24	F	Loss of Voice.			
					Winter Cough.	4 „	6 „	Much better
425	„ 28	Schoolgirl.	11	„	Inflamed and			
					Enlarged Tonsils.	4 „	7 „	Better ^{*16}
426	„ „	Bricklayer.	43	M	Asthma.	13 „	7 „	Much better
430	„ 31	Van Driver.	54	„	Consumption.	1 year	7 „	Better ^{*17}
433	Feb. 1	Labourer.	55	„	Ch. Bronchitis.	many years.	7 „	Better ^{*18}
435	„ 2	Infant.	8 wks.	„	Cough ever since			
					birth.	8 weeks	6 „	Better ^{*19}
436	„ 3	Butler.	44	„	Bronc. & Asthma.	18 years, 3 months.	6 „	Better ^{*20}
438	„ 5	Labourer.	25	„	Consumption.	3 years	5 „	Better "a lot"
444	„ 9	Married.	35	F	Bronchitis.	On & off 16 years	5 „	Much better
454	„ 22	"	47	„	Consumption.	6 months	3 „	Better
455	„ 20	Servant.	22	„	"	2 years.	3 „	Better
456	„ 23	Schoolboy.	11	M	"	6 months	3 „	Much better
458	„ 25	Joiner.	35	„	"	4 „	3 „	Better
460	„ 28	No Occupation.	17	F	Sp. dis. of Throat.	4 „	3 „	Better "much"
461	„ "	Married.	33	„	Pharyngitis.	10 „	2 wks.	Better
464	„ "	Carpenter.	56	M	Consumption.	2 years.	10 days.	Better
465	„ "	Bookseller.	32	„	Consumption.	4 months	3 wks.	Better ^{*21}
470	Mar. 3	Mail Driver.	52	„	Winter Cough.	3 years.	3 „	Better
471	„ 5	Infant.	16 mths.	F	Bronchitis.	6 months	2 „	A shade better
472	„ 7	Married.	35	„	Consumption.	6 „	12 days.	Better
477	„ 10	Cab Driver.	56	M	Bronchitis.	3 weeks.	10 „	Better
479	„ 11	Married.	50	F	Bronc. & Asthma.	6 years.	5 „	The same
480	„ 12	Schoolgirl.	12	„	Bronchitis.	1 week.	5 „	The same
482	„ 14	Coach Painter.	52	M	Loss of Voice.	1 week.	5 „	Better

- 1.—Not out of doors for six weeks the winter before coming under treatment. This winter kept in for three days only, then was set up again after attending the Dispensary for three days.
- 2.—Much better as regards wheezing, especially at night.
- 3.—Has less frequent attacks, and less severe. Used to have daily attacks, now once a week and not severe.
- 4.—Much better than when she came, and better than last winter.
- 5.—Much better and stronger than when she came.
- 6.—Has not been laid up this winter. For six years previously had generally been laid up for 5 or 6 weeks at a time, and lost his voice and appetite. This winter he has not lost his voice, and appetite has been good.
- 7.—Much better than when he came. If he gets an attack now it does not last so long as formerly. He has only had one attack since coming under treatment.
- 8.—"A great deal better."
- 9.—He says "A lump better."
- 10.—The mother says "They are different altogether," very glad she brought her children.
- 11.—"Better in every way."
- 12.—"Cough and expectoration less."
- 13.—"Better especially the last few days, very different in general feeling."
- 14.—Says "She is much better than when she first came and better able to do her work."
- 15.—He says "Feels like a King in his lungs compared with what he was."
- 16.—"Felt more of the throat last winter."
- 17.—"Better than for a long time."
- 18.—"Eight or nine pounds in weight better."
- 19.—Coughed less, and getting fatter. The mother had lost two children before of the same complaint.
- 20.—Has been better this winter than any time before during the last three years. The last two years has been bad in summer as well as winter, but has not been laid up since coming under treatment.
- 21.—"A great deal better."
- 22.—Did not continue after the 5th day in consequence of an attack of chicken pox.

This list comprises the whole number of patients attending the Dispensary, during the week from March 12th to 19th, without any exception and I think it requires no comment. An enquiry of this kind made at any other time gives similar results. A patient's condition will of course vary from time to time according to circumstances but it is very seldom indeed that he is not found to be better than before beginning the treatment, and in the few cases where there is no distinct improvement or after a marked improvement there is a distinct falling off, it is very seldom indeed that minute and careful enquiry does not elicit that this is due to the treatment having been intermittent, to the patient having returned too soon to his work, or to the occurrence of some accidental complication.

So far for the immediate or therapeutical effects of the treatment, but it is a matter of equal or perhaps more interest to ascertain what are its permanent results. This is a very difficult subject, owing to the class of patients attending the Dispensary, and to the circumstances of their mode of life. They generally cease coming as soon as they are able to work, and cannot always be traced. I have made it a point to ascertain the results in every case where possible, and have arrived after taking considerable trouble at the following :

No cases have been kept back; the unfavourable results have been already mentioned.

PERMANENT EFFECTS OF THE TREATMENT.

The following are the cases which have been seen or whose condition has been heard of since they have left off attending the Dispensary.

LXVIII.*

L. S., 41, Seamstress (115—April 14th, 1886), had suffered for the last fourteen years with coughs and colds, and repeated attacks of Bronchitis. Had on one occasion congestion of the lungs, and several years ago she spat a little blood. She has been laid up for weeks together in the winter, but is fairly comfortable during the summer, unless she takes cold. She had attended Brompton and other hospitals. She has a hard cough, and a great deal of thick muco-purulent expectoration. Her breathing is very short, especially upon awaking in the morning. She sometimes perspires at night. She has lost flesh. She is somewhat emaciated. There is dullness at apex of left lung behind, and crepitation in the same region. The respiration is feeble throughout.

She was prescribed Spirone Inhalations, and Swann's Hypophosphites. She improved very much in every way with this treatment.

She now reports that she has passed through this last winter, much more satisfactorily than for many years previously, and has derived more benefit from the Spirone than from any treatment she ever had before.

LXIX.

F. S., 28, Dressmaker (180—May 27th, 1886), patient had suffered from a bad cough all the winter previously to coming under treatment, and had attended the Consumption hospital for three months without benefit.

The cough was very troublesome, expectoration copious and "greenish." She had been spitting blood and had pain in side. There were night sweats, and hectic fever. She complained of feeling tired, and of shortness of breath on slight exertion.

There were marked physical signs of Phthisis.

Spirone Inhalations and Swann's Hypophosphites were prescribed. With this treatment the improvement was marked and rapid. She was able to resume her work at the end of three months, and after some time took only the Hypophosphites. November 18th she returned for treatment having taken cold, and had a return of cough. She was under treatment three weeks, by which time her cough had gone. She went on with the Hypophosphites sometime longer, has kept well through the winter, and is now in good health.

LXX.

H. W., 25, Married Woman (335—November 4th, 1886), had had more or less cough ever since the winter of 1881, but has lately been getting much worse. Has a troublesome cough, muco-purulent expectoration, shortness of breath and night sweats. Four years ago she suffered from blood spitting, but this has not troubled her lately. She has lost flesh, and feels much weaker than formerly.

There are signs of tubercular deposit at the upper part of the left lung, in process of softening.

Note.—The numbers in Roman Capitals are in sequence with the cases of First Report. The numerals within brackets refer to the Case Book.

She was prescribed Spirone Inhalations and Swann's Hypophosphite of Lime.

With this treatment she steadily improved. The cough and expectoration gradually diminished, the night sweats disappeared.

She now reports that her chest is much stronger, her cough is entirely gone, and she has been better this winter than she has been at any time during these last six years.

LXXI.

J. B., 41, Married Woman (120—April 20th, 1886), for four years before coming under treatment she had suffered from cough and shortness of breath, and a good deal of expectoration.

There were the usual physical signs of Chronic Bronchitis and Emphysema.

She was treated with Spirone Inhalations, and at the end of September was so greatly improved, that it was only necessary for her to come occasionally. In the latter part of November she took cold, and had a little return of cough and difficulty of breathing. One week's treatment completely relieved this and she has passed through the winter without further trouble.

She now reports: I have not been so well these five years as I am at present, although I have a bad cold. All the fog we have had this winter has not affected me in any way.

LXXII.

T. B., 20, Clerk (171—May 20th, 1886). He had suffered for three years from Bronchitis, the attacks lasting nearly all the winter, frequently confining him to the house for weeks together.

He had the usual auscultatory signs of Chronic Bronchitis.

He was under treatment almost continuously for three months, then for two or three days a week for another month or so. He was much relieved by the treatment, and by this time felt fairly well and discontinued.

As winter came on, however, he took cold, and again returned for treatment, but has only found it necessary to take a few Inhalations now and then through the winter to keep himself quite well. He is better now than he was even during the summer of the previous year.

LXXIII.

S. J., 44, Married Woman (224—July 14th, 1886), had suffered from coughs and colds for the last fifteen years. Has had Asthma for four years. The attacks come on almost every night, and sometimes she cannot lie down for two or three weeks together, "when she has a cold upon her." Her appetite is good, but she suffers from indigestion. She has been away from London for change, but was bad all the time.

There were the usual physical signs of Chronic Bronchitis with Emphysema. Cooing and wheezing sounds all over the chest.

She was treated with the Spirone Inhalations modified in strength from time to time according to the indications of her condition. She made steady

improvement. The attacks became less severe, and at the end of two months she reported that, for the first time, she had been free from an attack during the night.

With the exception of a little recurrence of her old symptoms from time to time on taking cold, her progress has been steadily maintained. She left off attending in November, and now reports that she has been much better through this last winter than even in the preceding summer before commencing the treatment. She takes the Spirone Inhalation whenever she has any signs of Cold or Bronchitis.

LXXIV.

C. C., 43, Labourer (365—November 22nd, 1886), was under treatment at the Dispensary twelve months ago for Chronic Bronchitis of many years duration. Was cured and remained very well, until the cold weather set in, when he had some return of his old trouble and again came for treatment.

His condition this winter has been vastly better than the one previously, his general health is much improved, and he has hardly been kept within the house during the whole winter.

LXXV.

W. W., 44, Cabman (369—November 25th, 1886). This patient's case was given in the First Report, No. XXI. He had suffered from Bronchitis for some months before coming under treatment, during the greater part of the time he had been unable to work. He rapidly got better and went to work, keeping well.

Towards the end of November he caught cold and had a slight attack of Bronchitis. He came back to the Dispensary, and a fortnight's treatment was sufficient to set him up again, and he has gone through the winter without any breakdown.

LXXVI.

E. J., 36, Machinist (192—June 9th, 1886), has had a bad throat for 14 years, following an attack of Quinsy. The winter before coming under treatment was much worse.

The throat was much inflamed and granular. Her general health was much impaired. She was treated with Spirone and Swann's Hypophosphites. Under this she greatly improved. She returned again for treatment during the last winter, principally on account of general debility. She now states that she is much stronger, and better able to do her work than formerly.

CONSUMPTION.

The number of cases of Consumption which came under treatment was 42; of these were:—

	Remaining under treatment, June 30th, 1886.	New Cases.	Total
Cured	3	3	6
Relieved	7	16	23
Died	2	2	4
Still under treatment	none	9	9
	<hr/>	<hr/>	<hr/>
	12	30	42

FREEDOM FROM HÆMORRHAGE.

In my First Report I called attention to the freedom from hæmorrhage of consumptive patients while under my treatment.

I showed that Walshe represents the frequency of blood spitting at 80 per cent. ; Louis at 67 ; the first Medical Report of the Brompton Hospital, 63 ; the second Medical Report gives 62 ; Dr. C. T. Williams, 57 ; Dr. Cotton puts it at 53 ; Dr. Thompson at 45 per cent.

I added that out of 33 patients treated at my Dispensary, blood-spitting occurred five times in patients whilst under treatment, which gives a per centage of only 15 per cent., but even this was always in cases where it had shown itself previously to the patients coming to the Dispensary ; it was always slight, and easily yielded to treatment.

This has again held good. Out of the 42 cases treated during the six months ending December 31st, 1886, there were only seven cases who suffered from this complication during the time they were under treatment, although out of the 42 there were 33 patients who gave a history of hæmorrhage, and every one of the seven who had it while under treatment had had more or less blood in their expectoration before coming to the Dispensary.

The reader will perceive, as I said in the former Report, what an important bearing this has upon the prognosis of the disease, and its significance with regard to the efficacy of the treatment.

CASES OF CONSUMPTION.

LXXVII.

B. W., 44, Cabdriver (177—May 25th, 1886). Nine months before coming under treatment, he took a severe cold, and has had a troublesome cough ever since. His breathing is much oppressed, so that he cannot lie down in bed. There is a good deal of expectoration often streaked with blood. His rest is disturbed, and he sweats all night. His appetite has failed, and he has lost flesh and strength.

There were signs of deposit over a great portion of the right lung, and general feebleness of the respiratory function.

He was treated with Spirone and Swann's Hypophosphites, and soon showed signs of improvement. His cough diminished almost from the first, and his breathing improved so that he could lie down in bed. The expectoration diminished, his appetite returned. The night sweats disappeared, and at the end of two months he went to work, coming occasionally during another month.

LXXVIII.

J. A., 31, Coachman (188—June 4th, 1886), two years before coming under treatment he had copious hæmorrhage from the lungs. For six months before this he had suffered from cough and expectoration. He complained of pain in the side, shortness of breath, loss of appetite and strength. He

had a troublesome cough, copious purulent and very offensive expectoration, frequently mixed with blood. He had night sweats, and had lost flesh—and looked quite bloodless. There was tubercular consolidation of the whole of the right lung and also of the upper part of the left, with signs of a cavity in the upper part of the right lung.

The treatment was commenced with inhalation of $\frac{1}{4}$ strength Spirone. For a considerable time the patient's condition was most critical. He had frequent returns of haemorrhage, which, however, were always easily controlled. The cough was to some extent relieved, but the expectoration continued to be very copious, although it eventually lost its offensive character. At the end of the second month, his general condition had somewhat improved and as there had not been any fresh bleeding from the lungs, small doses of Swann's Hypophosphite were given, the effect being carefully watched. Improvement from this time was uninterrupted, and at the end of four months, he was able to return to his work, in the meantime going on with the treatment.*

LXXIX.

J. W., 30, Married Woman (200—June 17th, 1886). She has suffered from a slight hacking cough for six years with expectoration. This has lately increased very much, and has become very thick and purulent. The cough commenced after typhoid fever. For six weeks before coming under treatment, she has been getting very weak, has been losing flesh, and has night sweats. There was general feebleness of the respiratory function.

She was given Spirone, half-strength, and full doses of Swann's Hypophosphites, she steadily improved and gained strength. The cough and expectoration diminished. At the end of six weeks she felt well and discontinued the treatment.

LXXX.

J. S., 51, Married Woman (220—July 6th, 1886). She has suffered from cough and expectoration for about six months. She has lost strength, and has become much thinner. She had night sweats, her appetite had failed, and there was considerable disturbance of her digestion.

There was diminished percussion resonance at the upper part of both lungs, and the auscultation signs showed there was softening in the positions named.

She was under treatment about six weeks, and showed signs of improvement almost from the commencement, by diminished cough and expectoration. Her appetite gradually improved, together with her digestion, and she felt much stronger. At the end of this time she considered herself sufficiently well to discontinue the treatment.

LXXXI.

C. K., 34, Clerk (239—August 4th, 1886). Four years before coming under treatment he commenced spitting blood, and this has recurred at intervals of six or eight months. He coughs in the morning principally, and spits up a

*Since going to press, I have been informed that this patient died towards the end of last year, from an acute attack of Inflammation of the Lungs. This frequently happens in such cases, when the patient is obliged to return to work too soon.

little phlegm. He has pain of a sharp character in chest. Has lost flesh especially of late. He has perspired at night almost from the time he first spat blood. He is short of breath especially upon exertion, or on going upstairs. His mother and a sister died of Consumption.

Auscultation showed signs of commencing Phthisis.

He was treated by Spirone and Swann's Hypophosphites, and steadily improved, but did not continue the treatment sufficiently long to ensure permanent results. He has, however, kept at his work, and passed through the severe weather of the present winter, with only a slight return of cough, upon taking cold, for which he again came for treatment.

LXXXII.

A. M., 35, House Painter (245—August 11th, 1886). He has coughed more or less for the last nine years with expectoration, principally the morning. Has been losing flesh, and is now unable to attend to his work. He sleeps well, has a good appetite, and has no night sweats.

There were signs of extensive disease of the left lung, with a cavity in the upper part in front. The disease did not appear in a very active state.

He was treated with Spirone Inhalations, half-strength, and the Swann's Hypophosphite of Lime.

Under this treatment he made manifest improvement, and at the end of the six weeks he was under treatment, was able to resume his work, he then discontinued his attendance, but went on with the treatment at home.

LXXXIII.

W. T., 58, Labourer (313—October 18th, 1886). He had been five months ill with cough and spit blood two months before coming under treatment. He complained of shortness of breath, and his expectoration was still streaked with blood.

There were signs of deposit in the upper part of both lungs, and the respiration was feeble throughout.

After the first week there was no haemorrhage. The cough and expectoration steadily improved. He still complained of a little pain in the side, which was relieved by a sedative plaster.

After a sufficient interval, Swann's Hypophosphites were given in addition to the Spirone, which he had taken from the commencement.

He remained under treatment about two months, at the end of this time he was much improved and able to return to his work.

LXXXIV.

A. B., 7 (315—October 19th, 1886). She has suffered from cough, after an attack of Bronchitis, ever since she was eighteen months old. There has been much more cough lately, and a considerable amount of expectoration.

Her general health is much impaired, she is thin and pale, and has night sweats. No appetite. There is diminished resonance at the apex of the left lung, before and behind. The respiratory murmur is harsh, expiration being

greatly prolonged, augmented, and rough in character. She was given Spirone half-strength, and Swann's Hypophosphite of Soda. Her cough steadily improved. After the first fortnight she had no night sweats. At the end of a month she had little or no cough. She continued to improve in every way, getting stronger and stouter. The treatment was persevered in for three months, the latter part of the time she only attended three days weekly. When she left off she appeared in perfect health.

LXXXV.

J. M., 18, Gardener (327—October 25th, 1886). He had an attack of Pleurisy a month before coming under treatment. Since that time he has had a little cough, and his breathing has been rather short, especially after exertion. He has a slight pain in the side.

There was found to be slightly diminished resonance at the upper part of the left lung with feeble respiratory murmur which was also wavy in character.

He was under treatment about a month, taking Swann's Hypophosphite of Lime, and Spirone half-strength.

He soon lost his cough, and seemed quite restored to health, and was ordered to continue taking the Hypophosphite in small doses through the winter.

LXXXVI.

T. M., 20, Baker (328—October 25th, 1886). He had suffered from cough more than 18 months, and for 12 months had been unable to work. He had haemorrhage six months ago, has lost flesh and strength, complains of shortness of breath, perspires at night. The cough is troublesome, but there is not much expectoration.

There is evidence of a considerable amount of deposit in the upper part of the right lung, and there was a want of resonance also on the left in the same position.

He was under treatment about six weeks, during which time he improved considerably. Owing to his living at a distance he was unable to attend any longer at the Dispensary, but he was going to continue the treatment at home.

LXXXVII.

E. B., 42, Married Woman (300—Oct. 5th, 1886). She has been ill since last Autumn and had spitting of blood last June. She has cough and a considerable amount of expectoration. She has lost flesh and feels very weak.

There are well marked physical signs of Phthisis.

She was not able to attend at the Dispensary as she lived in the country. She therefore was prescribed the Spirone Inhalations and Swann's Hypophosphites, which she has continued to take regularly at home, coming occasionally for advice. She has progressed satisfactorily and now reports that all her symptoms are much improved. She has less cough and expectoration, her appetite is better, and she feels stronger.

ASTHMA AND BRONCHITIS.

Number of cases treated				58	Total
Remaining under treatment, June 30th, 1886.				New Cases.	
Cured	5	10			15
Relieved	8	21			29
Still under treatment	1	13			14
Died	none	none			none
	14	44			58
	—	—			—

LXXXVIII.

M. D., 38, Female, Married (79—March 15th, 1886). Chronic Bronchitis. Has had a cough during the winter for many years, but has been free during the summer, until the last year when she did not lose it entirely, and this last winter has been much worse.

Has lost flesh, feels very weak, perspires at night. Cough very troublesome, with little expectoration, which is sometimes slightly streaked with blood.

There are the usual auscultatory signs of Bronchitis. Throat congested. Tonsils somewhat enlarged.

She was treated with Spirone Inhalations, and after a while, as she was very much debilitated, Swann's Hypophosphites were prescribed.

Under this treatment she steadily improved, and her cough diminished, so that at the end of three months she felt quite well.

This patient has returned on one occasion since for treatment, having taken cold, with a return of cough. She only required the administration of the Inhalations for a fortnight to relieve her completely.

LXXXIX.

J. B., 41, Female, Married (120—April 20th, 1886). Chronic Bronchitis and Asthma. For four years she has had cough and copious expectoration with shortness of breath.

There were the usual auscultatory signs of Chronic Bronchitis with considerable Emphysema of the lungs.

She was treated by means of the Spirone Inhalations, and by such of Swann's preparations of the Hypophosphites as from time to time her case required.

She made steady improvement. After four months' treatment she discontinued the treatment for a time. She then took cold, and returned for a short period, her cold being soon relieved. Since this she has not come again for treatment.

XC.

S. H., 70, Female (154—May 8th, 1886). Had suffered from a trying cough for six months before coming under treatment, especially troublesome in the morning, accompanied by difficult expectoration, and shortness of breath.

There were the usual signs of Bronchitis throughout the chest, with Emphysema. She made steady improvement from the first.

The treatment was continued for about three months, the latter part of the time with intermissions.

At the end of the time she was free from cough, but suffered a little from shortness of breath, consequent upon the Emphysema.

XCI.

S. J., 44, Married (224—July 14th, 1886). Asthma and Bronchitis. She has suffered from attacks of Bronchitis for the last 15 years, and from Asthma for the last four years. The attacks of Asthma come on almost every night, and sometimes she cannot lie down for two or three weeks together, when as she says "she has a cold upon her."

On one occasion she went away for a change of air, but was ill all the time. Her general health has become much enfeebled.

The auscultatory signs shewed general Bronchitis and Emphysema of both lungs.

For the first month she was under treatment the cough and difficulty of breathing were considerably relieved, but it was two months before the attacks of Asthma left her. This was the first time she had been free for many months. She continued to make slow but constant progress. At the end of three months she was much improved. About this time she took cold, and although she had for a time considerable increase of cough and expectoration, she had no Asthmatic attacks, such as had been always the case previously to coming under treatment. She continued the treatment at the Dispensary for somewhat more than three months and then went on with it at home.

XCII.

F. B., 11 (229—July 1st, 1886). She had suffered from cough for several weeks, had lost her appetite and wasted considerably. There were no signs pointing to disease of the lung, beyond Bronchitis. She took Spirone and Swann's Hypophosphate of Lime. At the end of six weeks she had greatly improved in health, had lost her cough, and gained flesh.

XCIII.

C. C., 10 months (235—July 28th, 1887). This baby had Measles when four months old, and has suffered from Cough ever since. He has also had attacks of Bronchitis at intervals. From being a well developed, fat child, he has become exceedingly thin and feeble, constantly moaning as though in pain.

At first Spirone a quarter-strength was administered, this, after a few days, was increased to half-strength. At the end of a week the Cough had considerably diminished, and small doses of Swann's Hypophosphate of Lime were administered.

Under this treatment he rapidly improved, and became quite plump and well.

XCIV.

A. U., 72 Widow, (236—July 30th, 1887). Bronchitis and Asthma. She had suffered from attacks of Bronchitis for five years, these were more frequent and severe during the Winter months. She had considerable shortness of breath when fairly well, and during the attacks the dyspnoea was very great.

She improved very much whilst under treatment, which consisted of Spirone full strength for the first week, after which the strength was reduced to half, and she was given also a small dose of Swann's Ammonia Hypophosphate daily.

Unfortunately she was not able to continue the treatment after the end of six weeks, but at this time she was feeling much relieved.

XCV.

J. G., 43, Stableman (240—August 5th, 1887). Bronchitis and Asthma. He had a bad Cough all through the last Winter, and for many Winters before that he had Coughs and Colds, but not severely. He spits up a good deal of white and frothy phlegm. His breathing is short, especially in going up-stairs. He is very liable to take cold. He feels very weak and has no appetite. At times during the last three or four months has spit up a little blood. He sleeps fairly well, coughs mostly in the morning. He has lost flesh, but has not perspired at night. He has been obliged to give up work. He had the usual signs of Chronic Bronchitis with a considerable amount of Emphysema. He was under treatment for about a month making steady progress during that time. Feeling much better he went to work and has not had occasion to return for treatment.

XCVI.

W. K., 37, Engine Driver (244—August 10th, 1886). Bronchitis and Asthma. For the last two years he has had considerable difficulty of breathing. About 16 years ago he had a severe attack of Bronchitis, and ever since then he has been very liable to coughs and colds. He does not cough or expectorate much. He is troubled by shortness of breath.

On auscultation there were found the usual signs of Bronchitis with Emphysema of the Lungs.

He was treated with the Spirone Inhalation, and felt considerable relief, from the first week. As he lived at a distance, and could not afford the time to attend at the Dispensary, at the end of a fortnight he was sufficiently improved to enable him to discontinue his attendance, and go on with the treatment at home.

XCVII.

C. M., 48, Married Woman (246—August 14th, 1886). Chronic Bronchitis and Asthma. She has had a bad cough with shortness of breath for eight or nine years. She has been getting worse lately and cannot rest or lie down at night with comfort. There is very abundant expectoration.

Her chest presented the usual signs of Chronic Bronchitis with Emphysema.

She only attended for a fortnight, but at the end of that time, seemed much easier in her breath, and had less cough and expectoration.

XCVIII.

J. T., 60, Army Pensioner (253—August 23rd, 1886). Chronic Bronchitis. He had Pleurisy 10 years ago, and has been subject to attacks of Bronchitis for the last seven years.

He has a good deal of cough at night, and in the morning, with expectoration of a quantity of thick white phlegm. His appetite is good, and he does not feel ill.

There were the usual signs of Bronchitis found in the chest.

He attended for about a month, and greatly improved whilst under treatment. He then continued the treatment at home.

XCIX.

E. D., 50, Bricklayer (257—August 28th, 1886). Chronic Bronchitis. He has suffered from frequent attacks of Bronchitis for the last 14 years. He has a cough with expectoration and is short of breath. His rest is disturbed by cough, and he complains of weakness.

There were the usual signs of Bronchitis and Emphysema.

He was only able to attend about three weeks, during which time he steadily improved. He has not returned for treatment.

C.

G. A., 56, Clerk (261—September 2nd, 1886). Bronchitis and Asthma. Had suffered on and off for many years with attacks of Bronchitis, which latterly had become more severe, and produced considerable difficulty of breathing. He had a troublesome cough, with difficult expectoration. He could not lie down in bed, and sleep was much disturbed by cough. For some time he had been losing flesh and strength.

On Auscultation the usual signs of Bronchitis, with considerable Emphysema were found.

At first the Spirone Inhalation were given in weak doses, then gradually increased to three-quarter strength, and afterwards to full strength. This was continued with slight modification from time to time as his symptoms indicated, for about two months. He steadily improved, only having one or two slight relapses from taking cold during the whole time. After this he came at intervals of several days, and gradually discontinued, feeling well, and able to go to work.

CI.

H. H., 57, Butler (265—September 13th, 1886). Chronic Bronchitis. He had suffered from Winter Cough for three Winters.

He had an attack of Bronchitis in the early part of preceding April, and has had a cough from that time. He had expectoration, and complained of shortness of breath.

His chest presented the usual signs of Bronchitis.

He made steady progress under the Spirone treatment, which was mostly used half-strength, and at the end of two months was well enough to discontinue the treatment and go to work.

CII.

C. J., Married Woman, 54 (274—September, 18th, 1886). Bronchitis. She had a cough for a month or so before coming under treatment. Her health had very much failed of late. Her cough was very troublesome, disturbing her rest. The expectoration was copious, white and frothy. She had at one time night sweats, but these had not troubled her lately. Her appetite was fairly good.

No dullness was found on examining her chest. There were signs of Bronchitis, principally on the right side.

The treatment was commenced with Inhalation of Spirone, half-strength. With this her cough and expectoration diminished, the latter becoming less frothy. As she showed signs of considerable debility, she was given Swann's Hypophosphite of Soda. At the end of three months she was quite restored to health.

CIII.

T. W., 40, Mineral Water Maker (293—September 28th, 1886). Bronchitis and Asthma. Has suffered from Bronchial attacks for the last two years, and during the last three or four months has been getting much worse. Cough troublesome with great difficulty of breathing, so that he cannot lie down at night. Has lost flesh, and strength has much diminished. The difficulty of breathing comes on frequently in spasmodic attacks.

His chest is badly developed and expands imperfectly.

No dullness. There are cooing and mucous rales all over the chest, and expiration is much prolonged.

He steadily improved under treatment, the attacks of dyspnœa became less frequent, and the cough diminished. After two months treatment he was able to resume his work.

CIV., CV., CVI.

E. M., F., G. S., aged 6, 5, & 2, respectively. (305—Oct. 12th, 1886). Bronchitis after Whooping Cough. These three children had whooping cough eleven months before coming under treatment, and since then have had most troublesome coughs, of a violent, explosive character, somewhat paroxysmal, and especially distressing at night, so that their rest was much disturbed. The coughs had not been relieved by ordinary measures, such as cough mixtures, &c. The two elder children had a considerable amount of Bronchitis, and all had more or less suffered in general health.

The cough was somewhat diminished after the first two or three applications of the treatment especially at night. They did not require attendance from their mother as hitherto. The eldest child improved most rapidly, and at the end of a fortnight was comparatively well. This result was probably due to his taking the inhalation better. The others however also steadily improved, but it was nearly two months before they were well enough to discontinue the treatment.

In consequence of the state of debility induced by the long continuance of the cough, and disturbed rest, all the children had Swann's Hypophosphite of Lime given to them for several weeks.

CVII.

E. B., 25, Shorthand Writer (323—October 23rd, 1886), Chronic Bronchitis and Asthma. He has suffered from difficulty of breathing, accompanied by cough and mucous expectoration, for three years, on and off.

Cough moderate, expectoration tenacious and difficult, breathing at times much oppressed. General health fairly good.

Chest slightly hyper-resonant. Expiration prolonged throughout both lungs. Cooing rales all over both lungs before and behind.

Took Spirone half-strength, and continued it steadily.

He made continued progress throughout, in spite of the severe weather. At the end of the year he was keeping well, and stated that he was much better than he had been for a long time.

He continues the treatment at home.

CVIII.

W. W., 40, Coal Miner (349—November 17th, 1886), Chronic Bronchitis and Asthma. He has suffered from cough and shortness of breath for three years. Worse in winter, and was laid up four and five weeks at a time last winter.

Cough very bad at night, disturbing his rest. Expectoration thick and copious.

No dullness on percussion. The respiratory sounds are rather feeble throughout both lungs. Fine mucous rales here and there, principally at the base of the left lung.

Spirone half-strength was given. At the end of the first week his cough was easier, he slept better and expectorated less.

He took the Spirone regularly, and continued under observation a month, and during the latter half of the time was prescribed Swann's Hypophosphite of Lime in small doses, daily.

As he lived at a distance from town he could not attend any longer, but he continued the treatment at home.

CIX.

C. J., 14, School Girl (361—November 22nd, 1886), has been weak and had slight cough for some time. Expectoration in the morning. Appetite bad.

A few mucous rales at the back of left lung.

She was given Spirone half-strength, and a daily dose of Swann's Hypophosphite of Lime.

At the end of a fortnight she felt much stronger, her cough had gone, her appetite had returned, and she was able to return to school.

CX.

W. W. (369—November 25th, 1886). Twelve months ago he was under treatment at this Dispensary for Chronic Bronchitis of long standing, got well, and able to follow his employment of Cab-driver.

A week before returning for treatment, he caught cold, had signs of a little Bronchitis, and was suffering from cough and expectoration.

Until taking this cold he had been quite well.

The Spirone was administered full strength, and in about a fortnight he was again able to return to work, being fairly well.

This case has been already referred to, (LXXV).

CXI.

C. S., 61, Painter (371—Nov. 26th, 1886). Chronic Bronchitis. He has suffered from bad cough in the winter for many years. He begins to get bad as soon as the cold weather comes on.

He has a troublesome cough, with expectoration which is generally scanty and difficult. His breath is very short.

His chest is badly developed and expands badly. Throughout both lungs there are signs of Bronchitis and considerable Emphysema. His treatment consisted of daily inhalations of Spirone, varying in strength according to circumstances, and Swann's Hypophosphites of Potash and Ammonia.

Under this treatment he steadily improved, and was able to return to work, after two months attendance.

AILMENTS OF NOSE, THROAT, AND WINDPIPE.

Number of cases treated	..	..	..	..	..	..	37
			Remaining under treatment, June 30th, 1886.		New Cases.		
Cured	..	..	5	..	15	..	20
Recovered	..	..	2	..	11	..	13
Still under treatment	..	..	none	..	4	..	4
Died	..	..	none	..	none	..	none
			—	—	—	—	—
			7	30		37	
			—	—	—	—	—

CXII. & CXIII.

F. and G. H., 10 and 12 (73 and 74, March 15th, 1886). Brother and sister have both had enlarged Tonsils for some years, and from time to time have trouble from fresh attacks of inflammation, which render swallowing difficult and painful.

In both cases, the Tonsils are much inflamed and swollen, so that the passage appears quite blocked up by the enlarged glands. Both are very unhealthy in appearance. Their appetites are bad.

They were treated by Spirone at different strengths according to circumstances upon the Tonsils, and Swann's Hypophosphite of Lime.

Under this treatment the inflammation subsided, the swollen glands greatly diminished in size, and the general health of both patients vastly improved. They were under treatment about three months.

CXIV.

N. F., 10 (187—June 3rd, 1886), has had repeated attacks of Tonsillitis, which commenced when she was a year and a half old. She had also had diphtheria.

The throat was much inflamed, and both tonsils considerably enlarged.

The Spirone was at first used half-strength, a portion being sprayed directly upon the part. After two or three applications there was a considerable improvement in the inflammatory condition, accompanied by a sense of comfort.

The treatment was continued without interruption for two months, the Spirone being used for some time at full strength, with the result that the tonsils were considerably diminished in size, and the patient's general health much improved.

CXV.

J. B., 34, Cabman (197—June 16th, 1886). Pharyngitis. He had suffered very much from sore throat, and for a considerable time had not been able to swallow without pain. His throat was much congested and granular. The Spirone was applied in the usual way, a portion of the Inhalation being sprayed each day directly upon the throat, and the rest inhaled, the strength being varied, according to indications. At the end of a month he was cured.

CXVI.

G. L., 34, Married Woman (221—July 8th, 1886). About six months before coming under treatment she had what was said to be "an abscess in the roof of her mouth." When she came under treatment she was suffering from pain and difficulty in swallowing. The throat was found to be much inflamed, with extensive ulceration of the soft palate.

Spirone was sprayed upon the throat daily, and in a few days the inflammation was much reduced, and she could swallow with comparative ease. The ulcer gradually healed, and at the end of a month she discontinued the treatment and went into the country. At the end of three weeks she returned, complaining of pain in swallowing. A small ulcer was found at the lower part of the soft palate. This was treated as before, and at the end of a week she was quite well, and has remained so since.

CXVII.

A. B., 3 (203—June 21st, 1886). She was brought for treatment as she frequently suffered from pain in the ear, with occasional discharge. The external ear was inflamed, and when first seen there was a slight discharge. She was a very delicate-looking child, with enlarged glands in the neck.

She was given Swann's Hypophosphate of Lime, and the Spirone Spray was applied to the ear. The ear-ache was generally relieved by one or two applications of the Spirone, on the occasions that she had any return of it. After about a month her health had very much improved, she looked stronger, and had a more healthy appearance, her general condition had improved, and the attacks of ear-ache did not return.

CXVIII.

F. L. S., 24, Clerk (225—July 13th, 1886). Pharyngitis. He came complaining of cough and pain in chest. There had been some expectoration streaked with blood. His general health was good, he had not lost flesh or strength.

There were no signs of chest complaint.

His throat was much congested and granular.

He was so much relieved after the first two or three applications of the Spray to his throat, that he attended during one week only, and considered himself sufficiently well to discontinue the treatment.

CXIX.

F. B., 6 (227—July 20th, 1886). Enlarged Tonsils. Has been delicate ever since he was born, is said to have had congestion of the lungs three times.

He does not sleep well, and his appetite is not good.

There are no signs indicating Lung Disease.

His tonsils are much enlarged and inflamed.

His throat was sprayed with Spirone, and he took Swann's Hypophosphite of Lime.

He was under treatment a month. At the end of that time his general health had much improved, the tonsils were much reduced in size, his appetite was much better, and his rest was not so disturbed.

CXX.

W. F., 30, Cabinet Maker (243—August 10th, 1886). Pharyngitis. He has had pain in chest and throat for eight months, and has been much worse the last few weeks. He has no cough but spits some black phlegm. He has lost his voice to some extent, so that he cannot sing as usual.

His general health is good.

There are no signs of chest disease.

The pharynx is congested.

The Spirone spray was used half-strength, applied directly upon the throat. A week's treatment sufficed to relieve the symptoms complained of.

CXXI.

H. J., 14 (250—August 20th, 1886). He has had attacks of sore throat ever since he was a little child. The last week he has been much worse than usual. He is not a strong youth.

The throat was much relaxed and congested.

His throat was sprayed with the Spirone full strength, and he was given Swann's Hypophosphite of Lime.

Under this treatment he steadily improved, and at the end of a month he was quite well, the improvement in his general health being very marked.

CXXII.

W. R., 18, Box Maker (273—September 18th, 1886). Enlarged Tonsils and Pharyngitis. He has had enlarged tonsils from early childhood. He was subject to cough when taking cold, or on going into a smoky atmosphere. He had a little expectoration.

His throat was considerably congested.

A few mucous rales were found on auscultation, indicating slight Bronchitis, principally on the right side.

His throat was sprayed with pure Spirone, and during the week he attended at the Dispensary its condition manifestly improved, and his voice was much clearer. He continued the treatment at home, and when last seen about two months after commencing, he was quite well.

CXXIII.

J. J., 27, Draper (275—September 18th, 1886), he has suffered from catarrhal affection of the Nose for several years, the sense of smell being entirely lost.

There were no chest symptoms. The pharynx was congested and somewhat granular.

Spirone full strength was sprayed upon the throat, and a whiff or two up each nostril. This treatment was persevered in for two months; the symptoms of the nose and throat had much improved. The sense of smell had returned for a short time at intervals.

The patient was then lost sight of.

CXXIV.

F. W., 7, (283—September 21st, 1886). Bronchitis and enlarged Tonsils. He had whooping cough five months before coming under treatment, and has had a cough ever since, and has been subject to Colds and Bronchitis. His tonsils are much enlarged.

He was prescribed Spirone half-strength, a portion of which was to be sprayed upon the Tonsils.

This treatment greatly modified the cough.

After a time the Spirone full strength was sprayed upon the Tonsils, and the half-strength inhaled as before.

At the end of two months, he had lost his cough and the Tonsils were considerably reduced in size. He has not been since seen.

CXXV.

C. D., 57, Married Woman (305—October 11th, 1886). Granular Pharyngitis. For twelve months before coming under treatment, she had suffered from a troublesome accumulation of phlegm in the throat, especially in the morning, giving rise to an irritating cough, and requiring constant effort to get rid of it during the day, often bringing on violent retching.

There was no signs of disease in the chest. The throat was much inflamed and very granular.

The throat was well sprayed with the Spirone, at first half-strength, and afterwards undiluted. The relief after the first two applications was very

marked, and after six week's treatment, the condition of the throat had so far improved, that the patient suffered little or no inconvenience.

CXXVI.

T. C., 24, Labourer (309—October 11th, 1886). Chronic Laryngitis and Pharyngitis. Twelve years ago he had an attack of Diphtheria, and ever since then he has been more or less hoarse, especially during easterly winds and wet weather. He easily gets out of breath, and cannot speak beyond a whisper.

There were no signs of chest disease.

His throat was inflamed and granular. It was sprayed daily with Spirone full strength, and some portion of the dose inhaled in the usual manner.

After a few applications there was a marked improvement in his condition, his voice was clearer and stronger. He stated that his fellow workmen had remarked upon the change for the better. He steadily improved, and at the end of a fortnight discontinued, as he said he felt quite well.

CXXVII.

H. B., Milliner, 23 (325—October 25th, 1886). Pharyngitis. She has had a cough for a month before coming under treatment, and complained of irritation of throat. There were no chest signs. The throat was somewhat inflamed and granular.

It was sprayed with Spirone full strength, and half-strength was used as an inhalation. This treatment gave almost immediate relief. It was persevered in for nearly a month. The throat had then become quite healthy in appearance, and all the symptoms had disappeared.

CXXVIII.

R. S., 16, Domestic Servant (331—November 1st, 1886), has had enlarged Tonsils for a long time. When she came under treatment, she was suffering from an acute attack of Tonsillitis. The throat was much inflamed, and the Tonsils so much congested and enlarged, so as to touch one another in the middle line. She could only swallow with great difficulty. After the third day her throat was much better, and could swallow fairly well.

Her throat was sprayed with Spirone half-strength daily for a fortnight. At the end of that time the tonsils had much diminished in size.

CXXIX.

E. A., 55, Married Woman (338—November 9th, 1886). Pharyngitis. She has suffered from soreness of the throat and mouth for about a week.

The throat was much inflamed and granular. There was also a papular eruption covering the soft palate and roof of mouth. The tongue looked swollen and fissured.

Her throat was sprayed with Spirone full strength. At the end of a week she was very much better. She continued the treatment for about three weeks and was then quite well.

CXXX.

H. B., 6 (359—November 22nd, 1886). Enlarged Tonsils. His tonsils have been enlarged for several years.

After an attack of measles two years ago he has had an obstruction in the nose with constant discharge of mucus, often of a purulent character. His hearing has also been impaired.

His general health has suffered.

His rest is frequently disturbed by a sense of suffocation.

He was given Spirone half-strength, a portion of which was sprayed on the throat, and a few whiffs were administered up each nostril.

Swann's Hypophosphite of Lime was also prescribed.

Under this treatment he steadily improved, his appetite returned, he slept better, the abnormal secretion from the nose gradually diminished, and his hearing was better.

As the end of a month he appeared in good health, and the tonsils had considerably diminished in size.

CONCLUSIONS.

From what precedes, as well as from what has been shown in my *First Report*, I think the following inferences may fairly be drawn:—

FIRST—Chronic Lung disease, whether consisting in Bronchitis or Asthma, and of however long standing, is (contrary to the conclusions drawn from present medical experience) almost always amenable to treatment.

SECONDLY—Patients, while under my treatment, even in advanced disease, are to a great degree independent of atmospheric variations, and continue steadily to improve, even during severe winters, in spite of all the unfavourable conditions of the mode of life of the working classes.

THIRDLY—These same conclusions equally hold good with regard to all other diseases of the air passages, depending upon inflammation, such as Coryza Sore Throat, Tonsillitis, Pharyngitis, Laryngitis, Hay Fever, Whooping Cough, &c.

FOURTHLY—The same conclusions apply to Consumption. The efficacy of the treatment being only limited by the amount of impairment or destruction of Lung tissue, already existing at the time the patient comes under the treatment and by the existence or non-existence of secondary complications.

J. F. CHURCHILL, M.D. (Paris).

6, BENTINCK STREET,

CAVENDISH SQUARE,

LONDON, W.



