

First report of Dr. John Francis Churchill's free stœchiological dispensary, for consumption, and diseases of the lungs, windpipe, nose and throat : with an appendix on croup, diphtheria, and hay-fever / [John Francis Churchill].

Contributors

Churchill, J. Francis

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FIRST REPORT

OF

Dr. JOHN FRANCIS CHURCHILL'S

FREE

Stœchiological Dispensary,
FOR CONSUMPTION,

AND DISEASES OF THE

LUNGS, WINDPIPE, NOSE AND THROAT,

WITH AN APPENDIX ON

CROUP, DIPHTHERIA, AND HAY-FEVER.

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 :

89, MARYLEBONE ROAD, W.

POST FREE ON DEMAND.

1886



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

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Solvitur ambulando.

MY object in opening a free and gratuitous Dispensary, similar to the one I had in operation in Paris for many years, is twofold. First, to place within the reach of the poor a mode of treatment of which otherwise they could not avail themselves, and secondly to afford those, whether professionals or philanthropists, who take an interest in matters relating to the public health, an opportunity of judging for themselves of the value of my system of Stœchiological Medicine, and of the two principal applications as yet made of it: the cure of Consumption by the Hypophosphites, and the treatment of diseases of the Respiratory Organs by Spirone. I say nothing for the present of a third application of my general theory of Pathology to the treatment of Gout, Rheumatism, Neuralgia, and Heart Disease.

A few words of explanation may be necessary:

My system of Stœchiology or Stœchiological Medicine, from the Greek word *stoicheion* (an element), the principles of which were published by me nearly thirty years ago, is founded upon the following propositions:—

All living beings are built up of certain elements which have been called proximate principles.

All disease is conditioned, or in other words depends upon, or is accompanied by changes, either in the quantity or the quality of some one or more of these proximate principles.

A knowledge of these proximate principles, of their mode of origin, of the part they play in the living system, of the changes to which they are subject, of the means of promoting, of controlling, or of arresting such changes embraces the whole field of medical science.

No one man, nor even several generations of men, can expect fully to work out such a subject, nor have I any pretension of the kind. If my doctrine be true it will take very many years, and very many workers, before its scope is fully realized. Here I only wish to show the results I have myself already obtained, by two partial applications of the general principle.

The following are some of the main features of my doctrine of Stœchiology :—

The elements of the system form a first class of natural remedies : such are Phosphorus, Soda, Potash, Lime, Iron, Chlorine, Sugar, Carbonate and Phosphate of Lime, &c., and the object of the physician is to ascertain the conditions of their existence and their mode of action in the system. These are Bromatological or nutrimentary or Food Remedies.

A second class consists of substances which are not naturally elements in the system, but which, by virtue of their chemical properties, may for a time be partially substituted for one of the natural elements; these may be called Substitutive Remedies. To this second class may be referred such medicines as Iodine, Bromine, Manganese, Arsenic, Antimony, &c.

In a third class of toxical or poisonous remedies are included all those which are incapable of taking part in the vital actions, and which can only impair, arrest, or destroy the natural functions. This includes all poisons and the greater part of the drugs at present used in medicine. Some of these may perhaps in time, take their place in the second, or even the first class, but the greater part will probably be laid aside.

My doctrine of Stœchiology differs from current and generally received opinions, not only as a new conception of disease and as a new classification of remedial agents, but likewise in its method and in its practical use of them. It holds that all remedial action is conditional, and that no substance can claim to be a remedy, until two kinds of facts concerning it have been fully ascertained by experiment or observation.

First, we require to know all the different phases and stages of its action on the system, and the different successive *physiogenic* and *pathogenic* effects it produces: the former term comprehending all normal phenomena, all increase or decrease of the functions within their normal limits; the latter comprising all manifestations of new or abnormal effects.

When once these different *physiogenic* and *pathogenic* manifestations produced in the system by any substance have been recognized, determined and classed in the order of their natural sequence, the next requirement is to find out to what phase or stage of this sequence, the remedial or curative action of the remedy corresponds.

This supplies what has hitherto been altogether wanting in Medicine — a general principle which gives the means of establishing, with regard to each substance, a scale to which the effects produced by its action may be referred, and their results accurately measured. Until this has been done for any one drug, its place in a true therapeutical system is undetermined. It has, in reality, no scientific status, and should be looked upon merely as a possibility, requiring or deserving further investigation. The great majority of drugs at present in use are in this case.

This problem has been worked out by me for the Hypophosphites, and many years ago I published the results I had arrived at. I flattered myself that I had thus laid down clear and precise conditions of action, by means of which the physician, with proper care, might always produce constant and definite effects, liable to no other variation or uncertainty than what may always be expected in any long and complex scientific process. These facts have not met with the attention they required and which I think they deserve.

Neither has the example thus set with regard to the Hypophosphites, been, so far as I am aware, followed for any other drug. For several years past medical activity has seldom been applied to the study and determination

of the mode and conditions of action of any substance already known. It seems to be exclusively reserved for the transient, superficial, almost always insufficient and unscientific, consequently unsatisfactory trial of some new remedy, the fleeting fashion of the day, almost of the hour, which comes and goes like a cloud across the sky, and the name of which is hardly learnt before it is discarded and forgotten for some newer one, as evanescent and as inefficient as itself.

I hold, however, that the principle which I have just explained, is a true, or rather the only true, and rational basis of therapeutics, that is of medical science. Through it we shall be able not only to say that a given remedy cures a given disease, but to show the way in which it does so, because we shall know beforehand what signs we have to look for, as indicating the intermediate steps by which the final curative effect is to be reached. When the consequences and applications of this doctrine have been fully worked out—therapeutics, that is the science of curing disease, will become as consistent, as coherent, as exact, and as certain a branch of knowledge as Physics or Chemistry.

This is a very brief outline of a vast subject, which I have treated of more fully elsewhere in my different writings, and which I have only mentioned here for the purpose of explaining the title adopted for my dispensary, and the fundamental characteristics of my practice.

The basis of the treatment followed are my Hypophosphites, prepared by Swann, of Paris, for Consumption, and Spirone for Inflammatory and Congestive conditions of the breath organs. Occasionally other remedial means have been temporarily employed to fulfil secondary and transient indications.

My purpose for the present is not to give complete reports of cases but merely a general view.

During the short time my Dispensary has been opened, from Dec., 1885, to June, 1886, the following results have been obtained:—

Total Attendances, 1840; Number of Patients under Treatment, 130.

	Cases Treated.	Cured.	Relieved.	Still under Treatment.	Died.
Consumption	33	12	8	12	1
Asthma and Bronchitis	49	23	13	13	None
Diseases of Windpipe, } Nose, and Throat }	31	20	4	7	None
Whooping Cough ..	17	13	4	—	None

Most of the patients whose cases are indicated as having only improved, did not go on to complete recovery, owing to their having left off the treatment too soon. In many instances because having improved enough to be able to return to their work, they had not time to attend the Dispensary; in some, because they could not afford the cost of conveyance to it.

CONSUMPTION.

Nearly thirty years ago when I announced that I had discovered that the cause of Consumption consisted in the want or the waste of the oxidizable phosphorized elements in the body, and that the remedy for it was the use of some oxidizable and assimilable compound of phosphorus, and specially of the hypophosphites, my assertions were received by the Medical Profession, particularly in this country, with every form of incredulity, reproach, and even obloquy.

At that time Consumption was almost universally looked upon and declared by the highest medical authorities to be altogether incurable, and my discovery, which had been given to the world freely and without any reserve, was scouted as arrant quackery. My specific was declared, after trial, to be as powerless as soda or sawdust. This was in 1858 and following years.

Now in 1886, the Hypophosphites are in the British Pharmacopœia, and in that of almost every civilized country. There is not a single detail of any one of my statements about them which has not been established by the independent testimony of other competent observers. They are used by medical practitioners all the world over. There is not a physician of any eminence by whom they are not prescribed. The medical corporations, which were loudest in denial of their efficacy, now use them and say nothing. The patients, whose cure is reported as due to the healing virtues of this or that winter or health resort, prove, on enquiry, in almost every instance, to have been taking the Hypophosphites. These salts which were hardly known to Physicians and even to Chemists by name when I first discovered the use to which they could be put, are now manufactured and sold by the hundredweight. They have made, and are daily making the fortunes of many pharmacutists, pharmaceutical speculators and advertising specialists. Under their own name, or in some disguise, they form the basis of a very large number of pharmaceutical specialities and of quack medicines. Of these a list of more than twenty is now lying before me. The special practitioners, either in or out of the profession, who advertise to cure Consumption, are simply giving their patients the Hypophosphites in disguise. I never meet with a case of Consumption, in which the disease has been delayed or arrested, without the patient having at some time or other taken the hypophosphites. They are used empirically by the public as a domestic medicine; and thousands throughout the world are daily being preserved from Consumption, or are getting cured of it, often without knowing it.

The reports of the Registrar-General show, that since the diffusion of my discovery, and the generalized empirical use of the hypophosphites, the mortality from Consumption has been decreasing in an ascending ratio year by year, as will be seen from the following table:—

The deaths from Consumption in England and Wales amounted in the year

1860 to	1 in every	390	of the population.
1865 „	1 „	393	„ „
1870 „	1 „	414	„ „
1875 „	1 „	452	„ „
1880 „	1 „	533	„ „
1883 „	1 „	535	„ „

This is something, it is much: but it is not enough, I want something more, and I have been derided and reproached for doing so. I want Consumption to disappear. I stated at the outset of my discovery that the hypophosphites were not only a curative specific, but a preservative from Consumption, and that by their means it might be stamped out and become a thing of the past, just like small-pox or the itch.

This has not yet been done for the following reasons:—

The treatment is not used in time, before the lungs have become too disorganized to admit of recovery.

The hypophosphites used are not pure, or some of those prescribed are the very ones that I have shown ought *not* to be given in Consumption.

The hypophosphites are used with other drugs or even with poisons, which interfere with their curative action, or counteract it altogether.

The specific action of the remedy is not carefully kept within the sphere of phenomena, indispensable for it to produce its curative effect, which phenomena I determined experimentally and carefully pointed out more than twenty years ago.

From one or several of these causes many patients after improving for a time with the Hypophosphites fall back and die and the treatment is said to have failed.

But whenever these conditions, are understood, accepted, and acted upon by the Profession and the Public, when the Hypophosphites instead of being taken empirically, as in most cases at present, are given scientifically under the superintendence and advice of the physician, the number of persons who die annually of Consumption and allied tubercular diseases, instead of being as now 50,000 out of a population of 26,000,000, will shrink to a few hundreds.

With regard to the cases of Consumption treated at the Dispensary two points are particularly worthy of note :—

PROPORTION OF CURES AND INFLUENCE OF WEATHER.

The first is, that in spite of the extreme severity of the past winter, which at one time raised the mortality from Lung Complaints from 100 to 160, that is 60 per cent, the improvement of the patients was hardly ever seriously disturbed or prevented by atmospheric variations, and that out of 33 patients only one died.

This will compare well with the results obtained at the Brompton Hospital, where according to one report the number of cures was only $4\frac{1}{4}$ per cent, where according to a second report there were only forty-one cases of arrest or cure out of 5564, and with the official report made to the French Government, which gives but twenty-four cases of cure out of 5270.

FREEDOM FROM HÆMORRHAGE.

The second is the rare occurrence of hæmoptysis.

Although the proportion of cases of phthisis affected with spitting of blood given by different observers differs very considerably, it is hardly ever less than 50 per cent. Walshe represents the frequency 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.

Out of the 33 cases treated at my Dispensary, blood-spitting occurred five times in patients whilst under treatment, which gives a percentage of only 15 per cent. Even then, 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 agrees with the uniform results of my experience for many years past, in my private practice. I find that hæmorrhage among my patients is a very uncommon symptom. When it does occur, it is in those who have a strongly-marked predisposition, and then only for a short time at the beginning of the treatment. When this is fully established, hæmorrhage is, so to speak, almost unknown.

I need not dwell upon the importance of such a fact, with regard to the prognosis of the case, and as an indication of the efficacy of the treatment.

CASES OF CONSUMPTION.

The following is a brief summary of some of the cases:—

I.

J. L., 39, Cabman (17*—December 11th, 1885), has suffered from repeated attacks of Inflammation of the Lungs. Before coming under treatment he had been laid up for three months. Had a troublesome Cough, with a great deal of expectoration and occasional blood-spitting. There were well marked lung signs of Consumption. He was under treatment for two months, improved from the beginning, and left quite restored in health. In addition to the above he had been suffering from Inflammation of the Throat.

II.

A. C., 32, House and Window Cleaner (56—February 8th, 1886), has been ill for five years, always much worse in winter, especially the two last. Has been in hospital. Considerable expectoration with troublesome Cough, has been unable to work for some time. Well marked signs of Phthisis in both lungs. After six weeks' treatment was well and able to return to his work.

III.

J. G., 49, Scavenger (46—February 2nd, 1886), has been ill for four years, much worse for the last two years. Copious expectoration and hæmorrhage, violent and troublesome Cough. Well marked signs of Phthisis in both lungs, with a cavity in the right. Was speedily relieved and was able to go to his work at three o'clock in the morning, in spite of the very severe weather in February, and continued to do so during the whole time he was under treatment. At the end of five months he left off the treatment, and has continued at his work quite well.

IV.

G. C., 24, Policeman (66—March 2nd, 1886), has always had a delicate chest, has been coughing for more than a year, with a good deal of wheezing and shortness of breath. Signs of incipient Phthisis in left lung. After a month's treatment said he was well and discontinued and although the weather was very cold he kept well.

V.

E. K., 23, Servant Girl (88—March 22nd, 1886), has been failing in health for the last two years, feeling weak and perspiring at night. Has a Cough but not constantly. Chest signs pointed to incipient Phthisis. After a month's treatment she was quite well.

VI.

W. H., 18, Coachbuilder's Apprentice (89—March 24th, 1886), has had a Cough for eight years in the winter, getting better in the summer. He has been worse this winter than usual, and has had a constant Cough since the beginning of the year. Expectorates a large quantity of thick yellow phlegm, has been losing flesh, breath very short, sleep disturbed, sweats at night,

* The numbers in the parenthesis refer to the case book.

has complained of pain in the left side the last week. He was much emaciated. There were signs of complete consolidation with softening of the right lung, and of the upper part of the left. There was Bronchitis throughout the left lung. He improved rapidly under treatment, and at the end of three weeks discontinued the Spirone, coming afterwards for a short time for treatment by the Hypophosphites alone.

VII.

A. S., 6, Boy (91—March 21st, 1886), liable to Coughs and Colds, has seldom been able to go to school for twelve months. Has been coughing more the last three weeks. There are signs of Phthisis in right lung. After three months' treatment he was quite well.

VIII.

C. S., 37, Labourer (93—April 1st, 1886), has coughed all the winter and on and off for three years. Loss of flesh and appetite, vomits his food, had hæmorrhage from the lungs last winter. Copious yellow and thick expectoration. Well marked signs of Phthisis in right lung. At the end of two weeks he was so much better, that he was able to go to work and so was unable to continue treatment.

IX.

J. E., 42, Carpenter (121—April 22nd, 1886), has been ill sixteen months after an attack of Pleurisy. Attended Brompton Hospital for six months. Has had a Cough ever since and a good deal of thick yellow phlegm, as much as a large cupful a day. There are well marked signs of Consumption of left lung. After six weeks was very much improved and continued to do well, using the treatment at home.

X.

C. A., 30, Married woman (131—April 26th, 1886), has been ill three years with Hæmorrhage and Cough, much worse for the last three months. Great deal of cough, expectoration of thick yellow matter, profuse night sweats and diarrhœa, and shortness of breath, loss of flesh and appetite, looks very thin, feeble and hectic. Well marked signs of Phthisis in both lungs. At the end of a week was very much improved, and she continued the treatment at home. When last seen in June was looking and doing remarkably well. A very remarkable case.

XI.

K. B., 17, Needlewoman (133—April 27th, 1886), subject to a Cough since three years old, much worse this winter, copious expectoration, no appetite, night sweats, loss of flesh, pain in the chest and back, signs of Phthisis in right lung. At the end of a week was much better and returned to her work.

ASTHMA AND BRONCHITIS.

The mortality from inflammation of the respiratory organs reaches a larger figure than that from Consumption, it exceeds 100,000 annually, and is particularly fatal among those who have reached an advanced age as will be seen from the following table.

	Deaths at different periods of life.			
	55 years.	65	75	85 and above
From all causes	49,603	57,022	43,182	11,271
From the principal senile diseases.	19,244	22,993	11,960	1,770
From Bronchitis and other inflammatory diseases of the lungs	10,866	13,319	8,157	1,554

So that at 55 the number of deaths from Bronchitis and similar diseases is equal to more than one-fifth of the whole mortality at that period of life and to more than one-half of the deaths from the other diseases, which are particularly fatal in advanced life. At 65 it is equal to nearly one-quarter and to more than one-half respectively. At 75 to nearly one-fifth of the whole, and to more than two-thirds of the deaths from the principal senile diseases. Whilst at 85 and above, it causes nearly one-seventh of all deaths, and equals more than three-quarters of the deaths from all the other diseases of advanced life put together.

When Spirone comes into general use it will do for the aged what the Hypophosphites do for infancy, youth, and early manhood; it will enable them to escape from the most frequent and most fatal cause of death to which they are exposed.

The different diseases produced or accompanied by inflammation of the respiratory organs differ in their symptoms, and above all the prognosis varies greatly according to the seat of the attack and the real or supposed nature of the complaint. Inflammation of the windpipe, and particularly of the vocal chords, is evidently a more serious thing than a corresponding degree of congestion of the fauces, or of the nose. A cough accompanying teething is not of the same importance as whooping cough. Sore throat, however violent, is not of the same gravity as diphtheria, and so on.

But all these different complaints, how varied soever they may be in their seat and origin, have one common characteristic, one constant condition, which is the basis of the whole series of phenomena which they present. This common constant condition is inflammation of the tissues, which in most cases begins with congestion of the superficial mucous membrane.

If there existed a means of always controlling, diminishing, or arresting this congestive condition, it is plain that one of the essential, if not the most essential element, necessary for the existence of the disease, would be interfered with or suppressed, so that the disease itself would, first of all, be controlled and then extinguished. This effect is produced by my Inhalant Spirone, which has a specific stimulating action upon the glandular system of the mucous membrane of the respiratory organs. The application of Spirone produces a copious flow of natural mucus from the mucous membrane, and thus immediately removes, or relieves congestion, substitutes healthy for abnormal secretion, and consequently leads to the production of new and healthy, or reparative, in the place of effete, diseased or disorganized tissue.

I do not purpose entering into a discussion of the different theories and explanations which have been given of Asthma, and will merely remark that I hold asthma always to depend upon the existence of some more or less extensive and chronic, congestive, inflammatory, or indurated condition of the air organs which produces, either by reflex stimulus, or even sometimes by direct physical interference, a disturbance of the circulation of nervous influx in the respiratory nerves, and thus brings on the attacks of dyspnoea, characteristic of the complaint. The removal of this chronic condition is followed by the disappearance of the disease. This, of course, is a matter of time, and the period required to arrive at such a result offers as many variations as the disease itself shows varieties and multiform manifestations.

The cure of a case of Asthma, of Chronic Bronchitis, or of advanced Consumption, requires a considerable period of time, because recovery from any chronic ailment can only be obtained by a removal of the diseased tissues, and the growth in their place of new and healthy ones, which may require months or even years to effect.

Patients coming to the Dispensary are, unfortunately, not always in the best conditions for arriving at a conclusively favourable result; because, independently of the difficult and unfavourable conditions of their daily life, they are often obliged to leave off the treatment in order to attend to their work, as soon as they are sufficiently recovered to do so.

Two points are particularly noticeable with regard to the patients treated at the Dispensary:

In spite of the intense severity of the winter, which, according to the Registrar-General's Report, was so great as to raise the mortality from lung diseases from 100 to 160, that is 60 per cent., not one of the patients suffering from Asthma or Bronchitis died.

Several who were subjected to extreme exposure during the worst part of the season, were able to return to their labour, and continue it. Such, for instance, are the three cabmen—Cases xv., xvii. & xxi., and two scavengers, cases iii. and xiv., whose daily work called them into the streets as early as three o'clock in the morning.

CASES OF ASTHMA AND BRONCHITIS.

XII.

L. M., 52, Married Woman (2.—October 29th, 1885), has had chronic bronchitis for 12 years, with great expectoration, oftentimes streaked with blood. Signs of considerable local disturbance. At the end of six weeks was able to return to her work.

XIII.

C. S., 42, Labourer (4.—October 31st, 1885), has been ill for six winters with cough, expectoration and difficulty of breathing, has been under treatment by four different medical men, without benefit. After six weeks' attendance, was able to return to his work.

XIV.

A. G. W., 49, Scavenger (19.—December 14th, 1885), has coughed ever since he was a child, has been gradually getting worse the last 10 years, and was unable to work when coming under treatment. Has severe cough, difficult frothy expectoration, violent attacks of difficulty of breathing at night.

and always great shortness of breath. Well marked signs of bronchitis and emphysema in both lungs. Came regularly for a month, and was so much improved that he left off the treatment, and returned to work. After three weeks' absence was obliged to come back, then attended regularly for five months, and is now quite well. During the whole time he was able to go to his work as early as three o'clock in the morning, in spite of the extreme severity of the winter.

XV.

R. W. B., 44, Cabman (31.—January 5th, 1886), has been subject to colds and attacks of bronchitis for many years, especially in winter. He complained of shortness of breath, troublesome attacks of coughing and expectoration with vomiting. Signs in chest of bronchitis and emphysema. He was under treatment for three months then left quite well, and able to return to his work, and although the weather was very cold he had no relapse.

XVI.

J. T., 53, Labourer (34.—January 13th, 1886), has had a bad cough for two months, generally suffers so in winter, but is worse this year than usual. He came for a fortnight, was much relieved from the first, and when heard of, some time after discontinuing treatment, was quite well.

XVII.

T. J. W., 24, Cabman (37, January 18th, 1886), has suffered from attacks of bronchitis and asthma ever since he was ten years old. The attacks have become more frequent and severe of late. There is evidence of considerable emphysema and bronchitis of both lungs. He was able to resume his work after three weeks' treatment and has continued fairly well, although his circumstances would not permit him to persevere with the treatment sufficiently long to obtain completely satisfactory results.

XVIII.

W. M., 45, Farrier (55.—February 15th, 1886), has been coughing for a fortnight and was unable to work. Well marked signs of bronchitis. After three days' treatment was able to resume his employment, expressing himself much better. He has not been seen since.

XIX.

E. M., 22, Seamstress (62.—February 26th, 1886), has been always subject to colds, more so in winter, when she is seldom free from cough. Had congestion of the lungs two years ago. She has a hard and trying cough. She was so much relieved by a week's treatment that she considered herself quite well.

XX.

E. D., 35, Single woman (63.—February 27th, 1886), has been subject to cough and colds every winter for many years. This last winter has had more cough than usual, and suffered especially from sore throat. The throat is inflamed and somewhat granular. Her cough and the soreness in throat were very speedily relieved, and with a month's treatment she was quite well.

XXI.

W. W., 43, Cabman (65.—March 2nd, 1886), has had a cough all the winter, which came on with a cold and attack of bronchitis, and most of

the time has been unable to work. There were well marked signs of bronchitis at basis of both lungs. He improved from the time he commenced the treatment and at the end of three weeks he was quite well, and kept free from cough after resuming his work.

XXII.

T. L., 64, Farrier (87.—March 22, 1886), has had bronchitis for the last six or seven weeks, following severe cold; coughs a great deal at night. He rapidly improved, and at the end of a week was able to discontinue, feeling quite well.

XXIII.

F. M., 49, Carman (106—April 6th, 1886), has been ill since January with cough and paroxysms of difficulty of breathing in the night. Expectorates a quantity of very thick phlegm. Was cured in three weeks.

XXIV.

J. B., 41, Married Woman (120—April 20th, 1886), has had cough and shortness of breath for four years. Has a good deal of thick expectoration. signs of bronchitis and emphysema in lungs. At the end of six weeks was much improved; still continues treatment.

XXV.

M. A. R., 45, Married Woman (139—April 28th, 1886), has suffered for six years with difficulty of breathing and cough in the morning, and a good deal of expectoration; much worse when taking cold, which she does easily, so that she cannot lie down at night, is generally much better in the Summer. There are signs of bronchitis throughout both lungs. She improved rapidly, and at the end of a week felt well enough to discontinue the treatment.

XXVI.

W. B., 36, Shoemaker (146—May 4th, 1886), has been subject to attacks of Bronchitis every winter for some years, and is only free during very warm weather. He coughs a good deal, is disturbed at night, expectoration copious and thick. There are signs throughout chest of bronchitis and emphysema. He rapidly improved under treatment, was soon able to sleep throughout the night, and at the end of a month had no cough or expectoration.

XXVII.

A. T., 54, Shoemaker (153—May 8th, 1886), has had a cough the last month or so, principally in the morning, with a good deal of expectoration. He was under treatment for a month, and was quite cured.

XXVIII.

S. H., 70, Married Woman (154—May 8th, 1886), has had a troublesome cough for nearly five months, with difficult expectoration and shortness of breath. There were the usual signs of bronchitis. She was under treatment for six weeks, and steadily improved from the beginning. At the end of the treatment she had no cough, and no shortness of breath to speak of.

XXIX.

M. W., 39, Single Woman (158—May 10th, 1886), has suffered from cough and difficulty of breathing every winter for 7 years. There was not

much expectoration. She had lost flesh, and felt weak. Other treatment had not relieved her. There were the usual signs of general bronchitis and emphysema. Her symptoms commenced to improve from the beginning, and after 6 weeks' treatment she had but little cough, and her breathing was much better.

AILMENTS OF NOSE, THROAT & WINDPIPE.

The most remarkable points in these cases are the following:—

The rapidity with which the treatment puts a stop to acute inflammation, however violent, provided it is not superinduced upon a chronic condition.

The completeness of relief often afforded even by the first application.

The very short period of time required to produce entire resolution and disappearance of the inflammation.

Thus, for instance, case xxxi., where loss of voice had lasted a fortnight, was cured by only one inhalation. Case xlii., very severe Angina, which had lasted a week, was cured by two applications of Spirone.

Enlarged Tonsils of very long duration have been reduced to their normal condition; and Chronic Pharyngitis, involving the nasal passages with loss of sense of smell and ozæna, has been cured in a month.

Two cases of long standing severe syphilitic sore throat, and one with ulceration of the septum of the nose, which are now under treatment, have proved equally amenable.

CASES OF THROAT DISEASE.

XXX.

E. V., 46, Seamstress (6—November 5th, 1885), has suffered from sore throat for many years. Has now been ill for six weeks. On the first application felt very much better; in a week she had improved so much that she was told to come only every other day. In another fortnight she was quite well.

XXXI.

C. C., 18, Mat Maker (8—November 11th, 1885), has completely lost his voice for a fortnight, can only speak in a whisper, and has considerable cough and expectoration. One inhalation was sufficient to produce a complete cure. He was met with occasionally for several weeks after, and remained quite well.

XXXII.

J. G., 52, Park Keeper (13—November 24th, 1885), has had trouble with his throat for six months, with singing in ears and swelling of glands. Was under treatment for two weeks. Felt better from the first, and was quite cured.

XXXIII.

S. W., 28, Potman (14—December 1st, 1885), has been suffering for two years from inflammation, involving the throat and nasal passages, with considerable loss of hearing, so that he could not keep his situation. He was able to return to his work after one month's treatment, although he had previously been treated at a hospital, and by several doctors with only slight benefit.

XXXIV.

S. L., 61, Sandwich Man (16—December 11th, 1885). Had a slight amount of bronchitis, but his principal trouble was with his throat, which was much inflamed. He was almost immediately relieved, and after a few days' treatment was able to go back to his work.

XXXV.

J. L., 26, Female (18—December 12th, 1885), has been subject to sore throat for some considerable time, and the present attack has lasted one week. She was relieved by first inhalation, and was quite well at the end of a week.

XXXVI.

K. R., 23, Female (27—January 4th, 1886), has had trouble with her throat from a child, latterly much worse, and has become nearly quite deaf. Throat much congested and tonsils greatly enlarged. Was at once relieved by treatment. Attended regularly daily for a fortnight, and then occasionally, and in three weeks from commencement was quite well.

XXXVII.

A. L., 32 (28—January 4th, 1886) has had winter cough for some years, with wheezing and difficulty of breathing. No physical signs in chest. Inflammation of throat and enlarged tonsils, with herpetic eruption on soft palate. Was cured with a week's treatment.

XXXVIII.

S. D., 44, Cabman (29—January 4th, 1886), complains of pain in chest. Coughs a great deal. No chest signs. Inflammation of throat. Cured in a few days.

XXXIX.

C. C., 17, Dressmaker (58—February 28th, 1886), has had sore throat for several winters, with difficulty of swallowing. Had an abscess formed two months ago, which opened of itself and discharged matter. Tonsils much enlarged, and granular pharyngitis. At the end of a month's treatment she was well.

This patient has returned occasionally, for a day or two at a time with slight inflammation of throat after taking cold. She has always on these occasions obtained immediate relief.

XL.

E. M. 16, Hairdresser's Apprentice (61—February 25th, 1886), has had bad sore throat for three days, with a good deal of coryza and soreness about the chest. Was much relieved the first inhalation, and cured in a week.

XLI.

E. L., 9, School girl (83—March 17th, 1886), had congestion of the lungs five months ago, and has had a Cough ever since, especially at night. There were no signs of chest disease. The tonsils are very much enlarged. After taking the inhalation for a fortnight, her cough had entirely disappeared. As she was weak she then took the hypophosphite of lime for two weeks more and was quite well.

XLII.

J. H., 32, Labourer (95—April 3rd, 1886), has had sore throat and hoarseness for a week after taking cold. Was cured by two applications of Spirone.

XLIII.

S. S., 30, (101—April 5th, 1886), had a sore throat four months ago, has had a troublesome cough ever since, with thick yellow expectoration and pain in the windpipe. Was cured by a week's treatment.

XLIV.

C. S., 9, Schoolboy (137—April 27th, 1886), enlarged tonsils. Cured in a month.

XLV.

E. D., Carman (140—April 28th, 1886), has felt his throat becoming very sore for the last two or three days. The whole throat and fauces were much inflamed. He expressed himself much relieved during the first application of the treatment, and did not return.

XLVI.

E. S., 30, Single woman (141—April 30th, 1886), has had throat affection, which involved the nasal passages, for the last eight years. The sense of smell has been lost for a considerable time. There was great dryness of the mucous membrane which presented a red glazed appearance over the whole pharynx. There was slight ozæna. She remained under treatment a month, and gradually improved; towards the end of the time the sense of smell returned.

XLVII.

F. S., 28, Labourer (148—May 6th, 1886), has had enlarged tonsils for many years. For the last week has had sore throat and difficulty in swallowing. The whole throat was much congested and inflamed. He felt immediate relief from the application of the Spirone spray, and after attending four days, was quite well as far as the acute attack was concerned. He then returned to his work and discontinued the treatment.

WHOOPIING COUGH.

Last year ten thousand children died of this complaint in England, of whom four-fifths, at least, might have been saved by the use of Spirone.

The cases call for no particular remark, except that where recovery was not complete it was owing to the treatment having been left off because the mother thought the little patient was well enough to do without it. Where the treatment was required for more than a week or ten days, this was on account of Bronchitis which had either preceded or been induced by the specific complaint. The special character of the Cough, and its peculiarly distressing violence were usually relieved in the course of the first two or three days, and almost always disappeared before the tenth.

CASES OF WHOOPING COUGH.

XLVIII.

G. C., 2 years (42—January 25th, 1886), had Whooping Cough badly for a fortnight before coming under treatment. For a week he had suffered

much from vomiting and his rest had been much disturbed. After the first two or three inhalations the sickness ceased, and he slept much better. At the end of a week the symptoms of Whooping Cough had ceased. In consequence of the intercurrent Bronchitis the treatment was continued for a fortnight longer, when he was quite well.

XLIX. & L.

A. B., 5 years, E. B., $1\frac{3}{4}$ years (75 & 76—March 5th, 1886), Both children had suffered from Whooping Cough for about a fortnight. In the case of the elder boy he at once obtained relief and was soon cured, but owing to the difficulty experienced in getting the younger one to take the treatment properly, it did not act so speedily, but eventually he was also cured.

LI. & LII.

H. J., 26, and A. J., 19 months, Father and Child (96 & 97—April 3rd, 1886), have suffered from whooping cough for a month. The father, alone, came under treatment at first, and soon manifested signs of improvement. Owing to the distance they lived from the Dispensary they were allowed the treatment at home, and both were cured.

LIII., LIV. & LV.

J. S., 5 years, A. S., 3 years, B. S., 5 months (98, 99, 100—April 5th, 1886), had suffered from whooping cough badly for periods varying from one to two months. Owing to the difficulty of bringing so many children from a distance, these patients were allowed the treatment at home, and they all speedily improved, and were cured.

LVI.

M. A., 3 years, (116—April 17th, 1886), had suffered from whooping cough for three weeks. The patient was so much better at the end of a week that the mother did not bring the child for regular treatment. A few inhalations afterwards, at intervals of two or three days, completed the cure.

LVII. & LVIII.

F. W., 4 years, and Infant of 5 months (142 & 143—May 1st, 1886), in same family, had suffered from Whooping Cough for a week. Were both cured, although the treatment was not administered so carefully as desired, owing to the parents living a long distance from the Dispensary. They were allowed the treatment at home. In the case of the elder child, however, marked improvement was manifested at once, and she was soon well.

LIX.

A. H., 4 years (155—May 10th, 1886), has had Whooping Cough for five weeks. During the night the attacks are very severe. Rest is disturbed, and the child's health has suffered considerably. During the day the attacks are as frequent as every half-hour, and often accompanied by vomiting. The treatment soon diminished the severity of the symptoms, and after little more than a week he had so far recovered that he ceased to attend.

APPENDIX.

DIPHTHERIA, CROUP, AND HAY FEVER.

No cases of these complaints have come to the Dispensary. The two first are generally from the outset of so serious a character that the patient is unable to go out; the last is apparently less frequent among the working classes than among the well-to-do, or the symptoms are not sufficiently urgent to oblige the patient to give up his work and attend to them.

The treatment of these complaints by Spirone possesses special features of interest, because its effects even in the most obstinate and most serious cases, are so striking, and so immediate, that they can leave no doubt as to the efficiency and the specific action of the treatment.

In cases of chronic disease, such as Consumption, Asthma, and Bronchitis, the action of Spirone is not so apparent. In these complaints, the relief may not always be immediate, the therapeutical action may require a considerable time, the curative results may be more or less complete, according to the organic damage already existing, before the treatment was had recourse to, and when recovery is entire doubts may be raised as to the accuracy of the diagnosis, by those who have not seen and watched the case from the outset. In ailments of a less serious character, or in serious ailments of an acute form, the question, after the use of Spirone, may arise in minds endowed with an over-quantity of scientific and justifiable scepticism, whether the complaint might not have got well of itself.

This will hardly hold good in Croup, Diphtheria and Hay Fever. Here there can generally be no doubt as to the diagnosis, and the action of Spirone is generally so immediate and so self-evident, that hardly anyone could venture to deny it.

I have only had occasion to treat a small number of cases of Diphtheria in my private practice, but in those which I have had the immediate effect has been so undeniable as to leave no doubt as to the *specific action* of the remedy. I use these two words advisedly.

In this point of view, therefore, a wide field of experience with regard to the action of Spirone in these complaints is particularly desirable, but this is the scientific point of view. If we look upon it as a question of humanity and of public health it assumes at once much higher importance. Croup and Diphtheria, which I look upon with most Physicians, as fundamentally the same malady, are among the most fatal diseases which afflict mankind. Not only therefore is it desirable that a cure should be found for them on that account, but likewise, if we consider the virulence and intensity with which they are sometimes propagated, the large proportion of cases which sometimes occurs in a small population, and the peculiar acuteness of grief produced by the unexpected, and so to speak, sudden deaths of children occurring in a family with hardly any warning.

The following few figures will make this apparent. In one group of 3,845 cases there were only 961 recoveries and 2,884 deaths, that is 3 deaths in 4. In another group of 6,876 cases there were only 1,146 cures, that is, 5 deaths in 6. In some countries the number of deaths has gone on increasing from year to year. In Paris in the year 1872, there were 1,135 cases, in 1880, 2,033, nearly double. In Denmark in the year 1861, there were only 550, in 1865, 12,826.

In England although the disease does not show the same signs of increase the number of deaths is still very large. Croup kills more than 4,500 children yearly, Diphtheria, more than 4,000. Every year a certain number of medical men and nurses fall victims to their devotedness, and die of the complaint they have caught from their patients.

It is very evident that in view of such a state of things it is of high importance to mankind at large that if there be any real means of cure it should become known and universally applied as speedily as possible, that no mere formalities should be allowed to stand in the way, and that a matter of this kind is one which appeals specially to the hearts of all parents, and above all of all mothers.

I hold that Spirone is a *specific* cure for Croup and Diphtheria, and I have not the slightest doubt that time will prove the truth of this statement. How can this be done as speedily as possible?

Several lines of action will doubtless suggest themselves to those who take an interest in the matter.

The Government might be appealed to and asked to provide the means of a competent and exhaustive enquiry.

Other Governments might be invited to do the same, and I might be told that the offer of my personal services gratuitously, would facilitate the attainment of the result.

I might apply to some Hospital.

Another thing I might be advised to do would be to make a proposal somewhat to the following effect, "that if any collective body of representative and responsible persons, would accept my conditions of experiment, and provide the requisite organization for getting the patients together, I would treat them gratuitously, provide the remedies at my own expense, and as a preliminary earnest of my confidence would allow myself personally to be inoculated with Diphtheria any reasonable number of times, and back up the truth of my assertions by depositing a sum of from one to five thousand pounds, provided a similar amount was deposited by some-one else. If I failed my money to go to the other party. If I succeeded the money of the other party to go to any Charity I might select, excepting my own Dispensary."

At first sight these proposals have a certain air of plausibility, I should feel very much disposed to entertain them, and I have no doubt that many people would not believe that if sincerely and honestly made, they could fail of meeting with a response.

Unfortunately I am altogether of a contrary opinion. I am certain that any appeal to public opinion whether represented by Governments, Corporations, Institutions, existing Organisations of any kind, or even with the hope that any Organisation for the purpose might be spontaneously formed would be perfectly useless. Any proposal from me of the kind just mentioned would simply entail upon me a great loss of time, and a still greater amount of per-

sonal annoyance. I should constantly be made to feel, or be bluntly told that my attempts were only quackery, and an excuse I had found for blowing my own trumpet.

My reason for being of this opinion is my painful experience thirty years ago with regard to Consumption and the Hypophosphites. When I applied to the Brompton Hospital and offered to treat patients there, under an engagement, during the experiment, not to have any private practice, my proposal was declined, and always spoken of most malevolently in the Medical Journals. After reading my first paper before the Academy of Medicine in Paris, a Committee was appointed to examine my discovery, but never took any steps in the matter. The same thing happened a year after with the Committee appointed by the French Academy of Sciences, although I had privately shown one of the members of this Committee eight cases of phthisis in the third stage (that is the last stage with a cavity) which I had cured the year before. While I was treating a number of cases at the Hospital de la Charité in Dr. C. Bernard's wards, the experiment was put a stop to by superior order, against Dr. C. Bernard's wish and in spite of his protest. I say nothing of all that I have had personally to endure since then, on account of my discovery of the cure for Consumption; let it suffice that after going through such an experience once I can hardly be expected, when thirty years more have gone over my head, to do so again. Besides which it does not suit with my temper to appear a beggar when I claim to be a benefactor.

As a matter of fact, however, a year ago I offered the Government of Russia, where sometimes the children of whole villages are swept away by Diphtheria, to go and treat the patients entirely at my own expense. This offer was not accepted.

I, therefore, see very little possibility of getting for this my second discovery, any privileged hearing or examination from any one but individual sufferers. It will go through more or less the same ordeal as the Hypophosphites, perhaps somewhat shorter, because the cure of a case of Diphtheria or Croup, does not require as many days as Consumption requires months or years, still it will simply be a survival of the fittest.

I am so convinced however of the importance and so certain of the efficacy of my discovery that I am willing to do what follows, as that depends only on myself. From the present date, August, 1886, for the space of one twelvemonth, my services or those of my assistants, shall be gratuitously at the disposal, at their own homes, of patients suffering from Croup or Diphtheria, whether poor or not, on personal application at my dispensary, or I will co-operate on the same terms with any medical practitioner, provided it be not at such a distance as to interfere with my other engagements.

In case of the outbreak of any epidemic of Diphtheria, I offer any Medical Officer of Health, to place at his disposal gratuitously, the necessary apparatus and remedy, and shall be disposed in cases of sufficient importance to give a request for my personal co-operation upon the same terms, a favourable consideration.

DIPHTHERIA.

In the cases of Diphtheria I have hitherto treated, the intense feeling of suffering under which the patient labours has usually been mitigated during the administration of the Inhalant. The pain and the difficulty of swallowing have usually ceased in the course of two or three hours. The fever has disappeared, the patient has gone to sleep, perhaps at once, and afterwards enjoyed a good night's rest. The specific exudation has usually been removed,

sometimes in twenty-four, and almost always in forty-eight hours. There has been, so to speak, no period of convalescence, the patient has been afoot the next day.

Whenever these results have been less complete, and recovery has taken a longer time, that has been because the patient had been previously treated by caustics or by some other of the local applications generally used.

CROUP.

My experience with regard to Croup is rather more restricted still than for Diphtheria, but the cases which I myself have treated, and some others in which Spirone has been used by other persons, leave no doubt in my mind, that in this disease, which is fundamentally the same as Diphtheria, its effect is identically the same.

HAY FEVER.

Hay fever is far from being such a serious complaint as Croup or Diphtheria, but it is often very distressing indeed, enough so to make many persons say, while suffering under its infliction, that with it, 'life is not worth living.' It is inveterately obstinate: to such a degree, particularly in the United States, that a society comprising a large number of sufferers, has now been in existence there since the year 1874, for the purpose of combining their mutual efforts in order to find a remedy. I am not aware that they have as yet succeeded.

So far have I not only never met with a case, which has not been cured by the use of Spirone, under my own direction, but have found that the relief has always been immediate, and that taking account of the various degrees of severity of the different cases, the therapeutical effects, and the different phases of the progress towards recovery, have always been uniformly the same, thus showing the same characteristic and *specific* action, which I have already noted with regard to Diphtheria. I again repeat that I use the word *specific* advisedly.

CASES OF HAY FEVER.

LX.

A young French Lady, aged 19, had been suffering from Hay Fever every year in the months of May and June, ever since she was four years old.

When she came to consult me, the symptoms were extremely violent, sneezing in particular was almost incessant, so much so, that it would sometimes last for two hours together, with hardly any interval between the paroxysms. The consequence was that her features were altogether deformed and were in such a state of turgescence that her nose and lips were at least double their natural size, her eyes were quite blood-shot, she had had several attacks of bleeding at the nose, and her strength and appetite were altogether gone. She had not taken any food or even liquids for nearly two days. She had tried almost every treatment in vain and without any relief. She was immediately relieved by the application of Spirone. The frequency and violence of the symptoms were diminished by more than half. After the

third day she had only sneezed once or twice in the twenty-four hours, had taken her food and rested well. Her looks had altogether altered, and the swelling of the features had very much subsided. By the end of the week all the symptoms had disappeared. The treatment was continued a week longer and then omitted, and she kept well for the remainder of the time, during which the hay fever usually lasted.

The year following she came to see me to say there had been no return of her complaint.

LXI. & LXII.

A French Lady, aged 68, and her Daughter, aged 45, had been suffering for many years in the Summer, from the usual symptoms of hay fever. In the elder patient there were occasional attacks of difficulty of breathing, which might fairly have been called attacks of Asthma. The younger lady chiefly complained of irritation of the eyes, and very distressing dryness of the fauces, and difficulty of swallowing. In both cases the relief was very considerable, even on the first day, and in less than a fortnight the symptoms had entirely disappeared except the difficulty of breathing in the elder patient. She was kept under the treatment about six weeks and was then quite well. I saw her the following year. She had had no return of her complaint.

The younger patient left off the treatment at the end of about sixteen days. The following year, at the usual time, she had some return of the symptoms, but so slight that she would not have attended to them if she had not feared they might get worse. She used the treatment for about a fortnight, the first three or four days of which were sufficient to dispel all symptoms of the complaint. She kept quite well the following year.

LXIII.

M. 58.—Had suffered more or less ever since childhood from Hay Fever. The attacks generally lasted more than a month during June and July, and had occurred every year without intermission, except on the occasion of a visit to Australia, when they appeared to be replaced by Asthma. He has been in the habit of going to the sea-side and sitting out upon the pier during the period of liability to the attacks and so keeping them under, but at any time if he took but a short drive inland they immediately returned as violently as ever.

The treatment was commenced in Paris just before the time when under ordinary circumstances, the attacks usually began and was discontinued after a few days, in consequence of his having to return to England.

The attacks appeared in a slight degree before resuming the treatment in London. After the first application there was no sneezing, but there had been slight Asthma and considerable itching of the eyes.

The second application of the treatment afforded very great relief, all the symptoms being much diminished, and after the third day there was complete absence of irritation.

On the fourth day he went to see a military tournament, and was exposed to conditions that would ordinarily produce an attack, but he remained quite

free. The only result was that he had an attack of simple Catarrh, which passed off in three or four days. After the tenth day's treatment he went into the country for a few days. During his visit he had no sneezing, running from the nose, nor Asthma, but he suffered from considerable irritation of the eyelids. The treatment was now especially directed to the relief of this symptom which had always given considerable trouble. At the end of three days he was quite free from irritation, and went again into the country. He again experienced slight irritation but this was unaccompanied by any other indication, and he was not troubled any further for the rest of the season.

In a communication this summer, at the time he is usually at his worst; he says that he suffers little or no inconvenience, nothing in fact but what is immediately removed by a douche of the Spirone.

LXIV.

M. W., a young lady.—Was under treatment for Asthma from which she had suffered from childhood, and for many years she had been troubled with Hay Fever, so that she was obliged to spend a large portion of her time from home. At the time she commenced the treatment for Asthma, the period of the year had not arrived when the attacks of Hay Fever commenced, and during the time she remained under my care in town she had no symptoms of it, she, however, quite expected the attacks to appear on leaving London for home towards the end of May. After a month's sojourn in the country she reported that she was keeping free from Asthma, and had not experienced any symptoms of the dreaded Hay Fever.

LXV.

M. H.—Had suffered from Hay Fever for four years. The attacks came on in the beginning of June and generally continued until nearly the end of September. He had tried several reputed remedies without benefit.

The attacks were very severe with great suffusion of the conjunctival mucous membrane and much irritation, beginning with violent sneezing and running from the nose. He was quite incapacitated during the period the attacks lasted, and they entirely prevented him from following his profession of a vocalist, the voice being quite altered in character and much weakened.

After the first application of the treatment he had a good deal of sneezing and running from the nose and eyes in the afternoon of the same day, but the attacks did not appear as usual the following morning, and he only had a little irritation of the eyelids. The treatment was steadily followed, and during the three weeks he remained under observation and treatment he had no return of his attacks, although he was daily exposed to the conditions usually certain to produce them, especially living close to a field of new mown hay.

It was particularly noticed that his voice steadily and remarkably improved so that at the end of the time mentioned above he was again able to sing in public, and acquit himself so as to call forth considerable approbation. He has continued the treatment and remained perfectly free from the attacks.

LXVI.

E. M.—He has had Hay Fever the last five seasons, and has usually gone to sea as a remedy. Under these favourable circumstances he was generally a week in getting free from the attacks. If he goes into crowded places or any-

where where there is dust floating about he suffers severely. He came under treatment towards the latter part of June, the attacks being later than usual, but he was very bad at this time.

After the first application of the treatment in the morning, he remained free until the after part of the day when he went out, this brought on sneezing, pricking of the eyes, and dryness of the throat. The second day the sneezing had not appeared as usual in the morning, and he had less pricking in the eyelids. He also reported that he could sleep better.

From this time he gradually improved, only sneezing two or three times, and after about ten days' treatment he was able to go into the country, continuing the treatment the while, and had no return of the attacks. He reported at the end of July that he had remained free and felt himself safe for the season.

LXVII.

M. P., 12 years of age. Had been sent to England with her mother, for the benefit of their health. They both suffered from Hay Fever, which in the case of the mother, had not returned since coming to England but had done so with the daughter. She came under treatment on July 6th this present year, she was also suffering from a cough which had troubled her at times during the last two years, and there was evidence of bronchitis at the basis of both lungs, with slight congestion of the upper part of the left lung. Treatment was commenced on July 6th and she steadily improved, losing the prominent features of her attacks almost from the beginning, the irritation of the eyes giving most trouble.

At the end of ten days she was so much better that the treatment was continued at home. After the lapse of a few days she was reported as having quite lost her cough, keeping very well. Total duration of treatment a fortnight.

Before concluding, I wish to add a few more words with the regard to the treatment of Croup and Diphtheria.

These diseases are generally so dangerous and so frequently fatal, and the action of Spirone on the other hand (provided it be properly applied), is so immediate, and so effective, that it should commend itself specially :

To my Professional Brethren all the World over,

To the Clergy,

To all Philanthropists,

And above all to the eight thousand English mothers who mourn for the little ones they lost last year, and to the eight thousand more who will probably have to mourn for a child who will have died of the same cause before another year has gone by.



