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A P O L O G Y .

AN apology is due for the omission of the APPENDIX promised in this work, and frequently referred to in its pages. Over thirty pages of matter, embracing more than one hundred valuable formulas, had been prepared, but as the manuscript increased the body of the book beyond the size intended, it was found quite impracticable to annex so much additional matter to this volume. The reader cannot regret this omission more than does the author. Still, the change cannot detract from the value of the *main body* of the work. This volume, as it appears, is complete in itself.

E R R A T U M .

The head line, "Pathogenetic Inhalents," from page 101 to page 164, should read "Pathogenetic *Remedies*."

CHRONIC DISEASES

AND

THEIR REMEDIES:

OR,

PATHOGENETIC PRACTICE OF MEDICINE.

EMBRACING

CHEMICO-PATHOLOGY AND THE SYMPTOMS AND TREATMENT OF
CHRONIC DISEASES BY PATHOGENETIC REMEDIES.

DESIGNED FOR THE USE OF PATIENTS.

BY E. W. TUCKER, M. D.

SECOND EDITION, REVISED AND ENLARGED.

DUPLICATE

COLUMBUS:

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PREFACE TO THE FIRST EDITION.

IN presenting my patients and the public with this first edition of the Pathogenetic Practice of Medicine, a few statements introductory may properly be made.

For the last ten years the author has been actively engaged in the local practice of medicine, as has been elsewhere stated. During that time he has directed his reading and practice to the elucidation of a new theory and treatment of Chronic Diseases. The great success of the new practice induced him to devote his time exclusively to the treatment of the particular diseases described in the body of this little work.

Patients reasonably desire to know what effects are *expected* from the use of the medicines I prescribe, also how they may be advantageously changed or varied to meet the changing symptoms of each case. This I had not time to do, nor would it have been accurately remembered if I had. Information, too, of this kind is quite essential to the successful treatment of patients whom we cannot see oftener than once in four or six weeks, and those we treat by correspondence not at all.

Again, many who only read a single copy of the *Advocate* do not get a sufficient knowledge of my theory of practice to overcome their prejudice against any *new method*, or against the itinerant manner of introducing it.

Therefore, it seemed quite necessary that patients and invalids should have an abridgment, at least, of the general features of my system. This I have given in a very condensed form in the following pages, and in such plain and familiar language, that no one of ordinary intelligence can fail to fully understand its application. I have avoided medical terms and language, using that only with which every one is acquainted. The style is not satisfactory to myself, but I choose to sacrifice taste to usefulness.

In the first part we have traced the *relation* between diseases of the Liver, Stomach and Lungs, to show *one* important fact, viz, that Consumption is, in the majority of cases, only a *constitutional* termination of disease in the liver and stomach, by which the nutritive function is impaired, and life destroyed. This fact is equally important for the physician and patient to observe; and if rightly understood by the former, and well attended to by the latter, eight cases out of ten of Pulmonary disease would be *prevented*.

In the second part of this work I have endeavored to set forth the *effects* which my numbers have upon the human system—not the laws governing their action, but the result of that action—the indications they are intended to fill as medical agents—also, their preparation—the doses

—time of taking, and such incidental circumstances as are necessary for the patient to understand.

The third part embraces a condensed summary of the *symptoms* of individual diseases, not in detail, but those which are positive indications of disease of a particular organ, in order that the *reader* even may decide with a sufficient degree of accuracy to select such a number as is indicated in his case. Some of the symptoms of obscure disease it requires great skill and experience to detect. My object has been more to define the meaning of certain symptoms and signs of disease of a particular organ than to trace mere *sympathetic pains*, or bad feelings, many of which occur remote from the part affected, and are not material to know in the treatment of the case. I have noticed only those remarkable symptoms which will be readily recognized and understood. In addition to that, I have designated the numbers to be used, and the changes that may become necessary in the treatment.

That the work is free from literary errors I have not the vanity to claim; and should another edition be needed, I will promise the addition of much valuable matter; for in this I did not intend “to write a book,” but to afford many useful suggestions, and furnish my patients with information for which I have frequently been asked. How far my efforts may be acceptable to the public, and how far this little volume may control the health and lives of the sick or well, cannot now be determined; but if it subserves the

interest of humanity, and saves any of my fellow-creatures from suffering or an untimely grave, the author will feel fully rewarded.

NEW YORK, December, 1858.

PREFACE TO THE SECOND EDITION.

IN presenting the second edition of the Pathogenetic Practice of Medicine, I desire to express the gratification which the ready sale of, and general interest manifested in, the first edition afforded me.

The former edition has been thoroughly revised, and over two hundred pages of new matter added, and the plan of the work much extended. Many suggestions highly important for patients to observe, are embodied under the head of "Address to Patients," making it thus personal, hoping thereby to secure for that part of the work a more attentive reading.

There are also added about thirty pages on diseases of females, which cannot fail to greatly improve the value of this work to that class of readers.

I have likewise increased the number of my remedies and changed, in some respects, their mode of preparation to a degree of uniformity, for the purpose of simplicity and convenience. Liquor directed for preparing any number is of a uniform strength and purity. Diluted alcohol is invariably ordered—that is, water and alcohol *equal* parts.

Liquor of this strength is suitable for all domestic or medicinal purposes.

In many cases liquors are not well borne, or the remedy is more eligible in the form of syrup. For this class a formula for simple syrup is given, and the medicine ordered to be dissolved in them while warm. Every effort has been made to prepare these remedies so as not to offend the taste. This is, however, impossible in many cases. Medicines that have no taste or sensible effects, of course are destitute of any virtue; but when the taste could be properly consulted, that has been done.

In addition to the new matter in the body of the work, an Appendix of many useful formulas has been added for general use, and for the occurrence of certain symptoms or diseases of an acute nature, for which the medicines I may give at my regular visits are not designed. I have selected such formulas as were reliable in particular affections only. The medicines I prescribe are more efficacious than any mentioned in the Appendix, but they could not be obtained at the drug stores; therefore I have given only such prescriptions as can be usually filled at any respectable drug store.

Another new feature of this work is a copious Index to *Diseases* and their appropriate remedies. This will greatly facilitate reference for any one who desires to take medicine understandingly. It was my intention to add a chapter on the mode of preparing or cooking food for the sick, and give a variety of suitable diet for them, but found

that it would make a much larger volume than would be desirable for my purpose.

The manuscript for this edition has been written under the most perplexing and unfavorable circumstances. The author has not been able to command three hours of quiet at any one time, but has written at intervals between examining and prescribing for different patients, and while on a regular tour of practice.

Another embarrassing attendant which the author sincerely regretted was, that he could not have his library for reference. Therefore this work has been entirely prepared for the press without the privilege of consulting a single medical writer. This fact, though it gives a greater prominence to my individual views and knowledge, may detract from the value of the work in so far as it might have been enhanced by preparing it in the quiet of my office, and within the reach of suitable references.

From the favorable reception of the first edition, and the very generous patronage which I have received for the *two* years and a half that I have traveled, I am encouraged to believe that my efforts to cure my patients, and bring to their aid every reliable means of relief within the limits of Science, will be duly appreciated, and that that patronage will be continued.

COLUMBUS, O., July 6th, 1860.

ADDRESS TO PATIENTS.

I HAVE been an invalid, and at that period in life when sickness fell upon my ambitious hopes and reasonable prospects of success and happiness like an untimely frost upon the vineyard which had escaped in the bud and in the bloom, to be destroyed at the very time when hope was changing into realization. Aside from the natural love of life, all have cherished objects to live for. The young cherish life through the exuberance of the pleasing hope, that the future will be liberal and propitious. Others further on in the entranced journey, contract mutual dependences and new relations, thereby intensifying the desire to live. New attachments spring up—more sacred obligations are imposed—until every relation to the world—socially, morally, and otherwise—binds them to their “day and generation” with a tenacity that none may fully know till these ties *begin* to loosen. And it is only the gradual pressure of recorded sorrow and pains of continued suffering that can force the heart to relinquish those attachments.

From personal experience I can appreciate the feelings of invalids as they may open this book for the first time. A feverish hope of finding something herein to heal their

maladies, mingled with the fear of having confidence inspired only to be disappointed upon trial. So often have hopes been excited by presenting a new remedy for disease, or a new mode of treatment, which only resulted in disappointment, that the plain statement of a few facts is necessarily required.

The conscious assurance that my system is founded upon Science, and elaborated by honest, intelligent, and extensive observation; in a word, that I do “know whereof I speak,” and have fully demonstrated all I affirm, authorizes me to say that your reasonable expectations will be fully realized in the treatment here proposed. Not that all the diseases herein described can be radically cured, even when early treated, much less after, through inattention or improper medication, they have passed a certain point wherein no remedies are curative, but palliatives only. No absolute specifics, or miraculous powers, are claimed: for there are three conditions essential to every case: 1st, that the disease be curable; 2d, the use of remedies *capable* of curing; 3d, faithfulness and perseverance by the patient in their use. The *doctor* never cures the patient—that is done by *medicine*, and medicine does this only when the patient observes the rules of administration.

The patient has an agency in the process of combatting chronic disease, as well as the physician or his remedies. Good judgment and some knowledge of the laws of Hygiene, are necessary to preserve the system in health; nor can the sick entertain a reasonable hope of being benefited by any remedy without a scrupulous regard thereof. The

laws of life require as vigorous observance to *regain* health as to *preserve* it. And I shall now give a few practical facts which you should study, understand, and carefully observe.

WHAT SHALL WE EAT? is an important, and sometimes an anxious inquiry. Many conflicting answers have been given, both by writers and others, to this question. I do not propose to answer in detail; for many wise and unwise systems of regimen have been advocated by the flesh and anti-flesh—the grease and anti-grease—the stimulant and anti-stimulant doctors, and teachers of the science of preserving health, or regaining it. These conflicting theories, however, have fully demonstrated *one* fact, that *all* kinds of diet are not healthy or proper for *all* persons. That the healthfulness, or unhealthfulness of a particular diet is regulated and materially modified by age, peculiarities of constitution, and the nature and stage of the disease. Theoretical enthusiasts strenuously advocate, and would impose upon *all*, a bill of fare which, forsooth, chances to please *their* palates or views of nutrition. Such teachers might as consistently claim that all other persons could wear their boots or their coat. That would be no less unreasonable.

CHANGE OF FOOD.

Not only is a different diet necessary for different persons, but for those having disease it is equally so. In all cases a *change* of diet is also required. No persons, be they sick or well, should be restricted to a *uniform* regimen. With Americans, that everlasting meal of fried *pork*

and *boiled* potatoes is the prime cause of so much dyspepsy, scrofula and consumption. A *change* of food is just as important as the quality of the diet itself. Too little attention is given to these two points in large families having but *one* invalid, and that one, perhaps, not sufficiently informed to judge correctly. No specific rules can be given for a person, except in connection with the disease he may have. The subjoined are such as are essential to be observed during the continuance of any disease, and they are the

GOLDEN RULES FOR THE TABLE.

1st. REJECT all articles that you know disagree with the stomach or bowels, despite the clamorings of the appetite. I recollect a patient once who had chronic inflammation of the stomach—a strict, unirritating diet was insisted upon. One day I was called in great haste—the patient was thought to be in the agonies of death. On arrival I at once inquired what the lady had been eating, for she had been rapidly improving under my treatment. She replied that she had eaten some *very nice* pickles, a very little of a beautiful radish, and that their new girl made such excellent tea, that she was tempted to drink two cups of it! “Why did you do all this?” inquired I. “O,” said she, “*because I loved them!*” Not being in good humor myself, I added that Satan “loved” sin, and that was the reason why he was tormented. This case will sufficiently illustrate and enforce the rule, “reject all that you know to disagree with *your* stomach,” and *other* stomachs must

take care of themselves; for no adage is more applicable than "what is one man's meat is another's poison."

Rule 2d. Do not eat ALL that is before you, even if it does agree with you. Gorging and stuffing the stomach for the idiotic reason that it *tastes good*, is to be religiously guarded against. People eat to sustain life, not merely because the food tastes good. The unruly ox, that forces his way into the cornfield, eats upon that principle, and quits only when there is no *room* for more. But intelligence was superadded to instinct to guide us in using the *luxuries* of civilization. The appetite in the natural state is a safe guide, but in disease and the artificial state, the appetite must be made subservient to reason.

Rule 3d. TAKE YOUR TIME.—Haste in eating is like a hasty prayer—a good deed done with a bad grace, and worse effects. Mastication is as necessary before swallowing as *dressing* is to decency. One might as well expect to be cordially received in the parlor undressed, uncombed, unshaven and unclean, as to force unprepared guests into the presence of the stomach. Could the poor stomach speak, when flesh, fish and fowl are forced therein unmasticated, it would doubtless say: "Friends, how camest ye in hither?"

By mastication the food is reduced to a pulpy state, and so mixed with the saliva that it is in a proper condition to be acted upon by the gastric juice. The saliva is freely secreted while the food remains in the mouth, and the union of the two fluids (gastric juice and saliva) react upon the food, producing perfect digestion. The stomach should not be *filled suddenly* with either food or

drink. These sudden duties imposed upon that organ are not well borne. An hour, or at least half an hour spent at the table, is time *well* spent. The time, of course, should be in proportion to the amount of food eaten.

Rule 4th. CHEERFULNESS is a physiological duty, as much as thankfulness is a Christian duty. So great are the influences of the mind over the body, that some physiologists consider it the real seat of disease; that is, the nervous system, of which the brain is the centre, not only superintends, but directs the functions of organic life. And it is true, that the mind is the real seat of many of those diseases for which the poor stomach, liver, bowels, and, peradventure, other organs are accused, and badly treated for their delinquencies.

In suggesting certain plain rules for the table, I did not intend to back them by physiological or pathological arguments. But I deem mental emotions of such unquestionable importance, that a digression is demanded. How far the conditions of the mind are capable of *controlling* the great and mysterious functions of life, is yet to be understood; that they do control and modify their action, is a well-known fact, and to a far greater degree than is generally admitted.

Mental hygiene, and mental therapeutics in the management of chronic affections, are indispensable prerequisites of skill. And at no time or place do these rules have a more beneficial influence than when at meals. A cheerful, mirthful, buoyant, hopeful state of mind is a decided *tonic*—it invigorates the circulation of the blood, exhilarates the whole nervous system, and energizes all the functions of

the body. The effect of mental impressions upon the blood may be known by the increased action of the heart, from sudden joy or sorrow; so great is it that in extreme cases death has been the result, by overpowering the heart with an increased flow of blood into it.

Mirth and hilarity directly increase all the secretions, the bile especially, and perspiration. These are all facts, and are the congenial partners of medicine. A deep, whole-souled *laugh* gives the stomach and abdominal viscera a necessary and healthful exercise—just that kind and degree of agitation that they require.

The Hygienic effects of the exhilarating agitation of the system in a “fit of laughter,” is connected with a sanitary result of still greater importance. The decarbonization of the blood—the supply of oxygen and elimination of carbon, so indispensable to health as well as life, all takes place in the minute air-cells of the lungs—those nearest to the *surface*—hence a free and full expansion of the lungs is all important for the perfect performance of this wonderful change in the blood. The air must be forced through the entire cellular structure, which can only be done by long, full breathing.

The injurious effects of sedentary habits—of a cramped, confined position of the chest, are all explained upon the above principle—shutting out from the lungs the vital agent, oxygen, that is alone to be had from the air.

Invalids will ask, “How can we be merry, and laugh in our sufferings and pains?” I know the advice appears paradoxical, but it may be done, as one would take a bitter medicine, for the good that may result from its use.

Rule 5th. Never take a meal, at least a full meal, while the mind is under the influence of the *depressing* passions, such as melancholy, fear, envy, grief, jealousy, or while the malevolent passions are excited. The natural effect of all these is, to *depress* the vital energies and suspend the secretions. Three hours of genuine melancholy will so constipate the bowels, by stopping the secretion of bile, that a dose of physic will be needed the next day. Food taken while the mind is deeply under the influence of the *depressing* passions will oppress the stomach, and healthy digestion cannot take place, as any one can ascertain by observing this point. Despondency and melancholy are wholly indigestible, use them as you may—boiled, stewed, or fried. They stand at the gateway of health and happiness, like two hideous dragons feasting upon the misery which their presence creates!

The faithful observance of the foregoing rules will enable any one to take their food understandingly—to eat as philosophers, and enjoy like men.

DIET FOR DYSPEPTICS.

Many writers have undertaken to tell dyspeptics what kind of food they should use, as though a general “bill of fare” could be given for all cases. But the dyspeptic, himself, is altogether the most competent to decide all questions of diet. He has learned from experience what he can and what he cannot use. No two cases are alike. Articles of diet congenial to one patient, will with another, having precisely the same general symptoms, wholly disagree. I have repeatedly found patients who could use

milk freely, without any unpleasant effect, while with others it would produce sourness of the stomach, belching, and pain. So with meat—one can use the *lean* only, and another the *fat* portion only. And this diversity runs through all the articles of common food—no two cases are precisely alike. *The patient, then, is the best judge of his own diet.*

The great error in regimen is eating *too much*. It is the quantity more than the quality that produces unpleasant symptoms, except in extreme cases. The rules above given, to reject every thing that is known to disagree with the stomach, and to guard against too liberal a quantity of even such as do agree, comprise all that can be said as a practical guide. In this matter, however, there are some errors which I will briefly refer to.

The opinion is quite general, that meats of all kinds should be dispensed with, and that they are more liable to disagree with dyspeptics than vegetables. This depends upon how the meat is cooked, also what the vegetables are. Fresh meat of any kind, *broiled upon fire-coals*, is less liable to sour the stomach than any other food. A dyspeptic should not use meat prepared in any other way. Meats boiled, stewed or fried, are not well borne when the stomach is weak, and not at all if there be any inflammation present. Fried meat is the most indigestible of any, and is not fit for either the sick or well to eat. Dried meats are easier of digestion than salt, but *smoked* meat is much less so than either.

In regard to vegetables, I will only mention those that are most likely to increase the dyspeptic symptoms, by

irritating the stomach — cabbage in any form, beets, turnips, pickles, and *uncooked* vegetables of every sort, such as lettuce, radishes, cucumbers, etc. Apple-butter and spiced preserves are particularly injurious. So also is highly-seasoned pastry of every kind. Baked or roasted potatoes are easily digested, and more acceptable to the stomach than when cooked in any other way. Indeed this is the only way that that vegetable should ever be prepared for the table. Boiling them, especially without removing the skins, is not only unwholesome, but a slovenly manner of preparation. The potato should always be cooked by *dry* heat. That expels the rank odor and excess of moisture.

Dyspeptics must strictly observe a plain, unirritating diet; for the stomach is not only weak, but often in a state of chronic irritation, in many cases amounting to inflammation, which is readily known by *external* tenderness and general soreness in the gastric region. And patients should carefully cultivate such habits of body and *mind*, observing all dietetic rules, so as to *favor* the action of remedies. One half of the agency in curing all chronic diseases of the stomach devolves upon the patient. The physician has his responsibility, it is true, but patients likewise have theirs.

STIMULANTS.

Artificial stimulants, such as tea, coffee, tobacco, snuff, and liquors, especially the three last, are the bane of dyspeptics. Tea is better borne, when of a reasonable

strength, than coffee, but if used at all, it must be *very* weak, and the weaker it is, the better it is for this class of patients. All such as are wakeful, unable to get to sleep after retiring, tea must be at once abandoned. There is no exception to this injunction.

Coffee will generally disagree with these patients. It produces a distended, full, distressed feeling in the stomach, and a peculiar fullness in the forehead; invariably inducing melancholy and great depression of spirits. A sort of nervous, fearful anxiety and despondency are its legitimate effects upon the mind and nerves. If you must use it, do so only in homeopathic doses—like tea, the weaker the better it is.

A very healthy warm drink for meals may be made of any of the common grains—corn, wheat, barley, etc.—which, if properly prepared, is far superior to either tea or coffee for any class of invalids. They are all nutritious and unirritating.

In regard to tobacco in any form whatever, it is wholly inadmissible in dyspepsy or any nervous affection. It is poison to the sick and an abomination to the well. I know of no *good* effect that it can possibly have upon the human system. Some can *bear* it, and that argues strength of constitution rather than the utility of “the weed.” It is manifestly highly injurious to the larger portion who use it, and beneficial to none. If used at all, it should be as a pleasant deception in poverty, and as a foggy forgetfulness in unreciprocation of the “tender passion.” I fully believe that no new “commandment” is more imperiously demanded than this: “Thou shalt not destroy thyself with artificial

stimulants!" Indeed, I will not prescribe for an opium-eater if I know it, for it will do no good in any case. This is a melancholy fate, but there is no hope unless the opium be rejected forever.

LIQUORS AS A MEDICINE.

The use of spirituous liquors as a *beverage* is a dangerous experiment for any one. Their seemingly present good effects are delusive, and only *create* symptoms for a repetition of the dose, the use of which sadly deranges the whole system, inducing disease, as every one knows by the many sad examples which are daily seen. So dangerous is the use of liquors that the physician assumes a great responsibility in prescribing for those addicted to drinking them.

It is an established fact that liquors can not be discarded in the preparations of medicines. And in certain forms of disease, they are really medicines also, perhaps not curatives, but may palliate the symptoms, and prolong the patient's life. In cases of mere debility of the digestive organs, uncomplicated with inflammation (a very rare condition), the moderate use of liquor may be beneficial. Also, in the debility and languid circulation of old people, I think it is useful.

Much has been said of the use of liquors in lung diseases. Without advancing a theory of their action, I will merely say, that some seem to be benefited by them while others are evidently injured. The effect produced in each case is the guide in the matter. When inflammatory symptoms do not predominate, the use of liquors, espe-

ially whiskey, will invigorate the digestive organs to a more healthy action, by which the system is more liberally nourished, and in this way life may be prolonged.

Of the distilled liquors, rye is preferable to any other, although the danger from adulterations about counterbalances the good to be expected. The wines would be better could they be procured pure in this country, which is now an absurdity to suppose. Of the domestic wines, the currant, gooseberry, or any of the berry juices, when properly made, may be freely used. The currant is perhaps the most nutritious, and anti-septic.

Of all the fermented liquors, old stock-ale is the best. This may be freely used in all cases of debility, whenever the stomach will tolerate it. In dyspepsy, consumption, etc., it has been decidedly medicinal in its effects. But the patient must be the judge of its immediate effects, and decide whether he feels *better* or *worse* from its use. This fact cannot be decided from the use of a few glasses only. One or two weeks are required to produce its invigorating effects upon the system.

In using liquors of any kind, the dose should be small at first, and gradually increased as the system responds favorably to it.

DIET IN SCROFULA.

In Scrofula, and diseases depending upon impurities of the blood and humors of the system, such as disease of the glands and *skin*, the diet must be regulated according to the well-known effects of particular articles of food. That food which is the most nutritious, and being an admixture

of animal and vegetable, is the best in this disease. Scrofula is often the effect of insufficient food, and the constant use of one kind. A change and admixture of food are essential to healthiness. Potatoes, by some authors, are thought capable of producing this disease. Sour bread, stale vegetables, improperly cooked meats, are all especially injurious.

I have stated that *damp*, cold air, exhalations from uncleanly dwellings, deficient exercise, a scanty and unhealthy diet, constitute the exciting causes of Scrofula; therefore a dry, cool air, a sufficiency of wholesome, mixed food, with free exercise in the open air, will constitute the proper regimen for such patients.

It is but nonsense to talk of a uniform diet, either in sickness or in health, or to specify a definite amount to be used daily. Every case and every constitution has its own requirements; and the appetite is generally the best guide to the necessities of the system. In nothing is this idea better supported than the universal desire for a frequent change in the food, and for different modes of cooking it. Fat pork should be particularly avoided, but all other kinds of meats may be used.

DIET IN CONSUMPTION.

The diet in Consumption does not differ materially from the directions given above, but as dyspeptic symptoms are more frequently attendant upon consumption than scrofula, a modification will become necessary. In the earlier stages, while there is much fever, vegetables may constitute the principal dietary, but when emaciation begins, the

powers of the system must be liberally sustained by concentrated nutrition, aided by diffusible stimulants. The stomach not being able to digest a great amount, the food should be given in the purest and most nutritious form. Beef, boiled, and meats of any kind that the appetite craves, with an excess of the fatty portion, may be freely used.

The admixture of vegetable and animal food, and that so changed and varied that the appetite may be stimulated by *variety*, is the main object. Eat what the appetite *craves*, for the *wants* of the system are not under the control of reason. Nature, in this respect, makes known her wants by the appetite, and the particular *relish* of any food depends upon its gratification.

It is true, however, that this rule of gratifying the appetite is not applicable to *acute* diseases, such as fevers and inflammatory affections. In these cases, although the appetite truthfully expresses the physiological wants of the system, the danger of over-stimulation must be guarded against by the reason and the judgment.

The stomach may be gently stimulated to a more vigorous digestion by the use of ale, or old rye whiskey; the more heating liquors, such as brandy, rum, etc., are not as suitable. But of all the liquors mentioned, old stock-ale or porter is decidedly the best. As to the amount to be drunk during the day, no rule can be given, any more than I could state the precise amount of food. Whiskey is the best for morning use, and may be used as sling, or with the white of an egg beat to a foam. At ten or eleven o'clock a glass of ale may be taken, and repeated at four or five in the

afternoon, or more frequently if the system feels exhausted. The quantity to be taken at any one time is a matter for the patient to decide. Enough to produce a very slight warmth in the stomach, and an exhilaration of the mind, is all that can be beneficial. Ale may be used in small quantities and frequently repeated, if the stomach does not bear it well at first.

But no stimulants ought to be used if they produce fever or headache; and their use must in a great measure be decided by their effects upon the feelings of the patient, nor that too hastily determined. From one to three weeks at least will be required to ascertain their utility.

REPETITION OF MEALS.

The interval between meals is a matter of importance. Whether much or little food is eaten, the time required to digest it is the same. An ounce of meat is digested no more rapidly than twice that quantity, provided the stomach be healthy. It requires about three hours and a half to digest an ordinary meal. Some articles are digested in a shorter and others require a longer time, but $3\frac{1}{2}$ hours may be stated as the average. After the chyme has passed into the duodenum, it requires about one hour and a half for the chyle to be absorbed and carried into the blood. The time, therefore, between the meal and its ultimate appropriation to the nourishment of the system is about *five* hours. During this entire process no food should be used, as it will interrupt the process of digestion, and derange the appetite.

THE TIME OF TAKING FOOD.

I have said above that five hours should intervene between meals. But at what hours this should occur, and which should be the *heartly* meal, if any difference is to be observed, remains to be answered.

The stomach is very susceptible of *habit*; and in America, in the country and smaller towns, among the business as well as the laboring classes, the custom prevails to take breakfast at six A.M., dine at twelve M., and supper at six P.M. In the cities meal-hours vary according to occupation, position in society, etc. It matters not at what hours meals are taken, provided the above intervals be observed, for by habit the stomach will accommodate itself to the time preferred in all cases, except *late* suppers. Whatever hour may be selected, the stomach will faithfully admonish you of its approach, and regularity is one of the imperious laws of health.

There is a prevailing belief or theory about light meals, hearty meals, and all that, which I deem full of error—unphilosophical and productive of disease. This error has crept into the writings of those who know better, and who have adopted it by common consent, without inquiry for the reasons of the doctrine. It is said, the breakfast should be moderate, the supper light, and dinner the hearty or *full* meal of the day. Almost every family, and all the hotels cook and eat upon this theory. Two light meals, with one full meal, are perhaps proper; but when should the full or principal meal be taken?

I have space to present but two arguments, one from the known laws of physiology, the other from *instinct*,

(which is a better exponent of Nature's design than human reason), that the principal meal should be had at night, about three hours and a half before retiring to sleep. I am fully aware that those who do not take the trouble to think for themselves, even those who are found in the medical profession, will pronounce this view downright heresy. But true philosophy and denunciation bear about the same relation as do the cannon ball and the *smoke*, which attends the explosion. The *ball* does the execution, the *smoke*, alas, vanishes in the air.

It is a well-known fact in physiology that the brain and nervous system supply the great *motor* power of voluntary and organic life, and when the *mind* or body is in active labor, the stomach cannot perform its labor fully at the same time. This has been amply tested, both in animals and in the human species. If the mind be put to active exercise, or subjected to deep emotions, after a full meal, digestion is retarded, the food sours, and the digestive apparatus is much deranged. Indeed, the mind voluntarily *refuses* to act when the stomach is full, as all know by experience. A degree of drowsiness, and inclination to lie down or sleep after a full meal, proves that the mind yields to the stomach temporarily its own quantity of nervous stimulus.

Again, if the *body* be violently exercised after a full meal, the stomach likewise refuses to act. I know of no one fact connected with digestion more positively injurious than hard, violent labor *immediately* after a hearty meal. A French physiologist demonstrates this fact. He fed two dogs the same amount of food: one was immediately

put upon the chase; the other was left in his kennel, and slept. At the expiration of three hours both dogs were killed, and their stomachs examined. The food of the one put upon the chase was found in the same *state* as when eaten, presenting no appearance of the action of the gastric juice upon it. The food in the stomach of the other was found *fully and perfectly digested*. This fact abundantly proves the position that active exercise of the body prevents digestion.

The above facts show that the *middle* of the day is not the proper time for the full meal, because at that particular time the mind as well as the body are in most active labor. Physiology as well as experience are opposed to liberal *dinners*. But enough has been said to start an inquiry, and enable the reader to pursue the argument in his own way.

At night the mind is tranquil; the muscular system is thrown upon the recuperative resources of organic life. The labors of the day are done, and with them the burden of care is thrown aside, or should be, and at this favored time the stomach can monopolize all the needed nervous energy to provide nourishment for the body. The full meal, then, may be taken at this physiological season; and it should be taken at least three hours before sleeping. During this interval digestion is promptly performed, and the process of absorption only remains. But to retire immediately after a full meal would be decidedly injurious.

The instincts of all animals corroborate every position assumed above. They eat and *rest*; men eat and go directly to *labor*. Rest after meals is the instinctive habit of all

animals; this fact is sufficient to invite reason and science to explanation.

An experienced groom well knows that his horse thrives better, and endures more labor, if fed liberally at *night*, and lightly in the morning, and still lighter at noon. Although this theory of eating reverses all previous notions, and will be pronounced dubious by the automatic members of the profession, yet physiology, experience, and the instincts of all animals corroborate its truthfulness. Of course, in these brief remarks, I could only present the outline of this theory, and the arguments to support it. Enough has been said to excite further inquiry, and suggest the proper channel of investigation for those who are sufficiently interested in these views.

SLEEP.

No definite rule can be given, or number of hours specified as a necessary time to rest, or refresh the wearied powers of body and mind. In this, as in every other particular, every system has its own standard of requirements. The same amount of food or labor might as reasonably be prescribed for *every* one, as to limit sleep to a certain number of hours. Some by nature require more than others, and no rule should be imposed upon the sick. They require more sleep than those in health; because the mind and nervous system are not as quickly recuperative as the muscular system, and the former, with the invalid, are constantly excited, and weakened not only by disease, but a constant, uneasy anxiety about their situation. Sleep is the most refreshing in the earlier part of the night, and

it is better to rise *early*, even if an hour or two of sleep be resorted to during the middle of the day. The system may be exhausted and weakened by *too* much as well as by too little sleep. Invalids should notice this remark particularly, and divide the time for sleep accordingly. Many, perhaps, are not aware that sleep can *weaken* and prostrate the vital forces; but this is true, as seen by persons very weak from any disease. In many cases of fever, two hours of uninterrupted sleep might result in death. Disease is often protracted and medicines defeated from this cause, the patient, the while, being unconscious of the fact.

Regularity in all things pertaining to diet and sleep are of the utmost importance. The human system contracts *habits*; these by continuance become laws with which it is not wise to trifle, nor can any one with impunity, be they sick or well.

EXERCISE.

The amount and time of taking exercise will depend upon the patient's power of endurance, and is a discretionary matter. As much exercise as can be borne without positive fatigue is healthful and necessary. All violent exertion, however, cannot be too cautiously guarded against. There is no such thing as "working off disease." That will do for fools and misers to talk about, but they would soon be convinced of their folly and presumption by the experiment.

There are many enthusiasts who chatter like the magpie about exercise, exercise, and heap denunciation upon all

honest and intelligent efforts of the physician who labors to shorten the road to health, or to mitigate the sufferings of those who must go down gradually to the grave. It is a law of the human system that it must be used to maintain the strength of the muscles, the vigor of the circulation, and general health; but work or laborious exercise cannot prevent the deposition of tubercles, or cause their absorption. It cannot subdue inflammation of the liver or stomach. I know a patient who was sent to a water-cure establishment in the last stage of chronic bronchitis. He was still able to walk about some, yet had hectic chills. In this feeble condition he was directed to go up two flights of stairs six times a day, carrying a five-pound weight in each hand! It is needless to say he died in four weeks. Many have learned one word in Hygiene, and that being their only "stock and store," like the parrot they repeat, exercise, exercise, on all occasions.

I would encourage exercise, nay, insist upon it; but exercise means more than a compulsory contraction and relaxation of the muscles. This gentle agitation of the system called exercise must be effected without an *effort* by the patient. He is rather to be acted upon—as in riding in a carriage or on horseback. In this way the whole system is exercised without an effort on the part of the patient, or consuming muscular strength. All exercise, taken merely as such while the mind is constantly dwelling upon its good or bad results, will do no good. It must be accompanied by *amusement*, diversion, and abstraction from *self*—the mind for the time forgetting the body—enticed away from its pains and brooding melancholy, to revel awhile

in the fascinations of new scenes and incidents. The great benefit to be derived from traveling depends entirely upon the union of these two conditions—*exercise of the body*, and *diversion of the mind*. This is the sum of the whole matter. I have not space to elaborate this subject, although it is worthy of more extended remarks.

CLOTHING.

But little need be said upon this subject; for every person of ordinary intelligence knows how to accommodate his apparel to the temperature of the different seasons.

Consumptives, and those who may have any disease of the respiratory organs, are very susceptible to atmospheric changes; and they take cold easily, whether in door or out. I am often asked by this class of invalids why is this so? The reason is obvious. Every cold (so to speak) taken by those in health, as well as by those who are sick, is the result of a *sudden* check of the *insensible* perspiration, by closing the exhalant pores of the skin, which obstructs the flow of the fluids to the surface of the body. The current of the fluids is changed, and the mucous membranes, which are but its *infolding*, perform the important functions of the skin. The amount of perspiration is greater in *dry* weather, and less in damp weather. Hence when the air is damp, evaporation from the surface of the body takes place slowly, and if the change from dry to damp be sudden, the pores of the skin are suddenly closed, or rather their exhalations prevented by excess of moisture in the atmosphere. In addition to these laws of perspi-

ration, to which all are subject, the invalid has a *morbidly increased* sensibility of the nerves of the skin; hence his extreme sensitiveness to atmospheric changes. And the membranes being physiologically in such close sympathy with the external surface, will, when *diseased*, show immediate symptoms of an aggravation.

The object to be attained in the adaptation of clothing is to prevent the too rapid evaporation of the heat of the body, and to protect from dampness that sensitive, mysterious net-work of minute vessels, through which certain fluids and impurities of the body *must* pass. So important are the cutaneous exhalations, that death would speedily result from their suppression. That clothing is the warmest, to use a common phrase, which is the poorest conductor of heat. Good conductors, such as wool, convey the heat rapidly from the body. Silk, or cotton-flannel, is the best apparel to be worn next the skin, and invalids may wear such even during the summer. So far as the balance of the clothing is concerned every one is capable of judging of the amount necessary to maintain a comfortable degree of warmth. Clothing ought to be changed often, especially the under-garments, for they become soonest charged with the unhealthy acrid matters of perspiration, which will be reabsorbed if not removed. Those who have night sweats much should change daily, and bathe the whole body with salt and water. And in cases of great liability to "take cold," as described above, the oil-bath may be used once a week. The surface ought to be briskly rubbed till there is a glow of warmth over the whole body.

VENTILATION.

The oxygen in the air breathed is the great vitalizer, and it is a well-known fact that when it has passed once through the lungs its vital principle is not only abstracted, but that it returns contaminated with impurities in a gaseous form. Heat also separates the oxygen, and unfits it for respiration, rendering it incapable of supporting animal life. As I have elsewhere said, that full, deep breathing not only vitalizes the blood, but *purifies* it also. That these changes shall be perfectly performed, it is of the utmost importance that the air be pure and not of too high a temperature.

In all climates like the United States it is impossible to maintain in our dwellings a uniform degree of heat. Hence in the apartments of the sick there is generally a deficiency of fresh air. The greatest care should be had in regard to the ventilation of the sick room, especially in fevers, putrid and lingering diseases.

Although the necessity of fresh air and good ventilation be admitted as essential to all, yet some carry it, as they do exercise, to an injurious excess, and it is their only advice on all occasions, and *their* antidote for all diseases. I have seen those who were so impressed with the sanative influence of fresh air that they would have the windows of their sleeping rooms raised in mid-winter. Nor could a cold rain, or other inclemencies of the weather prevent them from this imprudent course. Ignorance of the healthfulness of ventilation, and an enthusiasm that leads to excess, are alike to be avoided. The ultra-dogmas of the Grahamites, and the advocates of daily cold bathing, and

sleeping in a draft of cold, damp night air, have each had their victims: simply by excess in a good thing.

There is no condition in which the insensible perspiration is so likely to be checked, and a severe cold or cough to follow, as *sleeping* or sitting in a current of air, be it damp or not. Nowhere have I seen the advocates of "fresh air" display their ignorance more than in railroad cars. If there is a pale-faced inmate on board, the first move is a dash at the windows. Perhaps they are in a perspiration, the air is damp, but all they appear to know is *fresh* air, and more of it. The speed of the cars produces a strong *current*, even if the air is tranquil. Thus they brave the healthful element for hours or a day together, filling their lungs with dust and their eyes with cinders, all for fresh air! The same effort to display a knowledge of ventilation is often practiced elsewhere under the same presumptive circumstances, particularly at church, or in large assemblies. Windows and doors being thrown open, and a portion of the audience exposed to a strong current of damp, and perhaps night air, all to gratify *one* or more of these ventilating fanatics.

Ladies are principally the transgressors in this matter. Having first *burdened* themselves with apparel, furs etc., more than a laboring man could endure, they will plead for fresh air simply from excess of raiment. Often have I seen vigorous men, accustomed to brave snow and sleet, leave their seats in the cars, at church and elsewhere, because they could not stand the cold and strong current of the windows, beside which the lady would sit, in self-complaisant ignorance and impoliteness. Repeatedly have I

been driven to the same retreat, and during my constant traveling on the cars, no one habit has been so frequently remarked by gentlemen, as this presumptuous one of lady passengers.

The principal circumstance to guard against in ventilation is a *current* of air, especially the night air, and that while sleeping, or when the body is not active, or exposed to it when the system is heated.

It is unsatisfactory to the writer to treat these important paragraphs so *briefly*, but were he to say all that might properly be said, this work would be too voluminous for general reading.

CLIMATE.

The climate of birth, and in which a person has resided till the age of majority, is the best and most healthy for him. The climate moulds the constitution, as much as it determines the character of the vegetables of the soil.

When disease has invaded the system, a change of climate may have a corresponding effect upon the patient. This point is to be governed by the peculiarities of the disease. I am often inquired of regarding these matters. The climate to be preferred is different in different diseases.

A climate the most congenial, and from which the greatest benefit may be expected in all diseases of the respiratory organs, such as bronchitis, asthma, and consumption, is that where the temperature is the most uniform. Persons having disease of the lungs will find a residence in a *dry*, cool (not cold) climate, with a temperature ranging

from 60° to 70° Fahrenheit, adjacent to the sea-shore or in a mountainous region, to be particularly favorable to their recovery. A *dry*, invigorating air is the essential character of a healthy climate. Damp, cool or cold air with frequent, sudden changes, such as occur in the temperate latitudes, is the most unhealthy, and often defeats the curative agency of medicine, as also that tendency to recovery set up by the recuperative energies of the system. If this effort of nature is assisted by a proper climate and due regard to regimen, a permanent cure may be looked for in many cases.

But of all the Hygienic influences, climate is the most important, and it must be attended to *early* in the case. The conflicting reports of the influence of different localities upon lung diseases may be reconciled by reference to the *state* of the disease when the patient went to it. Neither climate or medicine can arrest consumption after a particular *stage* is reached. The first symptoms of pulmonary disease should be a sufficient warning to seek a *dry*, cool, uniform climate; for it is only in the incipiency of such affections that a cure can be reasonably hoped for, even under the most favorable circumstances. The ignorant and unthinking, both among patients and the community, are in the habit of denouncing the *last* physician, the *last* medicine, or the *last* climate where the patient *happened* to be when death occurred. The responsibility of a consumptive case rests more upon the *first* doctor in the *first* six months, or *first* year of the disease, than all others who may subsequently have charge of the patient. Therefore, those whose circumstances will permit should promptly

avail themselves of a suitable climate, in the very *first* stage of the disease.

What climate is the best for this class of patients? Much research has been had, and scientific inquiry been made in regard to this matter. Some have resorted to the Isle of St. Helena; others St. Augustin, in Florida; while many places more remote have been mentioned. The Straits of Mackinaw were at one time strongly advocated as being equally favorable, and possessing the advantage of being less remote from this latitude. The latitude of St. Paul, or a residence on the great Western prairies in the summer, has been advocated, but by no one who has experienced the effect of their bleak winds. I have been there, and fully believe it to be peculiarly *unhealthy* for this class of patients.

More lately California and the climate of the Pacific coast has been much extolled. I have also traveled much through that country, and can speak favorably of it from personal observation. Many portions of California, for a *dry*, invigorating atmosphere and healthiness, in all respects, are not excelled by any portion of the world. But at present the long journey, and that too through the tropics, is an objection insuperable to many.

After diligent inquiry I am satisfied that some portions of Texas possess all the essentials of a healthy climate for the consumptive, besides being convenient of access from the Middle and Northern States. The vicinity of the San Antonio River is perhaps the most desirable part. Having personally conversed with many who have made the successful experiment of a residence there, I would advise

those who contemplate a change of climate to make a trial of Texas first.

There are two points indispensable for every invalid to observe in seeking the benefits of a change of residence: the first is, that they do so in the *first* stage of the disease; second, if the climate does improve the health, to *remain* for several years, until the change in the constitution is fully established. No matter if every vestige of disease, so far as the patient can judge, is removed in six months, he should not return to the latitude where the affection was contracted or developed. This second point is of paramount importance; for the disease will reappear from slight causes, and then it generally proves fatal. If recovery is produced by the climate, that is the strongest reason why the patient should remain there.

I believe that a large portion of those cases of sore throat (the beginning of consumption), laryngitis and bronchitis, would be permanently cured by a year's residence in a suitable climate. There are but few, however, who can avail themselves of this expensive mode of cure, and even those who can, defer it till the curable stage is passed, and then rally for a journey, to find a stranger's grave in a land of strangers.

WILL DISEASE WEAR OFF?

So often do I hear this remark: "I guess my disease will *wear off*," that it seems proper in this place to correct such presumptuous opinions. Disease *wear off*? The very ones who employ this language, concerning themselves or

others, would be indignant if their *horses* wer sick, and the same principle of logic were applied to that valuable animal! I have often been consulted by those who were unmistakably in the *second* stage of pulmonary disease, confirmed dyspepsia, or other diseases of the viscera, and who still consoled themselves with the presumptuous and unsensible dogma, "I guess it will *wear off* after a while!" No one remark of the sick has surprised me more than the frequent repetition of this thoughtless phrase. To indulge this illusion is as unreasonable as it is fatal in its consequences.

No sane person *waits* for a fever, dysentery, or inflammation to *wear off*, but a prompt treatment is many times the *only* chance of recovery. Wearing off disease is much like the Dutchman who undertook to teach his horse to live without eating, and which died *just before* the economical habit was attained. So it is with those who think to wear off disease; but very few survive the ignorant and rash experiment.

THEORY OF THE ROTATION OF NUMBERS.

The different numbers of medicine are prepared with reference to certain groups of symptoms, indicating a particular pathological condition of the system. I do not treat any disease from the *name* given, but am wholly governed by the pathological condition of the whole system, and the grade and stage of the disease of the individual organs or parts affected. The general practice of grouping together and then giving them cabalistic names, has originated many errors among the common people. That

practice may be proper for teachers of medicine, and professional men who are competent to make the distinctions. The pathogenetic medicines are arranged for the cure of diseases of the various structures, or tissues—such as the *glandular* system, the *serous* and *mucous* membranes, the *nervous* system, depraved conditions of the blood, etc.

No one combination of medicine is capable of producing all of these changes, which is amply illustrated by patent medicines and nostrum venders generally. Hence it becomes necessary to prepare remedies for individual conditions of the system, pathogenetically considered, and also for the several *stages* of diseased action. This is a new and important feature of my practice

Again, all the features of chronic disease cannot be *directly* treated at *one* time, therefore the *Rotation* of numbers is the only mode of reaching chronic disease. One number is given to reach a certain group of symptoms and prepare the system for another number, intended for a second group, and so on, till every tissue and organ has been restored. I desire patients to notice this matter distinctly; for as this omission to prepare the system for a second course of remedies is the real cause of the common failures in treatment, so my theory and peculiar arrangement accounts for my unprecedented success. I repeat, then, that the *rotation* of numbers is another important feature of this practice. Without this rotation, or change of medicine, those complicated affections of the liver, stomach, etc., could never be cured. As in remittent or intermittent fevers, the system must be *prepared* for the tonic, else it would do harm; so is it in chronic disease.

Even when tonics are indicated, the system must be *prepared* for them, as otherwise they will not be borne, and if given will be injurious. This is proved by the common practice of administering tonics and stimulating bitters in dyspepsia—the patient cannot continue their use, and says they do not agree with his stomach, and really make him worse! This fact is the unfortunate experience of thousands. To obviate all these perplexities, I rotate the medicine, giving but *one* kind at a time, and thereby meet all the indications in the ease.

MANAGEMENT OF MEDICINE.

Always begin with the *smallest* doses mentioned, and do not increase to the full dose under six or eight days. If the dose of any medicine seems too large, take less for a time. In some cases the stomach is more irritable and the system more susceptible to medicine than in others. Those who are very weak cannot bear as large a dose as those not so much reduced. Females generally require smaller doses than males.

From the nature of the ease it is impossible to graduate the doses of medicine, in general directions, so as to precisely assign the exact quantity the stomach will bear in individual cases. Therefore, the patient is required to exercise his own judgment to some extent.

Patients who may be under my treatment will of course be liable to attacks of acute diseases, such as fever, inflammation, bowel complaints, bad colds, etc. Whenever this

occurs, omit all my medicines, and if necessary, call the family physician. My medicines are not adapted to, nor are they intended for, acute diseases of any kind.

PERSONAL.

It is but proper that I say something of myself to disabuse the public of the reiterated assertions of "humbug," "quack," and many less mild epithets applied to new modes of medical practice and their advocates. Detraction seems to be a natural element of human character, and it has become so common to turn critic in this age, that all desire to spend their opinion in this way. And as it requires neither intelligence, talent, or even common sense, to repeat certain cant phrases, coined by the better informed but *interested* parties, it is truly a very cheap way of "showing off" for any one to cry "quack," "humbug," etc., just as sensibly as "pretty Poll" repeats her euphonious name for the amusement of the nursery.

Alexander, the coppersmith, was the *first* and loudest in this cry of humbug, and to extol the goddess Diana, when Paul went to preach Jesus to the Ephesians. And wherefore his enthusiastic opposition? Ah! he had the contract from the idolaters to make her shrines! He opposed Paul because his "*craft* was in danger." Now Alexander, the coppersmith, was a representative man. He fairly represents a class of men; and when any new thing is proposed, no matter what, it will hit somewhere; then the Alexanders cry out lustily—"humbug!" and rally their dupes or hirelings to join in the cry. When the inquiry is put,

“Wherefore camest this uproar amongst the people?” it is found that some selfish, miserly fellow’s craft is in danger, and that whereof he “gets gain” is in peril! That’s all. It is not the veneration for Diana, or reverence for her shrines, but the *dollar* that is received for making them.

Every advance step in civilization, in science, in religion, in government, and even the industrial avocations and mechanic arts, has always been met by the opposition of these Alexanders—not “Alexanders the *Great*,” but Alexanders the Little. Yet progress has not been defeated, although it may have been retarded, and on the whole, her march has been onward—right onward—and these little Alexanders have been left to howl at the little ghosts of their own little schemes.

The whole system of the regular practice of medicine is made up from the *individual* experiences of all doctors, of all ages. The *world* is the doctor’s legitimate field of study, and his views, if proved to be sound, are a valuable legacy to his race. Who, then, can dictate his judgment, or limit his observations? or is he responsible to any class of men for his intelligent and honest convictions in medical science?

Who then is a quack? Is it he who has studied all the standard authors; who has complied with the requirements of medical colleges; studied three full years with a reputable practitioner; who has been duly examined, and has a diploma conferred upon him by a *regular* medical college; then sustains a lucrative practice in his profession—is such a man a quack? “O! no,” will be the answer.

Then suppose, through the love of science and an ardent desire to excel in knowledge, he studies *four* years, and attends two full courses of lectures *more* than is required for graduation, and contributes largely to the medical literature of his time—does that make him a quack? If all this, together with twelve years of successful practice in every branch of the profession does, then really I am a quack. For all this have I done, and by no means intend to stop medical study here. What then does constitute a quack? It is simply the crime, or great breach of etiquette in *thinking* and *practicing* according to one's own judgment; or the breach of medical ethics, by developing some *new* truth, or discovering some *new* remedy.

But the *quack* properly defined, according to intended usage, is one who is ignorant and unstudied in the profession, and who does not administer medicine from his own knowledge of their virtues, but because others use them—a pretender to that knowledge which he does not possess. This is a brief but fair definition of the term. Do we not, then, find numerous quacks in the *regular* profession, as well as out of it? I leave this for the reader to decide. Is the mere fact of a doctor's location a guarantee against his quackery? Does any one's knowledge increase and intensify by merely locating at a particular place? or does his attainments deteriorate and science turn to ignorance, because a man extends his sphere of professional labor? Upon the answer of these questions depends the momentous issue of quackery or no quackery.

I am no apologist for irregular practice, and advocate now only what I ever have done, that it ought to be a

penitentiary offense to prescribe medicine, or assume to practice medicine, without having graduated at a regular medical college. The pseudo-colleges are the hot-beds of quackery. Nothing but a thorough education in the liberal sciences can qualify any one to *study* medicine; then at least three full years of medical reading, including two courses of lectures and one year's observation in government hospitals, where the ablest physicians are employed—all this and nothing less can qualify a young man for practice. How many, let me ask, of those who are located in our country towns have had such advantages? Not one in a thousand. And this is the reason why anomalous diseases, and many of the more complicated and intricate affections, are not properly treated.

In defense, then, of myself against all these scurrilous detractions of the "little Alexanders" of the day, I present this volume to my patients as an evidence of my thorough, practical knowledge of medicine, and you can clearly distinguish the *local* quack from the intelligent local physician by his estimate of its merits. The local *quack* will tell you this book is all humbug; the intelligent local *physician* will tell you that the writer is evidently thoroughly acquainted with his profession. This rule is of general application, and will not disappoint your judgment. The most intriguing and violent opposition is always manifested by those who have "taken up the practice," or are parasites of pseudo-colleges, or such as are known to have never graduated. I desire patients to notice these facts particularly.

I have already extended my "Address to Patients" much beyond my intended limits, but even now have spoken quite too briefly upon many important points, and others equally desirable I have omitted altogether.

But I have written my *own* views, and described disease as it appeared disencumbered of all the details of unsettled theories and speculation, and have aimed to make myself clear and well understood by persons unacquainted with medical literature, to accomplish which I have avoided many medical technicalities or words not in common use, and have aimed to employ only the language of every-day life, as far as practicable.

The Pathogenetic System of Medicine is now fully established, having been abundantly tested in a great variety of the most obdurate cases of chronic disease, and in patients of both sex, of ages ranging between ten years up to seventy. Its success and growth in popular favor has been unprecedented in the history of medical practice. Of course, every patient cannot be cured—no miracles are pretended, but those having any of the diseases herein described, may reasonably hope for more permanent benefit from this system, than all others. It is worthy of the confidence and trial of all invalids.

Thus, having faithfully brought all of the known means of cure to the aid of my patient—and believing that I have made some advance in the science of medicine, I feel satisfied with the result. Nor will the fatigue of labor or the war of opposition interrupt further labors in the cause of humanity.

PART I.

PATHOGENY

AND

CHEMICO-PATHOLOGY

FAMILIARLY EXPLAINED.

PART I.

PATHOGENY:

OR,

The Cause, Course, and Symptoms of Disease Explained and Treated from the Changes in the Elements of the Blood, Saliva, Gastric Juice, and other Secretions and Excretions —Based upon Latest Discoveries in Animal Chemistry, and Chémico-Pathology.

THIS elementary treatise upon Pathogeny is only an abridgment of MS. papers for a larger volume; and as this is designed only for a guide to patients unacquainted with professional literature, I shall present the pathogenetic theory of disease, disencumbered of much that the medical student might desire or expect.

Pathogeny, properly defined, relates to the generation, production, and development of disease; to the earliest, as also the successive changes in the blood, and other fluids of the human system, which characterize the origin, course and termination of every generic departure from health. Certain elements are known to be essential to life and health, and they must exist in certain definite and uniform proportions; a greater or less proportion of any one of

them constitutes disease, in its origin. The first elemental change in all inflammatory diseases is an increase of *fibrin* in the blood: the elemental change in anæmia (or thinning of the blood) is a marked deficiency of the *red globules*, or carbonate of iron. Therefore, the name of my system is not arbitrary, but expresses just what is desired, viz: elemental changes from Nature's divine scale of proportion — and that is disease, by whatever other name called.

There are external and internal causes of disease. The external can only be guarded against, but not altogether avoided or controlled. The internal can be reached only so far as to restore the diminished or enfeebled elements, and reduce that which has accumulated in excess. Nearer the true course of physical or pathogenetic changes in the human system we can never arrive. From that point onward, the varying conditions of health and disease are to be investigated.

Allopathy claims to treat the *cause* of disease, but it does not reach it—the *effects* only are treated. *Pathogeny* goes beyond, and studies disease in the elemental condition of those fluids—the result of which is the phenomena of life, and the purity of which maintains the function in the organ producing them. The fountain imbitters the stream, and the stream indicates the condition of the fountain.

Pathogenetic is derived from the Greek word *pathos*—disease; and *genao*—I make; hence its application and significance in regard to the elemental changes creating disease. One who indorses this theory may be called a

pathogenist, and pathogenetic, being the adjective of pathogeny, properly characterizes the system of medical practice based upon it. In like manner other systems of medicine are known, viz: *Allopathic*, *Allopathist* and *Allopathy*; also *Homœopathy*, *Hydropathy*, etc. This explanation is sufficient to enable the reader to understand our position, and was necessary, this being the first treatise ever published upon Pathogeny, and the pathogenetic system of medicine.

WHAT IS HEALTH?

The answer to this question, in common life, is, simply, feeling well; eating and sleeping well; performing the varied routine of life without bodily pain or disquieting feelings.

Physiology, however, teaches how the functions of the body are performed, their various processes, and reveals, to some extent, the mysterious and wonderful machinery called the human organism. Physiology alone can answer what is health; and it is necessary to define *health*, and the conditions upon which it depends, before we can properly speak of the *nature*, cause and cure of disease.

The essential phenomenon of animal life is *motion*—motion in the blood, motion in all the fluids, and *power* of motion in all its varied parts. When these motions cease, we call it death. The cause of this motion—that which supplies the power of motion—is the *food* we eat, and the elements in which we live. The motion or use of

the body, both voluntary and involuntary, is constantly *consuming* itself; hence, the *supply* of food, or nutriment, must be kept up at regular intervals, else motion will cease. This constant *wearing* of the system must be replenished, and this is done by the various articles of food, which taken into the stomach are, under the influence of the life principle, in due time converted into blood containing in solution all the elements of the body, and are metamorphosed into muscle, nerve, bone, etc. Recurring hunger is evidence that there has been an expenditure of vitality, and the satiety of a meal shows that the supply is adequate to the present demands of the system.

To illustrate: A given amount of water in a steam boiler, when kept heated to a certain degree, will produce a certain amount of steam or motive power; but to maintain that degree of motive power, a constant supply of water is required, and that too just in the ratio of evaporation — otherwise the steam would become gradually less till motion would be suspended. The rapidity of the consumption of the water is also in the ratio of the heat applied. Hence the whole phenomena of the motion produced by the wood and water of the engine, are governed by the principle of *waste* and *supply*. These are *opposing* principles, yet always in operation. Every action of the body and every emotion of the mind consume a certain amount of vitality. Children and youth must necessarily take more food than is required to supply the waste caused by action merely, for with them a surplus must be had for the *growth* of the body. This explains why children take frequent as well as full meals. At the age of majority, or

when the system has matured, the waste and supply must be equal, and this *equilibrium* is the physiological definition of Health. This equilibrium is health; and health will continue as long as it is maintained. Whenever the supply is not equal to the waste of the system, the strength begins to fail, the muscles become flaccid or relaxed, emaciation goes on gradually, the shrunken skin folds itself into wrinkles, the blood keeps nearer the vital organs, until, after a lapse of years, the fire of life burns so languidly that no motion can be produced. The coffin and tomb are signals of that event.

It will be asked what becomes of the *wasted* portions or the residuum of the consumed elements of the body? What are they, and how are they removed from the system? I will, for the sake of illustration, call the useless or effete matters, the *ashes*, smoke, soot, etc., as in case of the engine. These must all be removed from the system, else they become *causes* of fatal disease.

There are four natural outlets for the different forms of these useless or pernicious matters; and each outlet has a special office. The carbonic acid gas is removed by the lungs; hydrogen gas is eliminated from the stomach through the mouth and skin; nitrogen, ammonia, are thrown off by the kidneys, and sulphuretted gas by the bowels. All these excretions are in one form or another the effete matters of the system, which correspond by way of analogy to the ashes, soot, of the steam boiler. These are called the depurative organs, and as a general expression, the gases are eliminated in some form through all of the emunctories. The salts or solid matters

are removed by special organs—the liver, the skin and kidneys. The effete, nitrogenized compounds pass out by the kidneys. All of those matters which can be of no further possible use in the human organism pass out by this channel.

When these used tissues, or the elements of decomposed organs, which nature designed should be promptly expelled, are *retained* in the blood and other fluids, they become *causes* of fatal disease, or serious disturbances of that equilibrium above defined. Precisely the same thing occurs when the supply is too *great* for the waste. The *excess* of nutriment passes into putrescence, as is shown by the eruptions of fœtid gas, nauseous odor of the perspiration, and changes in the color and odor of the fœces and urine.

WHAT IS DISEASE?

Having defined health to be an equilibrium between waste and supply of nutrition, it follows that disease in the abstract is the *absence* of that equilibrium, or any variation from it, whether the supply be *greater* than the waste, as is with gormandizers, or *less* than the waste, as is with those who eat too little.

There are many known, and doubtless many unknown agents, both *external* and internal, which are capable of disturbing this equilibrium, and thereby of producing disease. Having defined *disease* to be any disturbance of the equilibrium, or disproportion between waste and supply, it is proper to inquire further what agents are capable of pro-

ducing that effect, which is equivalent to enumerating the known causes of disease?

1st. External causes are those which increase the change of matter from the living to lifeless compounds, and as the *cooling* of the body increases the absorption of oxygen to the whole or a part of the system, this *rapid* change of matter must necessarily produce increased heat. Hence in all fevers there is first a cooling of the surface, called a chill or chilliness. At this stage there is a rapid change of matter, and the result is an *increase* of the heat, called fever. The fact that fever does depend upon this cause is further proved by the character of the urine, which in health is known to represent the amount of metamorphosed tissue by the *nitrogen* it contains. Now no physician can fail to notice the remarkable changes of the urine in the early stage of every febrile disease—that it contains more solid matters, and the amount of nitrogen in it. This may be regarded as an explanation of that hitherto unanswered question: “What is Fever?”

2d. There are external agents, such as noxious vapors, gases, etc., which are not only inhaled, but imbibed through the skin, and which act upon the nervous system, *relaxing* the tone of the organism so that the body is rapidly cooled by the sudden evaporation of heat. In this case, just as in the other, the oxygen acts more vigorously upon the tissues, and the waste becomes greater than the supply. Febrile symptoms are the result, but may assume a very different type.

The true causes of bilious fevers, ague, etc., are all explained by this process, so far as the external causes are

concerned. The sudden cooling of the body when heated, is well known to be the principal exciting cause of disease called fever, and the above presents a philosophical reason for its phenomena. The *inflammatory* type may to some extent be attributed to the suppressed function of the skin, whereby the acrid, effete matters which must pass through it are *retained* in the circulation, thickening the blood; and thus by increasing its density, local congestions are produced.

It would be agreeable labor for me to trace the various causes of acute disease, and demonstrate their nature by the application of pathogenetic principles; but as I am writing for the special benefit of patients, and not for the profession, I shall confine my inquiries more directly to the cause of those diseases the treatment of which is my speciality.

3d. The internal causes of disease are quite as numerous as the external. They embrace all the errors in *diet*, personal habits and conditions of the mind, whereby the natural, healthy action of one or more of the four emunctories of the system are weakened, or in any way prevented from performing their functions. Any cause, either external or internal, which obstructs the action of the depurative organs (the four outlets or natural drains of the system above mentioned), becomes a cause of disease; also the impurities which are thereby *retained* in the system become the immediate causes of disease.

If the action of the kidneys are suspended, and the *urine* is retained in the circulation, it acts as a direct

poison, and if continued but a few days the patient sinks into a comatose state, and death soon follows. This is but a specimen of the many diseased conditions of the body induced by obstructing the excretions.

We hear much said of the impurities of the blood. How does it become impure? Simply by a partial suppression of the action of the depurative organs. The ashes, soot, and all that, to use a figure, are *retained*, and change the quality of the blood; and these irritating matters, by an *unnatural*, morbid union with the various tissues, are the direct cause of disease. This is seen as one result of the sudden check of the perspiration—by the liver failing to separate the bile from the blood—a deficient supply of fresh air—and not least, the constipation of the bowels. Thus it is easy to understand how the blood becomes *impure*, and, as such, generates disease.

Many of the so-called nervous headaches, and other disturbances of the nervous system, are produced, not by any disease of the liver or from being *bilious*, but by torpor of the kidneys. This is, I know, a new idea, but every person who has had such affections knows that an increased flow of urine is followed by relief. Those cathartics which act most on the urinary apparatus are the most beneficial. In what is called sick headache it is well known the subsidence of the pain is invariably *preceded* by a copious flow of urine, and is observed in fevers. I appeal to these well-known coincidences as evidence of the truth of the proposition, as I have not space to present this theory in full.

Every person is apprised of the importance of fresh air,

a healthy skin, open bowels, and active kidneys; and my remarks above will explain the physiological reason for their natural action.

4th. The retention of these impurities in the circulation not only change the qualities of the blood, but by their chemical action, may also *change* and *alter* all the secretions by disturbing the natural proportion of their elements. This proposition comes directly to the great doctrine of Pathogeny, as set forth in another part of this little treatise. That the chemical elements of the bile, the gastric juice, saliva, etc., are subject to these changes, is an admitted fact, but the reason for these changes have not been given. Take for instance the various *tastes* which every one experiences at times in the mouth. How can they be accounted for except upon the principle that the natural proportions of the chemical constituents of the saliva have been changed? I speak of this because it is a fact every one has experienced more or less. The same principle applies to all the *secretions* of the body as well as excretions.

The *sweat* of patients affected with particular diseases undergoes similar alterations, in one instance becoming highly *acid* (as all know), in another *alkaline*, and in another highly *saline*. Indeed so various are all these changes produced by a disproportion of the chemical elements of the blood and secretions and excretions, that all morbid phenomena can be fully explained by them. The solid portion of the bile is a compound resembling almond soap, or a vegetable soap, with the addition of a peculiar acid. Here is the union of an alkaline and a

fatty substance. These will fully unite only in different proportions, hence any one can perceive that a less or greater quantity of either would produce a very different compound. The presence of free muriatic acid in the stomach, and soda in the blood, conclusively prove that the chloride of sodium, or *salt*, is essential to life and health. Any disproportion in the acid and soda of course would not produce salt, therefore all of those important changes which this substance alone is capable of effecting must be deranged, and an imperfect or low degree of organization would be the result. The same principles apply to the iron in the blood. Any deficiency will induce disease. Certain forms of disease which were known to depend upon a deficiency of iron in the blood, for a long time *failed* to be cured by that remedy! Here indeed was a paradox. None could solve it. But recent analysis of the blood shows that there is another mineral element as uniformly present and in definite proportion as the iron. That is manganese. Hence that metal was given with iron, and the very patients that iron alone failed to cure were quickly restored.

As I designed only to state a few of these well-authenticated facts, merely to elucidate and prove the fundamental proposition of the Pathogenetic theory of disease and treatment, a further detail would render this treatise too voluminous to be thoroughly read by patients generally.

From the above observations the following summary of principles is adduced:

1st. That health is the result of an equilibrium between the *waste* and *supply* in the human system.

2d. That *disease* is the result of a disturbance of that equilibrium.

3d. That there are external and internal agents which do so disturb it; and all such agents or influences are the primary causes of all disease.

4th. That when these causes have taken effect, the effete or excrementitious matters are *retained* in the fluids of the body, and act as general irritants upon the *nervous* system and the tissues, thereby inducing the varied forms of acute and chronic diseases in those organs for which these irritants have the strongest affinity, and which is determined by the excess or deficiency of a particular element or elements *at the time* the equilibrium was first disturbed. Upon no other principle can we explain *why* a cold will in one produce inflammation of the lungs, in another inflammation of the brain, or fever merely.

5th. That these lifeless or useless compounds when retained in the system do, by *recombining* with the natural elements of the blood and secretions, produce unnatural proportions in the fluids of the body, all of which constitute the true causes of all diseases of a chronic nature.

6th. That the general character of all these morbid changes is ascertained by a chemical analysis of the secretions and excretions of the body, and sufficiently correct to indicate the proper remedies to be administered as curative agents.

7th. That all remedies which possess a specific action upon any of the functions, operate upon this great principle of excess and deficiencies. Upon no other hypothesis can the various effects of medicines be explained; but

upon this every action of a remedy, either vegetable or mineral, can be explained, as also the actions of vegetable and mineral *poisons*.

8th. THE SCIENCE OF MEDICINE consists of a full knowledge of these morbid changes in the blood, the fluids, excretions and secretions, also the method or manner of detecting their presence. This done, a further and equally important knowledge is embraced in an acquaintance with such medical agents as have the power to *assist* the human organism in restoring itself to a condition of health.

The profession has been justly censured for its deficient reasons for its use of remedies. Indeed, so prevalent has been this practice and the absence of scientific principles as the basis of medication, that the so-called "science of medicine" has been, by some of the best writers of the day, pronounced nothing more than "enlightened empiricism!" The young doctor imbibes this sentiment and soon becomes contented with the use of a particular remedy, *because others* have prescribed the *same* for the same symptoms! There are none of the liberal sciences or useful arts that have so few *original* thinkers as the medical profession. The people have long been convinced of this second-handed routine practice, and it is deeply regretted by the more intelligent in the profession. The reason of this *empirical* practice in the profession is that the true causes of the morbid changes in the body, called disease, have not been studied in the right direction—hence the failure to develop the great principles that produce disease. There being no well-defined principles

as to the *causes* of disease, of course there could be no scientific adaptation of *means* to cure it. Inflammation is defined as *characterized* by (not consisting of) "heat," pain, redness, and swelling. This definition embraces no idea of its *cause*. Therefore, all the means used to subdue it, as suggested by these symptoms, are purely *empirical*. The idea might be further traced, but when applied to other diseases it will be seen that much which passes for *science* is *quackery*! The reproach of practical medicine is, that it has been reared upon hypothesis and sustained by talismanic authority. Although many true principles explanatory of the cause of disease are prevalent in the writings of theorists, yet they appear to have recognized them by accident, and not by legitimate inquiry. Thus it is with the remedies proposed; accident or adventure has enriched the *Materia Medica* more than scientific adaptations.

But the "time of this ignorance" is passing away, and by the aid of animal chemistry we are enabled to adduce a chemico-pathology based upon scientific principles. To principles in science there are no exceptions; exceptions apply only to *rules*. This established, the proper remedy will be suggested as naturally, and applied with as much certainty, for the cure of disease as the antidotes to poisons. Nor is it extravagant to hope for such a millennium or perfection in the much-abused science of practical medicine. That desirable era is being gradually approximated. The cherished *chimera* of abandoning the human system to disease, unaided by rational assistance, as is daily done by Homeopathy and "Bread Pill" doctors,

must and will pass away like the "baseless fabric of a vision." It is a libel on Nature to pretend that mental emotions or impressions can either produce or cure a morbid or actually diseased condition of the human system. The *minds* of the first class are no larger than their pills, and the minds of the second about of the solidity of theirs.

9th. It is now well authenticated, so far as the experiments and examinations have been made, that all our *reliable* and esteemed remedies operate upon chemical principles. This is true of all medicines, whether mineral or vegetable. *Is there no vital action?*

Medical substances may be classified as follows: 1st. Mineral. This class may be subdivided thus: those minerals which are capable of being *absorbed* and taken into the circulation, but have no *representative element* in the blood for which any affinity is shown. These all operate upon an organ or organs simply by their *presence* in the blood that circulates through those organs. These all pass out of the system—the system cannot contain them in a healthy state, but if they have been given in larger quantities than the system *can* dispose of or expel from the circulation, then they mechanically combine with the living tissues and become morbid agents—a *disease* of themselves. This class embraces the various preparations of *lead*, of *mercury*, *arsenic*, *antimony*, and the *salts* of many other metals.

The second class of minerals, and by far the largest and most useful portion employed as medicines, *all* have *representative* elements, or kindred elements, *in the human body*.

The *All-wise* Chemist adjusted and proportioned all of these elements in the beginning, and any increase or decrease is so far a *disease* and a cause of diseases. This class of mineral or earthy substances are not thrown out of the system. They enter the circulation, and by affinity of kindred elements, are used in the Laboratory of Life according to Nature's requirements. They are retained and organized, and become part of ourselves—that is, so far as the system has need of them. The excess of any medicine of this class of course would be expelled from the system the same as an excess of nutriment. But the true principle upon which they all operate *as medicines* is, by reason of the presence of kindred or representative elements already in the system.

This numerous and important class of mineral medicines are Iron and its preparations, Soda and its compounds, Sulphur, Manganese, Calcium, Phosphorus, Ammonia, etc. From these minerals as a base, a great variety of salts, or chemical compounds are prepared, as all well know. And they are in general use, and necessarily so; for no agent in Nature can supply the place of *iron* in the blood. To refuse to use or take it would be nothing less than arraigning the wisdom of our Creator! It has no substitute! Precisely so is it with soda, which is as much an element of the blood as iron; nor can we live without it. Its union with muriatic acid, which is common table salt, chemically called the chloride of sodium, is indispensable for all animals whose main food is from the vegetable kingdom. It is an ingredient of the bile and secretions generally.

The manner in which these various minerals and their compounds *affect* the system is most pertinent to my theory of medication, but I have only space to speak of first principles. But the remarks concerning iron and soda apply to the whole list of mineral medicines which are represented in the natural constitution of the human system ; and upon no other principle than that of Pathogeny can their *action* be explained, and their use defended as philosophical or scientific.

It is true that the system possesses the mysterious power of manufacturing many of the elements out of the food used—from vegetables. But that result is only obtained in *health*, and medicine is “not for the well, but the sick.” In disease the system loses its power to *work*, and then its wants must be supplied by art.

These brief remarks upon the second division of mineral remedies suggest the importance of *small* doses—of proportioning the amount to the *actual* wants of the system—but still greater discretion must be used in administering the articles under the *first* division.

The second class of medicines are obtained from the vegetable kingdom, and are by far the most *numerous*, and generally believed to be the most congenial to the system, still the same general law governs the action of the vegetable as the mineral medicines. The peculiarity of action or effect is wholly dependent upon the chemical composition of the article used. A substance analagous to the vegetable alkalis is an element in the composition of nervous matter ; hence all our *narcotic* and *anodyne* medi-

cines are from the vegetable kingdom. No substance like nervous matter (as the vegetable alkaloids) is found in any of the mineral medicines—none therefore are narcotic except in poisonous quantities.

Vegetable medicines may be divided into two classes, viz, the *nitrogenized* and the *non-nitrogenized*. It is a fact to be specially noticed, that the nitrogenized vegetables which are *nutritious*, or are used as food, differ in their chemical elements from the nitrogenized vegetables possessed of medicinal properties. They differ in their organism and chemical constituents, and are distinguished beyond all others for their powerful action upon the animal economy. The effects of the nitrogenized substances are singularly diverse, as may be seen in the mildest action of aloes up to those of nux vomica, and other terrible poisons. Through all these effects may be observed innumerable grades and degrees of action; and what is more wonderful, no remedy destitute of nitrogen is poisonous when given in the same doses. Nitrogenized remedies, such as are alkaline, and in union with the basic salts, seem to take a direct part in the formation of the secretions and change of the tissues. The *non-nitrogenized* remedies act by direct affinity for the organ or secretion to be affected, or are used to produce or make the elements of that secretion in the same way that asparagus, the dandelion, etc. are used by the liver to make *bile*. In other words, they become food for the diseased organs, and act strictly on chemical principles.

The several *elements* in a particular secretion, as of the *bile*, the gastric juice, saliva, or blood, are no more wonder-

ful and mysterious than the combination of the *several distinct* and separate *properties* of a particular medicine. Some are cathartic, diuretic, and sudorific, while others have only one of these properties. When these mysterious unions of so many distinct properties in a single vegetable are better understood, and we are able to *separate* them, the certainty of medication will be proportionally increased.

It would serve no useful purpose to continue these investigations; for patients generally are more interested in the *curative* action of a medicine than the *theory* of its action, and are more concerned in the effects than the chemical composition of the remedy they use. I have spoken upon these points to show the Pathogenetic mode of studying disease and its remedies, and to present in a general view the *rationale* of medical science. One great principle is developed—nor is it any new fact in medicine—that chemico-physiology and chemico-pathology constitute the basis of all scientific medication. Animal and organic chemistry are capable of explaining to a great degree the action of certain medicines which have heretofore been shrouded in mystery. When chemical physiology and pathology, or when *Pathogeny* is further studied and better understood—when physicians study disease in the *elements* of the human system, and apply their remedies on the Pathogenetic principles—the practice of medicine will be attended with a degree of *certainty* approximating the other practical *arts*, such as painting and dyeing. It is destined to meet the most sanguine hopes of the most enthusiastic in the profession.

From the above remarks it will be conceded, that all that can be recognized as *science* in medicine is founded upon Pathogenetic principles. This theory also exposes the fallacy of all the *one-idea* systems of the day—it reunites what theorists and fanatics have “put asunder,” viz, the union of vegetable and mineral remedies based upon the known elements in the organization of the human system. Exclusive minerals, exclusive vegetables, or exclusive water as a system of medicine, is as *unscientific* as to prescribe a diet exclusively of meats or vegetables, or attempting to subsist upon *water* alone, when Nature demands a portion of each! All these are useful, properly applied, but when individualized—when that union which God ordained is dissolved, and physicians become *exclusivists*—then they become empirics and quacks.

The theory herein advanced does not claim that disease is *chemically* cured, as an alkali may be neutralized by an acid, nor can that be inferred from the brief synopsis of Pathogeny here presented. The process of cure is, that such agents are *furnished* the system as enable it, or assist it, to decompose and expel morbid agents—that these remedies are obedient and subject to the laws of organic life, all operating to restore the system to health as philosophically and upon laws as uniform and fixed as that certain articles of food nourish the body.

From this it is apparent that *time* is an essential condition of a cure. Time is essential to the *growth* of the body; and the changes either of a natural or diseased nature require *time* for their completion. Especially is this true of chronic disease—of constitutional affections when the

whole system is deranged and loaded, so to speak, with impurities. To remove these in some cases, is like removing Canada thistles from a farm. It is a work of time, but however discouraging, perseverance will be attended with success.

THE PATHOGENETIC THEORY SUSTAINED

BY WELL KNOWN AND ACKNOWLEDGED PRINCIPLES.

1st. Before the science of Chemistry attained a reliable degree of certainty, the morbid changes in the fluids of the body were left to mere conjecture, although all external and other manifestations or signs of those changes were as palpable as now. Every step in the improvement and advance in the knowledge of inorganic chemistry, threw additional light upon the metallic and earthy compounds of which the human body is composed. The blood was found to contain many of them in a *fluid* state—a most wonderful revelation—a condition that the chemist never has been able to imitate, except by the aid of great heat, and in others not at all. The further application of chemistry to organized matter enabled medical men to analyze compounds, and separate their simple elements, thus developing the relative proportion of each substance of which they were composed. In this manner the bones were found to contain certain elemental principles, such as phosphorus, carbonate of lime, ammonia, etc. Every tissue of the body has thus by eminent men been

subjected to rigid and repeated chemical tests, so that the accuracy of these experiments at the present day does not admit of a doubt. Indeed, the results of the laboratory are admitted as conclusive testimony in every court in the civilized world. So perfect have these results been, that, chemically, the laboratory can furnish the *earthly* part of man in the different proportions of his body.

At this point chemistry was for a long time *in statu quo*. Another great field of inquiry was yet unexplored; the other continent of chemical truth was undiscovered; these were *vegetable* and *animal* chemistry. These two latter branches fill the measure of all human knowledge concerning the elemental parts of inorganic, vegetable and animal organic matters,—the first (the *earthly*) unpossessed of the *life* principle, but capable of imparting it first to the vegetable, and that in turn to the animal. A sublime and incomprehensible ascension of dead matter, to stationary, unconscious life, up to the firm, delicate, mysterious structures of the human frame; and at each remove we find the dead *earth* in combination with living organic structures, till at last *intelligence* is superadded!

When chemistry first revealed the fact that the red globules of the blood were composed of carbonate of iron, and that in certain diseases it was *less* in quantity than in health; and that in other diseases the iron carbonate was greatly increased, two important facts were established, and the effort to *increase* the amount in one instance and to diminish it in the other, was at once decided as the only reasonable and scientific mode and means of cure. That was *Pathogeny* and the treatment purely *Pathogenetic*;

and no physician can pronounce it unscientific, or "quackery," for the principle was developed and applied long before any one now living was born. We throw in this latter remark *en passant* to those who will try to induce the public to believe that pathogeny is a "humbug," when every dose of the preparations of iron given to a pale, "bloodless" female, or a dose of soda for sour stomach, is in principle pathogenetic.

Why is it that certain vegetable remedies possess a direct curative influence in certain diseases? The "learned doctors" cannot tell you the scientific reason of the well-known *effect* of their own remedies. It is an established fact in organic chemistry that animal tissues, in their elemental constitution, are *identical* with the vegetable, having been metamorphosed under the life principle, and endowed with a new and higher grade of vitality. Certain names are given to the substances and the changes they undergo; but a greater amount of chemical knowledge is requisite to understand them than the common reader is supposed to possess, therefore I will only state the mere facts, it being sufficient for my purpose.

Medicine does not possess an arbitrary power over chronic disease, however much it may be concluded to have in the acute form. Vegetable remedies, then, affect the human system just as the earthy and mineral ones do, by uniting with similar elements in the body to increase that which may be deficient, or by the power of neutralizing another which may be in excess. This theory of the operation of remedies is not only *reasonable*, but it is chemically and demonstrably true.

The farmer, even, unconsciously practices pathogeny every day. He well knows by certain signs when his stock need *salt*—he knows that if they are not supplied with this substance that their hair becomes rough, the animal droops, and does not thrive; experience has taught him that salt and ashes will change the bodily condition of the animal; yet ask the farmer the philosophy, or rather the reason for all this, and he cannot tell you. The blood of that animal is *deficient* in the compounds of sodium; the life principle in the animal converts the chloride of sodium, which is common salt, and the alkali into the required elements, and their health is restored. Is there any “quackery” about the principle here? Can any intelligent person, or even one of common observation, deny the evident relation between cause and effect in this case? Illustrations of this kind sufficient to fill a volume might be collected, both from animals and the human species, wherein certain abnormal or unhealthy conditions have been removed by particular substances which admit of no other explanation than the one given above. All of these facts will be fully treated of in a larger volume designed for medical readers.

Without the aid of organic chemistry we at best could only grasp at what is known to be established truth, and the pathogenetic practice is founded on acknowledged and well-established principles of *Chemico-Pathology*. Certain facts have long been known, but never before systematized, elucidated, and so arranged as to form a useful consistent whole, and applied to the treatment of disease.

Even an intelligent nurse has advanced far enough in

observation to practice pathogeny. If the child under her care becomes weakly, loses its appetite, has "watery stomach," cannot retain its food, vomits frequently, and the skin becomes rough and dry, why she knows better what to do than many physicians; she will give the little urehin *salt*—freely as you would a calf, till there is sufficient muriatic acid generated in the stomach to digest the food. Wherefore is gelatine given to an emaciated patient convalescent from typhoid fever? Because *that* is just what he has lost during the fever; our bodies are made of what we eat.

Vegetable albumen, fibrin, gelatine, etc., we have said in their elements are identical with the animal elements of the same name, but are in a lower state of organization, and the stomach must do more work to convert the vegetable into animal tissues than would be required to transpose animal food (which is already organized) into human flesh and bone and blood; for this is all that is done when animal food is used. Muscle or flesh is eaten to make muscle of, but if the iron in the blood be deficient, there will be a ratio of deficiency of fibrin, because the iron is necessary to generate the fibrin, to which condition the muscle must be reduced before it can be assimilated or applied to the purposes of nutrition. Therefore, by reason of this correspondence between the vegetable and animal elements, is it that vegetable remedies derive their medicinal power. Pathogenetic remedies are as abundant in the vegetable kingdom as in the mineral, and are indicated just in proportion as those of vegetable origin preponderate in the human system. This is the union God ordained;

hence the folly of those who would "put asunder what He has joined together."

The correctness of the pathogenetic principle is supported by every known law in nature, unlike homœopathy, which is directly in opposition to *all* her known laws.

The intelligent agriculturist doctors his farm upon the fundamental principles here advocated. Particular elements are known to be fertilizers of a particular soil: now, when by protracted tillage a special element is exhausted, the farmer feeds the debilitated soil with the elements known to be deficient. Agricultural chemistry has taught him this, and he profits by the instruction.

These familiar examples and illustrations have been adduced to show not only the reasonableness of pathogeny, but that it is daily observed and practiced upon by all classes, though unconsciously, even from the servant girl in the pantry who uses saleratus to remove the excess of acid from her bread,—the farmer in caring for both his stock and the fruitfulness of his farm, up to the intelligent physician who is guided by a full knowledge of the symptoms that point to *excesses* or *deficiencies* which exist in the human system, and administers such agents as chemistry tells him will equalize and harmonize those unnatural proportions.

2d. Chronic constitutional disease, and all the morbid changes in the fluids, and secretions and excretions, admit of no satisfactory explanation, except upon the principle of pathogeny. Morbific agents operate both within and without the system. They may be received directly into the system with the food we eat, or fluids we drink; may

be inhaled with the air breathed, or absorbed by the skin and mingled with the circulation. All the necessary elements for the support of life must enter the system in the above manner; hence the liability of noxious agents invading the sanctuary of life through the same channels. Should any unnatural circumstances intervene to prevent the ingress of necessary elements, disease is inevitable. Nature requires in her scale of supply equal and exact weight and measure in quality, as well as quantity, corresponding with the waste or expenditures of the system in performing the functions of animal life.

The cause of most diseases, with the present high degree of perfection attained in animal chemistry and *Chemico-Pathology*, may now be thus explained. Every succeeding medical journal brings news of further and more brilliant discoveries tending to establish the correctness of this means of diagnosis. True it is that a few diseases have thus far eluded the keen and vigilant eye of chemical science—like an adroit enemy conceals the means of invasion and particular mode of operation. The same obscurity once invested many diseases now fully understood; therefore it is reasonable to believe from the rapidly accumulating evidence before us, that by the aid and guidance of unerring chemical science, the hitherto mysterious and inexplicable causes of certain known maladies will be fully discovered, and a more scientific and successful mode of treatment introduced for their cure. The laws of life and health have undergone an intelligent, rigid and patient investigation; every advance in their knowledge is marked by a corresponding enlighten-

ment in the causes of disease, which knowledge is indispensable to the successful appliance of remedial means. Every science is progressive—none more so than medicine, and no part of that more than pathology, which means the cause and nature of any particular disease.

3d. Already has this theory found advocates. Professors Jackson and Churchill, of Philadelphia, Baron Liebig, of Germany, and many distinguished physicians in America and England indorse it, as the only truly scientific mode of removing disease.

Lately an effort has been made to prepare in the laboratory a compound consisting of those elements that naturally exist in the blood, and which are found by careful analysis to be deficient in certain chronic diseases. That preparation has received the significant name of “chemical food,” and is composed of the hypophosphites of iron, soda, and lime, in the same proportions found in the blood of a healthy person. The same principle applies to vegetable and animal substances, and should be the *dict of the sick*. The instincts of appetite suggest to those in health, the same principle pertaining to diet, and is universally, though unconsciously, obeyed.

A cold climate requires an increased production of animal heat, because its consumption or waste is greater than in a warm climate; hence the appetite is quickened, and craves the most highly carbonized food—such as fat meat, or even pure *oil*. Such substances are the most highly carbonized, therefore they produce an increased amount of animal heat. In certain forms of chronic disease deficient animal heat is the first symptom noticed—an *increased*

susceptibility to *cold*, and in such cases the stomach has lost in a degree its power to use carbon in that form; then highly *carbonized* medicines are called for, and are the only substitute.

On this principle alone can the often prompt action of Cod-Liver Oil be explained; it matters not whether that article be called food or medicine. Other animal oils, being highly carbonized, will produce the same effects before the fatty portions of the body are consumed. A given amount of carbon in the blood is requisite to the healthy combustion produced by the oxygen which enters that fluid in the lungs. The amount of oxygen depends much upon the condition of the air breathed. If it be heated or rarefied the oxygen is expelled, and is likewise removed by respiration, becoming unfit to be breathed again; in that condition it is insufficient to support life. When, however, the oxygen is in excess of the carbon, a pernicious effect must be produced upon that portion of the lungs where this change or combination takes place. Herein is the key to the elemental causes of pulmonary disease, because deficiency of carbon is only another name for deficient nutrition, as stated elsewhere in this treatise, and advocated in the first issue of the "*Pathogenetic Advocate*," and since by many other journals, being the true cause of pulmonary consumption.

It will be noticed that constitutional changes or diseases have been particularly the subject of inquiry. Acute diseases are generally the result of *excesses* and consequent obstruction in the fluids of the system. Certain medical agents, having an arbitrary influence over the functions of

particular organs, will be required to remove such accumulations, the suddenness of the attack being such that the organ is overpowered and its functions temporarily suspended. Hereby is explained the usefulness of evacuants of every kind—purges, emetics, diaphoretics, diuretics, and bleeding. These have their application in the varied forms of acute disease, caused by excesses in the fluids, the suddenness of which may be sufficient to cause death without their immediate aid. These being used, if the organs involved have not become too much prostrated they will immediately resume a healthy, normal action, and no further treatment be required. A timely dose of physic, an emetic, a “sweat,” or peradventure bleeding, may prevent the advent of a fever, the rise of inflammation, or other serious or even fatal maladies. Common observation has long since given authority to such a mode of procedure.

Treatment being delayed, not efficient or appropriate, the constitution becomes involved, and then the subsequent treatment is truly pathogenetic. If my professional brethren take issue upon this, I will ask wherefore they give *ten* or *tmenty* grains of calomel when first called to see a patient sick of certain inflammatory diseases, and only half a grain subsequently? In addition to its evacuating power it can only subdue inflammation by diminishing the red globules in the blood, thereby preventing the *increase* of fibrin. For the same reason no intelligent physician would give that remedy to a patient were the blood already deficient in red globules, as in dropsy,

anema, or consumption. No principles in pathology or practice are better established than these.

4th. The coincidence or harmony between certain signs and symptoms indicative of special pathological conditions, and the evidence of the same afforded by chemical analysis, may be called chemical diagnosis. A difference exists between *signs* and *symptoms* of disease. Symptoms are direct manifestations of morbid or altered conditions of the system, as pain, heat and swelling are *symptoms* of inflammation. Frequent and bloody discharges from the bowels are *symptoms* of inflammation. *Symptoms* constitute the legitimate language of disease, and are uniform. *Signs* are only attending phenomena, but not essential to the disease; varying, may or may not be present; such as a patient sleeping with half-closed eyes, or one shut, and the other partly open, a tendency to slide down in bed, the impression of being away from home, which is often observed in the delirium attending fevers, or some peculiar expression of countenance. But since particular *signs* usually attend particular *symptoms*, they may assist some in the diagnosis and also influence the prognosis in a given case.

Symptomatology, then, gives in urinary calculi or gravel the following: A sandy or gravelly deposit in the urine, presenting in different *cases two* distinct colors, with the many other symptoms and also the mechanical result of it. It has been ascertained that alkalies for *red*, and acids for the *white* gravel, are proper and useful remedies. Chemical diagnosis confirms the correctness of the remedy, and faithfully assigns the reasons therefor, viz: the one is pro-

duced by an excess of acid; the other by an excess of alkali in the system; or that the gravelly deposits respectively present an acid and alkaline base.

In like manner chemical diagnosis assists symptomatology concerning every disease of the fluids, secretions and excretions, affording the only scientific reasons for the administration of a particular remedy.

Another patient has the following group of symptoms: a dry, rough skin, acid, or fresh taste in the mouth, high-colored urine, the fæces are light-colored, bowels confined, with some of the earlier symptoms of indigestion; in such cases we give the alkaline salts, the various preparations of potassium, with such other remedies as concurrent symptoms indicate, until these peculiar conditions disappear from the system. *Why* did these effect a cure? Chemical diagnosis explains it. The fluids of the body were deficient in the compounds of sodium of acids or alkalis. This parallel might be continued till every form of chronic or constitutional disease is shown to present a perfect correspondence between the prominent symptoms and chemical diagnosis, but it is not in accordance with the design of this work.

Chemical diagnosis has been diligently and successfully studied by men eminent for their integrity and learning, and those results have been given to the world as authentic scientific truth, as all know who are acquainted with medical science, and if not they can possess the knowledge to some extent by studying Liebig.

Since, then, the correspondence or uniform coincidence found to exist between modern symptomatology and

chemical diagnosis has been fully established in theory, and further confirmed by practice, and the analysis of fluids, in patients applying for treatment, is unnecessary. That work has been done, and is being performed under more favorable circumstances than are ordinarily had; nevertheless their results are received and accredited, as are other ascertained facts. It is not necessary for the practitioner to wait for personal autopsies; or where he is called to a pale, anæmic patient, or finds a particular sediment in the urine, to delay his prescriptions for the revelations of the laboratory. That has been made, and he should be in possession of it as much as he is supposed to be of physical symptoms and indications of cure. I cannot better illustrate this idea than by referring to the crude, narrow-mindedness (ignorance would be appropriate) of some members of the profession. Conversing with one of such, who "held sway" in his little village, while presenting the claims of pathogeny and the new speciality of practice, he gravely inquired: "Can you carry a laboratory sufficient for these purposes?" "O yes!" said I, "it is very conveniently packed in a brain of ordinary size!" This ended the conversation.

Medical learning, experience and skill are requisite to prepare a remedy capable of curing a particular disease, yet the most illiterate might recognize the symptoms indicating its use. The patient having acidity of the stomach, constipation of the bowels, a dry, rough skin, and yellowness of the eyes, can, by consulting this work, find his remedy all prepared, with directions for using it. The intellectual work has all been done for him. No benefit

could otherwise be had by the common reader from this work. Its whole arrangement was planned with reference to the availability and use of patients and invalids, as its title imports.

The amplitude of the above facts thus obtained constitute the foundation of pathogeny, and furnish the necessary instructions for preparing pathogenetic remedies. This was distinctly stated in the first and subsequent issues of the *Pathogenetic Advocate*, and I claim the authorship of pathogeny on the ground of systematizing and arranging the vast amount of scattering, isolated materials in a practical form.

5th. Of the relation of diseases of the liver and stomach to those affecting the respiratory organs, I shall speak quite frequently in subsequent pages, therefore much need not be said here.

This relation, or organic sympathy, has been disregarded both by writers and practitioners of medicine. The mere derangement of the liver or deficiency of bile receives perhaps the compliment of a few blue pills, *et cetera*, and the patient is allowed to linger unconscious of his danger till a dry cough reveals it to him.

Bile is not a mere excrement to be thrown out of the system. It is ascertained to be not only an essential agent in preparing the chyme for absorption, but performs an important part in sustaining respiration and the maintenance of animal heat. Therefore any deficiency in this secretion deprives the animal economy of a fundamental principle of life. That secretion being retarded or obstructed endangers the lungs in the ratio of such deficiency.

No fact in disease has been more fully demonstrated in my observation than this: that diseases of the stomach and liver conjointly produce more than eight-tenths of the cases of consumption. Before dyspepsia was so general, consumption was far less frequent. Consumption, by the well-ascertained laws of life, is the legitimate effect of protracted diseases of the liver and stomach. Neither do the lungs become affected through mechanical agencies, as some have supposed—by the enlarged liver pressing against the lungs, thereby compressing them, and inducing irritation and a cough—but from constitutional results, whereby the standard of vitality is reduced. Pathogeny investigates these facts, and points out remedies calculated to thwart that sad result, by supplying the deficient elements till the organ shall have recovered the power of furnishing the same, according to Nature's established laws.

A change may occur in the chemical proportions of the elements constituting the *saliva*, gastric juice, or *bile*, either in quantity or quality—a corresponding change therefore in the products of digestion is the inevitable result, and the constitutional result is impoverishment or impurity of its fluids, and consequent declension of the general health. The means of determining these several alternatives is by the coincidence of symptomatology with chemical diagnosis as before stated. The sensible and physical symptoms to which I attach importance are the taste of the mouth, aroma of the breath, changes in the urine and alterations in the color and character of the stools. The several kinds of taste, such as a *sour*, *salt*, *bitter* or *nauseous* freshness,

each have their special indications; so also has the several kinds of fetor, or aroma of the breath. These are symptoms to which but little attention has hitherto been paid by medical men.

Whatever morbid change takes place in either the bile or the agents of the chymification produces an effect upon the blood, for healthy chyme and chyle must make pure blood as surely as syrup will make sugar. Any agent which is claimed to act upon the blood, independent of primary changes in digestion, is a delusion; hence the failure of endeavoring to purify the blood without due attention to the stomach and liver, in their influence and agency over the blood-making process. Likewise all morbid growths are due to defective digestion and perverted nutrition. Gravel in the urinary passages is spoken of as a kidney disease, but it may with equal propriety be said of the yellow tinge observed in the coats of the eye, from the absorption of bile, that such is an *eye* disease. The local symptoms of impaired digestion are usually pain in the stomach, *acidity*, *flatulence*, acrid eructations, or "belching of wind," *constipation* of the bowels, bloating or contraction of the same, a voracious, capricious or entire loss of appetite, with an indefinite train of nervous symptoms, referred to different parts of the body, producing great depression of spirits and despondency. The existence and continuance of these dyspeptic conditions of the stomach have a disastrous effect, sapping the foundation of health. The whole system is deprived of the required amount of nutriment, the blood becomes impoverished, and that state of the constitution induced which gives rise

to consumption of the lungs, or other *local* organic diseases. Generally the first signs of failing health are an unnatural feeling or derangement of the stomach. The patient is physiologically in the same condition of a person living upon one-half or less of nutriment necessary for the healthy maintenance of his system. In such a case the strength fails, the countenance becomes pale, pulse quick, the mouth dry, and a slow fever ensues. This is precisely the sum of the constitutional disturbances observed as preceding consumption, occurring as the result of a primary disease of the liver or stomach. These views are not only sustained by the most learned in medicine, but may be proved by concurrent, daily observation. Such persons bear evident signs of failing health, to use their own language, are "neither sick or well," are suffering from the above primary constitutional changes incident to impaired nutrition; hence the uniform relation between diseases of the liver, stomach and respiratory organs. Early treatment for the former affection is quite as important as in the latter. Organic changes in the liver are as difficult to arrest as those in the lungs, and dropsy is their usual termination.

PART II.

THE

DISEASES TREATED,

WITH A CONDENSED SUMMARY OF

THE CHARACTERISTIC SYMPTOMS OF EACH.

ALSO,

THEIR PATHOGENETIC REMEDIES,

AND MANNER OF PRESCRIBING THEM.

PART II.

PATHOGENETIC MEDICINES

AND THEIR USES.

IN the following pages I design to present a condensed synopsis of the uses of my remedies—the order in which they should be taken, and particular directions for each number. Patients need explanations and directions of this character, in order that they may select and apply such numbers as their symptoms require. A change of symptoms may occur during the use of the remedies, indicating a change of medicines, in the absence of the physician. I shall therefore notice every symptom of disease, and remark upon all leading or important effects of the remedies in such a plain manner as will enable any person of clear mind and ordinary judgment to select and administer Pathogenetic medicines with entire safety and absolute success in all curable cases.

It will not be within the scope of this work to trace the therapeutical operation of the remedies. This could only be compressed in a large volume, and a great amount of previous anatomical and physiological knowledge would be necessary to fully understand it. The unmedi-

cal reader needs only an explanation of the sensible and more obvious *results* of the remedies, and not a knowledge of how, or in what way these effects are produced. Any person can see when the eye has a yellow tinge, the skin a dingy, sallow hue, with a general unhealthy look or expression of the countenance, without any knowledge of the laws governing the internal organisms of the human system which have produced them.

To render, then, this synopsis of pathogeny a safe and intelligent guide to patients using my medicines, is all that is intended.

PATHOGENETIC INHALENTS.

The administration of medicine by means of medicated vapor is no new fact in regular practice, and the weight of medical testimony is in its favor, but which are the most efficient remedies to inhale is not so satisfactorily settled. The reason is that *one* inhalent is not adapted to all cases, any more than quinine is admissible in all stages of fever, when it is acknowledged to be essential in a particular stage. The indiscriminate use of inhalents as a remedy for a cough, or an ulcerated throat, without regard to the *stage* of the disease—the degree of inflammation—amount of debility, and the character of the expectoration—affords an obvious reason for its unsuccessful employment by those who use *one combination* in the treatment of diseases of the respiratory organs, without proper attention to these important distinctions.

Pathogenetic inhalents are not liable to these objections, for we have numbers suited to every stage in the progress of the disease. These arrangements give as great a variety of remedies as is useful, and fully removes the very common objection that one medicine is given for all affections requiring inhalents. Our system, then, in this respect, is superior to any now practiced.

No. 1 A. is to be used in the inflammatory stages, when the expectoration is "frothy" or "phlegmy," or thick and tenacious. It reduces the inflammation by dissolving chemically this secretion, freeing the glands or mucous follicles of their engorgements, and quieting the morbid irritation. Excessive secretion from any membrane is the result of local irritation or inflammatory action—the increased flow of blood to the part, and an obstruction of its passage from it. No. 1 A. also acts upon the tuberculous deposit in the lung, first promoting its absorption and changing the elements of the secretion, which, if allowed to remain upon the surface of the air-cells of the lungs, will form tubercles. I wish this point to be especially noticed, as it explains the necessity of using inhalents as soon as constitutional symptoms indicate that the lungs are taking on this morbid action called the "incipient stage" of Consumption. It is well known that that dreaded disease may invade the pulmonary structure unattended by either *pain* or *cough*, although they are the usual warnings of it. Hence this inhalent is often indicated in cases where there is no cough, but only a sensation of weight across the chest or occasional pain, with

shortness of breath and a frequent accumulation of phlegm in the throat or fauces. In the early stage the most marked improvement of the general health has followed its use.

No. 1 B. is indicated when ulceration has taken place, and thick, yellow or greenish matter is coughed up. In this stage there is deep-seated pain in one or both sides, and transient pain through the breast, shoulders and back, and often diarrhœa, night-sweats, and chills and fever.

No. 1 C. is indicated when chills and fever have occurred, and debility, with a *dry*, hard cough, and alteration of the voice, also hoarseness and loss of voice. At this stage the patient cannot speak above a whisper, and only with great exertion. The vocal cords are now inflamed and thickened, and can no longer perform their office. The term *Laryngitis* is applied to this affection. It is always a very obstinate and dangerous disease. Inhalent No. 1 C. is to be perseveringly used in this disease, with other treatment, both local and constitutional, as will be hereafter explained.

DIRECTIONS.—Dose of the inhaling fluid is from 15 to 30 drops, and used in the following manner, night and morning :

1st. Put a small quantity of hops, or other articles mentioned below, into the inhaler, then pour on to them hot water enough to fill the inhaler about *two-thirds* full.

2d. When the water is cooled so that you can bear your finger in it, or at the temperature that you usually drink

tea or coffee, then put on the cover, and place a small piece of wet sponge in the top, where the little holes are (the sponge should not fill the space tight), then pour on it from 15 to 30 drops of the fluid marked No. A., C. or B., whichever I may give you.

3d. Then put on the tube and inhale or breathe through it, from three to five minutes, in a standing position, or with the instrument so elevated that the lungs can expand. Use the inhaler night and morning, at any convenient hour, but do not go out of the room immediately afterward into the cold air.

4th. Inhaling is not "sucking," nor "drawing," but simply *breathing* naturally. At the first few breaths the medicine is the strongest; toward the last deeper, or longer breathings may be practiced. The mouth may be removed from the tube at intervals if desired.

Two things are to be guarded against; these are, using the water too *hot*, and breathing too deeply at *first*.

The vial of inhaling fluid must be kept tightly corked, or it will lose much of its strength. It is better to put in new corks, and keep it in a moderately cool place. It should never be dropped out by candle-light. Shake the vial every time it is used. The sponge must be washed often or a new one used. Inhaling is always to be used from the beginning of treatment, no matter what other medicines you may be directed to use.

Hops are generally the best to make the *tea* of, as they are anodyne and soothing. The *tea* must not be very strong; a pinch of hops, or enough to fill the *cover* of the inhaler, is sufficient.

Sage, or horehound tea may be substituted for the hops when there is great debility present; and if there is much soreness or irritation, slippery elm, or flax-seed may be used in the same way.

Those who are subject to hemorrhage of the lungs, must use the water merely "blood-warm," and if an attack of bleeding occurs, omit the inhaling for a few days, and use the formula number 23 in the Appendix, or the pill 24. Both are reliable prescriptions for hemorrhage; 23 is the best in urgent cases.

I have had much experience in prescribing inhalation, and find that the proper dose cannot be definitely given; for that will depend upon the effect it produces. Hence a discretionary latitude is given to the patient of from 15 to 30 drops. But some have to begin with only 10 and gradually increase. Enough to produce smarting in the lungs, or any unpleasant feelings, should never be used. But the patient will soon learn how to graduate the dose and manage the whole matter. No medicine should be used on the plan that if a certain dose does good, a larger one will do more good. Physicians usually have not instructed their patients sufficiently in the use of the inhaler. The good or bad effects depend very much upon how it is managed as well as what remedies are used. Patients who expectorate freely, generally require more than others with a dry cough. The nervous systems of some likewise are more susceptible, and by this class it must be inhaled more moderately. Aided by these few and plain directions, any person of ordinary discrimination, I think, may use the inhalents successfully.

Inhalation, properly used, is one of the most important remedies of the age, and assisted by constitutional, external and internal treatment, constitutes the only reasonable and successful remedy for all diseases of the respiratory organs. As a medical agent it may be employed in many other diseases with equal success: in neuralgia, convulsions, spasmodic affections, and every form of nervous irritation, hysteria, epilepsy, etc. Many females suffer great pain in the chest, head, back, and as they describe it, "flying pains" in different parts of the system; are weak and nervous, yet find no relief from any medicines. They have really no settled and definable disease, yet they are scarcely ever free from pain, and are really great sufferers. This class of patients will find inhalation a prompt and reliable remedy. Such patients are not cured by internal remedies alone. That has been unavailing, as every one knows who has been thus affected. I have cured every case of this kind that I have prescribed for—and inhalation is the remedy with which I have done it. It acts directly upon the nervous centres, and meets the disease as promptly as do inhalents the mucous surface of the diseased respiratory organs. Weakly, nervous females will find this remedy the amulet for all their afflictions that stomach medication has heretofore failed to remove.

Inhalation is acknowledged by all to be a *reasonable* system, howbeit there are some opposers. I will answer briefly their objections.

1st. The strongest opposition from the medical profession emanates from that portion who have *never used it*, and are ignorant of the agents used. Is not this true?

2d. A more moderate class of these opposers are those who will tell you they have used it, and were disappointed in its effect. But what did they use? Were they Pathogenetic inhalents? No: for no one but myself is in possession of them. They might have employed such as are laid down in the books, viz: iodine, the mineral acids, ehlorine, nitrate of potash, etc., but all these have been tried *before* and found of doubtful utility. Then they have not used proper inhalents, and that is one secret of their failure.

3d. I find by conversing with those who say they have tested it, that their *doses have been too large* — the doses of any medicine of the greatest moment, but espeecially so in this treatment. Then they use the water too hot, and their instruments are wrongly constructed. With these *defects* and errors, of course they could not succeed.

4th. The sum of the professional opposition is just this: they see it successful in the hands of those who understand it, and their patients will go from them where they can get relief. Hence the opposition to the system, and uniform abuse of those who praetiee it. The siek are often prevented from using this important remedy because their physician declaims virulently against it. The same opposition is encountered by patients who change physicians even in their own towns. This every one knows. The war of words against an itinerant doctor is no more violent than often between those praetieing in the same town, and invalids should receive these missiles with a liberal allowance for prejudice. I have no competition with any one, neither do I suppose that our speeciality in practice,

treating chronic disease of the Lungs, Stomach and Liver, ought to arouse the ire of those who are more generally employed in treating acute disease. There is a spirit of Ishmaelism in the profession much regretted by the educated and honorable part. But I intended only to call the attention of invalids to these facts, not to elaborate them.

There is one source of opposition which is more general, and I notice it as the

5th and last. It has failed to cure *every* case—failed to cure those who were in the very *last stage* of consumption. That is just what any common-sense man would expect. There would arrive a stage in every disease, if uncontrolled, that would be incurable. The fevers of our climate, inflammations, cholera, etc., become obstinate or perhaps utterly incurable by continuance, when, if treated in the first stage, they would readily yield to appropriate remedies. Is not this true? Again, long before Inhalation was used, perhaps in these unfavorable cases, every physician of note had been employed—after that every “patent medicine,” from “Brandreth’s Pills” down, including every whim of the ignorant—then, forsooth, inhalation was also *tried* and failed! And it always will fail, and every thing else, if deferred till this stage is reached. A teaspoonful of hive syrup might cure the croup in a child, if given in time; but if deferred till a false membrane is formed, that, nor any other remedy, would be very certain to do so.

It should be remembered that not one patient in a thousand uses inhalation as his *first* remedy, but most gen-

erally the last. A physician claims that he can cure Cholera; "Give him a trial," say the "brethren," "we have one here—a genuine case—been in the *collapsed* state two or three hours." Would it be a fair test of the virtue of a remedy if it should fail in such a case as this? On the same principle we here may say, if Dr. TUCKER cures such a case of consumption, we will apply! for our cases are not so bad as this. While waiting thus for a period of one, two or three months to see how other cases terminate (when I have given no encouragement), those very cases may pass the curable stages. Such is the strange medley of human reasoning when life and all its interests are pending upon a prompt decision!

The *insidious progress*, however, of this disease—the *uniform* indifference of its victims to the early warnings and premonitory symptoms—is an apology for what otherwise would appear even paradoxical.

Again, it is said that some have used inhalation, not so far advanced in the disease, without being cured or benefited. On inquiring, I have found that they used it only a few weeks, and it was not prescribed by one skillful in the practice, together with the many defects pointed out above—too large doses—vapor too hot, etc., and being unconnected with constitutional treatment. Of course, under these circumstances, it would fail to cure. Many patients are impatient for the cure of their disease, and if the symptoms are not really better in a week or two, the remedy is exchanged for another, which is likewise discontinued before the nature of the case admits of material improvement.

NUMBER 3.

TONIC MIXTURE.

Cases of mere debility, unattended with any inflammatory action, are not of very frequent occurrence. Latent irritation, or to use a more general term, chronic inflammation, is the frequent condition of those patients who are said to be debilitated. Patients who are feeble, weak, and experience a loss of physical strength and the power of endurance, unless they experience much local pain or soreness sufficient to *locate* a disease, are pronounced *debilitated*. This is the opinion prevalent concerning dyspepsia—that it is mere debility of the stomach—hence the free use of tonics and stimulants, and hence the almost universal failure to cure that disease. Were dyspepsia treated as chronic irritation of the mucous membrane of the stomach and liver, that disease would be as readily cured as any other. So it is in the first stage of some forms of consumption. The patient is told and made to believe it, by incompetent physicians, that he is *only* debilitated. All these cases present marked debility as a consequence, but not the cause of feeble health. I make these remarks because of the abuse of this class of medicines in certain diseases, both by physicians and patients.

There is a class of cases, however, where, for want of strength or tone, the natural functions of the system are imperfectly performed. Tonics in such cases impart strength and vigor to the muscular and nervous system without materially increasing the heart's action. Anoth-

er class of medicines, though often combined with tonics, affect the system very differently; these are called stimulants, and merely call out what strength there may be, but impart none. A glass of liquor produces increased action while its influence remains, but imparts no permanent vigor. As well might a coachman suppose that, applying the whip to his horse, would give strength to the jaded beast because he rallied to a greater speed! Tonics are permanent in their effects, whereas stimulants are transient and followed by corresponding depression. It is not within the design of this treatise to embrace therapeutical principles, but merely to describe the effects of remedies and point out the circumstances indicating the use and application of the different ones herein given.

This tonic mixture is designed to fill all the indications of a strengthening medicine, while it is also slightly stimulating. In all cases where a vegetable bitter tonic is required this will be well borne, and prove a remedy of the greatest value. In any form of chronic disease, after inflammation is subdued and irritation removed, it is a remedy of the first importance. It may be used under these circumstances in treating dyspepsia, liver complaint, jaundice, and all enfeebled conditions of the system. And it is especially beneficial in Chlorosis, falling of the womb, and the "turn of life." In the latter stages of consumption, bronchitis, asthma, etc., it is an invaluable remedy to support the vital powers, and will cure hectic chills and fever, and night-sweats, in the majority of cases. It will be found a valuable remedy either in the recent or chronic forms of ague and fever. As a general

invigorator and strengthener of the system, this number may be fully relied on.

DIRECTIONS.—Put the powder, No. 3, into half a pint of diluted alcohol, and let it stand one week, shaking the bottle thoroughly every day, but not after you begin to use it. I order *diluted* alcohol, because the common liquors are so drugged and adulterated that, as a general rule, they are neither fit nor safe to use. Diluted alcohol is merely common alcohol and water, *equal* parts. This gives you liquor of a uniform strength and purity. Get half a pint of alcohol and add to it a half pint of water, then add the powder as above directed.

DOSE.—The common dose is a teaspoonful three times a day, taken in a little water. For chills, or when there is great debility, twice that dose may be used if the stomach will bear it. In very delicate females, who do not bear liquor very well, a half teaspoonful may be used, and gradually increased. When this number is prescribed to be taken with Cod-Liver Oil, both it and the oil should be taken about an hour and a half *after* eating, but in common cases a little before meals.

The first quantity of liquor will not extract all its virtues, therefore the bottle may be filled up the second time, if the medicine is required to be longer continued.

NUMBER 4.

PHOSPHATIC POWDER.

This number is designed to increase the nutritive powers of the system and supply the waste of the earthy ele-

ments, which, in a state of health, are known to exist in the blood in a definite proportion. This, in combination with Cod-Liver Oil, contains the elements deficient whenever tubercles are being formed in the lungs or elsewhere. They must be used together and continued until the body begins to increase in weight, and for four or five weeks after. Using this combination a few weeks only will do no good, but months are required to develop its powers over tubercle and emaciation. Salt or spirits conceal the nauseous taste, and when taken from one to two hours after meals seldom disagrees with the stomach.

DIRECTIONS.—Put this into a pint of Cod-Liver Oil, and shake well every time it is used. Dose of the oil—a table-spoonful to be taken three or four times a day, from one to two hours *after* meals.

NUMBER 5.

ALKALINE BALSAM.

This number is particularly useful in chronic, catarrhal and bronchial affections, attended with a copious mucous purulent expectoration; also when the voice is weak and the fauces inflamed. In those affections where a stimulating expectorant is required, this number is an efficient remedy; also in some cases of a loss, or a partial loss, of the voice, a soreness about the larynx, and pain through the chest or lungs. It also acts quite efficiently on the kidneys, and is a useful remedy in all chronic ulcerations of the mucous membranes, when situated in the bowels,

kidneys, bladder, etc. In all diseases of the respiratory organs, wherein the balsams are indicated, No. 5 may be used.

DIRECTIONS.—Dissolve two ounces of white sugar in one gill of boiling water; stir the sugar till it is all dissolved, then add the contents of the vial, No. 5, and shake it thoroughly till well mixed.

DOSE, from a half to a teaspoonful three times a day, before meals, in a wine-glass full of water. Shake each time before using.

NUMBER 6.

ASTRINGENT AND ANODYNE PILL.

This combination is peculiar in its effects, and may fill a number of indications. It is intended to allay pain and all irritation, to procure sleep, quiet cough, restrain profuse expectoration, check bleeding of the lungs and diarrhœa. All of these effects may be obtained from these pills by varying the time and dose. To procure sleep, take one at bedtime; to allay cough, take one every three, four or six hours; to check hemorrhage of the lungs, take one every hour or two; to check diarrhœa, take one every two hours; if that is not sufficient, take one every two or three hours. Thus, by varying the time and dose, No. 6 meets a variety of very important symptoms. A little diluted vinegar, taken at intervals during their use, increases their effect.

While taking No. 6 for a diarrhœa, any other number you have been using should be omitted until the bowels become regulated. The diet may be simple; a little toast, boiled milk, etc. But no meats or solid food should be allowed.

NUMBER 7.

ALTERATIVE PILL.

This is one of the most efficient alteratives known in medicine. *Constitutional* alteratives are such medicines as affect all the tissues of the organs, thereby altering them from an unhealthy to a healthy action. These pills act primarily upon the glandular system—the liver, spleen, kidneys, and all the smaller glands—increasing the secretions and excretions of the whole system. It will be seen from this fact that they hold an important rank in beginning the treatment of very many diseases. They are required in all bilious affections, liver complaint, dyspepsia, rheumatism, dropsy, enlarged spleen, suppressed menses, swelling of the joints; in all diseases of the skin; in sore throat, and external ulceration, and in impurities of the blood arising from a syphilitic taint.

DIRECTIONS.—Dose, one pill at bedtime when not otherwise ordered. If the bowels are very costive, one or two pills of No. 12, taken with No. 7, at night, will be a good anti-bilious physic.

NUMBER 8.

EXPECTORANT BALSAM.

This balsam is expressly designed for certain forms and stages of catarrhal and bronchial disease, where the expectoration is copious, tough, and difficult to raise. It is a reliable remedy in every form of asthma and chronic catarrh, and bronchitis of old people, or when like symptoms are present at any age. It should not be used when there are inflammatory symptoms, or pain about the chest, nor in the advanced stage of consumption.

Its effects are not confined to the respiratory organs, but it will improve the appetite, promote digestion, and act upon the liver and kidneys.

DIRECTIONS.—Dose, from 20 to 30 drops three times a day before meals, the last dose at bedtime (if you have no other medicine to take at that time). Take it in a little water.

NUMBER 9.

CONSTITUTIONAL ALTERATIVE.

In its general effect upon the system, No. 9 resembles No. 7, being a general alterative, mild in its action and certain in its effects. In the early stages of consumption and bronchitis, it is a valuable remedy, and very efficacious in all stages of scrofulous diseases, whether of the bones or glands; also in all affections of the skin from whatever cause—sore throat, loss of voice, suppression of

the menses, and all vitiated and depraved conditions of the blood. Whatever impression it makes upon the system will be permanent, but it requires some time to change the secretions and free the blood from long-existing impurities. So also when given for hoarseness or loss of voice, it must be used for several weeks before its good effect will be manifest.

This number should not be given when the stomach is irritated or dyspepsia exists; nor continued if those symptoms occur during its use.

DIRECTIONS.—The dose is from 10 to 12 drops, three times a day, before meals, taken in a wine-glass full of sweetened water.

NUMBER 10.

ALTERATIVE SYRUP.

The annals of medicine do not furnish a preparation equal to this. It is a remedy of general application in chronic diseases of the stomach, liver, kidneys, bladder and bowels. The product of its reaction in the stomach is a chemical substitute for the gastric juice, and allays irritation of the mucous membrane of that organ, not as an anodyne, but from its soothing or healing properties. It prevents acidity, and neutralizes calculi in the biliary ducts, or urinary passages, when of the peculiar character, which is known by the sandy sediment in the urine being reddish, or of brick color. When the liver is the seat of sub-acute or chronic inflammation, with a deficient se-

cretion of bile (which is often the case in dyspepsia), No. 10 is a reliable remedy, and operates effectually upon both of these organs. And as disease of the kidneys is almost invariably an attendant upon affections of the former organs, by reason of their physiological connections, it likewise reaches them and the bladder. No one remedy has more general application in all diseases of the above organs than No. 10 given in unison with No. 7.

It is impossible that any bad or unpleasant effects should result from its use, even in triple the doses ordered. A safer remedy, or more effectual, was never administered in the diseases above referred to. Cases even of extreme debility will bear it, as it cannot disturb the most delicate nervous systems. From a long series of observations, I fully believe that dyspepsia, with irritation of the stomach and chronic inflammation of the liver, with deficient secretion of bile, would, in eight cases out of ten, be radically cured by this remedy alone, if persevered in. I have had personal experience with it, and know that its virtues are not overrated. The full dose after the first or second week may be used.

DIRECTIONS.—To prepare this number for use, put the contents of the box in half a pint of hot water and stir it until it is all fully dissolved; then add half a pound of white sugar and set the vessel on the stove and heat it to the simmering point; then add whiskey or brandy sufficient to make the whole measure *just one pint*. If sugar does not agree with the patient, use but a quarter of a pound, and in case that *liquor* does not agree with the pa-

tient, use *a pound* of sugar—that will be enough to prevent it from souring. I find it necessary to give directions for preparing this syrup in the above several ways, because some patients cannot use sugar or any thing sweet, and others cannot bear even a teaspoonful of liquor. The best mode of preparing it is as first directed. In summer it should be well corked and kept in a cool place.

Dose.—Take from a half to a table-spoonful three times a day, before meals, in a little cold water. Begin with the smaller dose. Children from seven to twelve may take a teaspoonful. Shake each time before using.

NUMBER 11.

NERVE AND BLOOD INVIGORATOR.

This number is designed to fill a particular indication, although it will admit of a general application in diseases dependent upon general debility. Cases occur where the nervous system is debilitated and irritable, the blood deficient in the carbonate of iron; there are transient nervous chills, frequently “hot flashes,” mistaken for fever; spasms in a very mild or severe form may occur; the patient is always greatly alarmed, constantly dwelling upon all the unfavorable symptoms and aspects of the case. They generally complain of a hot or cold sensation across the top of the head, with pains and bad feelings, “too numerous to mention.” They have a confusion of mind, and loss of memory. These are, for the most part, female patients, but the affection is common to both sexes. There

is a wide difference between that peculiar condition of the system which produces the above symptoms, and similar symptoms attendant upon other diseases. Both physician and patient often fail to discriminate or make this important distinction. I have no doubt but that this fact alone has given currency to the flimsy superstition that "nervous diseases are incurable." Therefore No. 11 is prepared with reference to this peculiar condition of the nervous system.

This number will be found highly useful in sustaining the system in the advanced stages of consumption in any form, and in all cases where the powers of the system are feeble and much exhausted; in all pale, emaciated patients, where there is no inflammation present; in dropsy after the water has been removed; in cases of weakly females, who may have Leucorrhœa, or suppressed, deficient, or painful menstruation.

DIRECTIONS.—Put the powder into half a pint of diluted alcohol — which is water and alcohol equal parts. Let it stand one week, shaking it often, but not when you take it.

DOSE.— One teaspoonful three times a day in water, either before or an hour or two after meals, as may best agree with the stomach.

NUMBER 12.

ANTI-COSTIVE PILL.

This pill has been prepared with special referenee to the several distinet processes of nutrition, from the time the food is taken into the mouth until it is ultimately deposited as "flesh and bone." Its effect upon the stomaeh and liver is much the same as No. 10, but its action upon the bowels is quite different. It is designed in its sensible operations, so far as the patient can at first perceive, to remove *costiveness*. I have not space to go further into details of its *effects* than this. By *costiveness*, I do not simply mean that the discharges are hard. Some persons unacquainted with these matters think that to be the meaning of the term. But by *costiveness* is understood, that the evacuations are either—1st. Harder than natural, or less in quantity; 2d. The bowels may move daily yet not have free or full movement; 3d. They may not be regularly moved, varying from two to eight or ten days. Hence *quantity* and *regularity* are distinet points for observation.

These pills will positively cure constipation in any case not dependent upon organic obstructions, if properly used. They are not to be taken as *physic*. Purgatives irritate and weaken the bowels, and increase the difficulty they are given to obviate.

DIRECTIONS. — Dose, one pill at bedtime every night until regular evacuations are procured; then take one every other night, or every third night, until the bowels

move daily, and the discharges are natural in color and quantity. If they do not act upon the bowels in several days it is no matter, they *will act* and procure the desired effect in proper time. They may be used while taking any other medicine. Two pills of No. 12 with one of No. 7 will make a thorough bilious physic—not drastic, but acting vigorously upon the liver, kidneys, and secretions generally. These pills should be used when there is headache, a fullness of the bowels, and frequently in cases of sour stomach.

Dose.—For a child six to ten years old, one pill; for those younger, half a pill.

NUMBER 13.

ALTERATIVE TINCTURE.

There are several different diseases affecting the same structure or tissue, and although these diseases in their symptoms and progress are dissimilar, yet their termination is the same. I include all those pertaining to the sero-fibrous structures of the body, and the mucous membranes, all of which are intimately connected with all of the vital organs, such as the heart and its coverings, the lungs, pleura, and all membranes secreting fluid, the disease of which terminates in *dropsy*; such as dropsy of the chest, the heart and abdomen. Rheumatism affects the sero-fibrous structures which invest the joints, and this is the reason why the rheumatism may attack the heart coverings, the brain, the stomach and the womb. The

design in preparing the "alterative tincture" was to reach diseases which are situated in these structures, and I believe No. 13 to be one of the most reliable remedies for that purpose. All those acquainted with anatomy and physiology will readily perceive the numerous indications to be filled by this number; and I desire all to understand one principle in my practice, viz: that all my remedies are prepared with reference to the *structure* of the organs or parts diseased and not in reference to symptoms! The symptoms are but the *language* of disease, and tell us the organ which is suffering, and anatomy tells the peculiar *structure* of that organ, and by the aid of this knowledge the remedy is prepared.

This tincture is a valuable remedy in rheumatism, when preceded by an active physic; in every form of dropsy, especially the limbs; in chronic bronchitis, consumption, epilepsy, asthma, and debility of the muscular system.

DIRECTIONS.—Put the powder in half a pint of diluted alcohol (water and alcohol *equal* parts) and let it stand one week, shaking it frequently, but do not shake the bottle when you use it.

DOSE.—A teaspoonful three times a day in a little water before meals. In rheumatism and dropsy four doses a day may be taken till the symptoms begin to subside, then use three a day. Children between 6 and 10 years old may take half or quarter of the above amount.

NUMBER 14.

ANTI-DYSPEPTIC POWDER.

This is the first *Pathogenetic* remedy I prepared, and from the prompt, decided and permanent effects obtained, I was induced to pursue the investigation. The principle once established, every stage of investigation and trial was alike successful, and has resulted in the elaboration and systematization of the "Pathogenetic Practice of Medicine." I first prepared No. 14 in 1847, since which time I have used it as an anti-dyspeptic remedy with the most extraordinary results. It is no arrogance in me to say that I have since been favored with a larger local practice in medicine and surgery, than is often had short of that period in professional life, when favorable collateral circumstances exert an influence and gray hairs command that respect which gives to the title of the "Old Doctor" the supremacy of confidence. During my practice, I have never prescribed this number (for a faithful patient) without the most positive and permanent benefit—curing cases which had resisted all other treatment for many, even ten or twelve years.

This number cures acidity and bloating of the stomach, "belching of wind," allays irritation, restores tone to the digestive organs, regulates the bowels, enriches the blood, and strengthens the nervous system. It is especially suited to cases enfeebled by long continuance of dyspepsia—who are pale and emaciated, but without fever, except from mere nervous irritation. If the tongue be

dry, and unnaturally red, other numbers should be given first till these symptoms are removed. No. 14 will not disagree with the most delicate stomach. At first there may seem to be an increased fullness of the stomach or head, if so, take a smaller dose for a few days, then the full dose will be borne.

DIRECTIONS.—Dose, from a half to an even teaspoonful three times a day, before meals, in cold water.

NUMBER 15.

VAGINAL LOTION.

This number is especially designed for the “whites” or Leucorrhœa of females, chronic inflammation of the vagina and neck of the womb. In these mucous discharges no remedies act with so great promptness. The whites can be cured, and permanently so in a short time. *Prolapsus*, or falling of the womb, depends upon chronic inflammation, and the relaxation of the broad ligaments occasioned thereby, permits this organ to change its natural position, merely from its own weight. Chronic inflammation is the true cause of *Prolapsus*, and can only be cured by removing irritation, for strength cannot be imparted to any organ or limb while any degree of inflammation be present. Medicines applied to the mouth or neck of the womb, approach as near the seat of the disease as is possible. The neck of the womb often *becomes* diseased from prolapsus, and requires local treatment, or, the inflammation beginning there may *extend* to the ligaments, and thereby produce prolapsus.

Again, the *seat* of that affection known as the “whites,” is found to be at and around the neck of the womb, and often depends upon ulceration of those parts. Ulceration is more frequent than has been heretofore supposed. Never, till the *speculum* was introduced for the treatment of vaginal and uterine diseases, was this fact fully established. A thick, yellow, or offensive secretion, either with or without being tinged with blood, is quite positive evidence of ulceration.

For all of these discharges, whether merely an increased secretion of mucus or purulent matter, from an ulcerated surface, the preparations of No. 15 will effect a radical cure, when properly and perseveringly used. The success of treatment, however, depends upon the adaptation of the instrument, and the skill with which it is employed. The “curved womb syringe” (glass)—one that will hold from two to four ounces—is the only suitable instrument. The curvature is adapted to the parts, the point being carried up against the mouth of the womb. The patient should use it only in the recumbent posture, lying with the hips well raised, so that the fluid will reach and remain in contact with the diseased parts.

These preparations of No. 15 will also cure any case of Gonorrhœa (or clap) in females. In this disease they must invariably be used cold, and injected night and morning. The parts must be kept constantly saturated with the liquid, by wetting a small piece of cloth and laying it on the external orifice. In using the syringe for the latter disease (Gonorrhœa) the point of the instrument

should not be introduced more than *one inch* into the *vagina*.

DIRECTIONS.—Put this powder into one pint of rain water, and, when dissolved, turn off the clear liquor for use and throw the sediment away. Inject into the vagina one syringe full night and morning. After the discharge begins to subside one injection a day may be used. Must *not* shake the bottle before using, as the sediment would cause smarting.

NUMBER 16.

STYPTIC MIXTURE.

This powder has but one indication, viz: to check uterine hemorrhage, and increased or too frequent menstrual discharges. For hemorrhage, it may be used every two, three or four hours, until the desired effect is obtained. In too frequent or profuse menstrual discharges it may be used thus: After the courses have been on two or three days, then begin with the medicine, taking a dose every four, six or eight hours, until they are stopped. Do the same way the next month, and the courses will then only appear at the usual periods, that is, once in a lunar month. No woman need have her strength exhausted, and constitution destroyed by profuse or too frequent menstruation, if she will use this remedy.

DIRECTIONS.—Put this powder (No. 16) into one-half a

teacupful of vinegar and fill the cup full of water. Stir till dissolved.

Dose.—One table-spoonful as above directed. If this does not check the flowing sufficiently, get one of the prescriptions mentioned for that purpose in the Appendix. Omit all other medicines while using this number.

NUMBER 17.

ANTI-HECTIC PILLS.

In this number is combined very extraordinary properties, and it will invariably produce the effects here ascribed to it, possessing, as it does, anti-periodic and tonic properties, it is indicated in the chills, and hectic fever attendant upon consumption, and fever of this type, from whatever cause produced. There is often hectic fever without chills, or at least those well marked. In all such cases these pills are as effectual in curing the fever as when attended with chills.

They are a potent remedy when there is a great debility from long-continued disease of the lungs—bronchitis, or common ague, and intermittent diseases of this climate. They are tonic, anti-periodic, and anti-spasmodic, enriching the blood and improving digestion, and the nutritive function generally. Nor do they contain quinine or any thing which can affect the system unfavorably. They will be borne when quinine or mineral tonics cannot.

DIRECTIONS.—For hectic chills and fever, take two pills

three times a day until the chills are broken. For chronic ague, or chill-fever, two pills may be taken every three hours during the intervals or well days, until eight pills are taken, and repeated in the same way at each interval until the disease is removed. Lemonade or any of the vegetable or mineral acids should not be used while taking these pills.

NUMBER 18.

IRRITANT PLASTER.

This plaster contains neither tartar-emetic or Spanish-flies—is far less tedious to bear, and much more effectual than either—discharges more than a blister, and may be kept running for weeks without becoming, like tartar sores, hard to heal. A more effectual counter-irritant was never applied. It may be used for any local pains, either in the sides, breast or back. When there is pain in the region of the Liver, Spleen, or Kidneys, this plaster should be constantly worn thereon, changing it from place to place, as it becomes too sore. The pain in the breast or chest in the incipient stage of consumption is not only relieved by it, but the disease itself may frequently be arrested. It may be used in any stage when there is pain, either acute or less severe and more persistent.

The same remarks apply to any stage of bronchitis; for here counter-irritation, rightly managed, is one of the most potent remedies we possess. A marked improvement in the cough and expectoration follows, when a free

and continual discharge has been produced from the upper portion of the chest. In all diseases affecting the respiratory organs, its use cannot be too strongly insisted upon—in Chronic *Laryngitis*, or inflammation of the larynx, known by a change in the voice, hoarseness of any degree, from the slightest to a mere whisper, or total loss of the power of speech. In this latter affection No. 18 is in no case to be omitted. The very *earliest* symptoms of disease of the respiratory organs demand immediate attention. The neglect of this first warning of the approaching disease, has cost the lives of thousands. As I have elsewhere remarked, consumption is often “seated” (as is commonly expressed) *long before the patient feels any alarm*. This fact alone fully answers the oft-asked question—“Why do so many die of lung disease?” The slow and insidious progress of lung diseases appear to induce stupidity and indifference in its marked victims. I repeat then—Why do so many die of diseases of the throat and lungs? The truthful answer is—the patient *neglects* to apply for treatment in the *first stages*, and not because physicians are unskillful and their remedies powerless. I feel it my duty to be emphatic upon this point, because patients so generally overlook it. A few weeks may render a curable case an incurable one. Then the physician is censured for lack of skill, and medicines discarded as useless, or even injurious, and the ignorant will declare with due gravity that death was hastened by its use; just as though they, or *even a doctor* could know how long the patient would have lived without the use of medicines! When a physician fails to cure

or benefit patients having a justly alarming malady, two accusations are sure to be made by unmedical persons:

1st. That the doctor does not understand his profession and the disease; or,

2d. That his *system* or *mode* of practice is wrong or injurious—when the real cause of its fatal termination was the neglect and indifference of the patient to attend to his case before it became “everlastingly too late.”

This plaster is a valuable application in neuralgia when applied over the seat of pain; also in every form of rheumatism; in all chronic swellings of the joints; in white swelling, and in all local pains.

DIRECTIONS.—Spread the plaster thinly on a suitable piece of leather about the size of the palm of the hand. Take off the plaster every night and spread on a little more. It will require a thicker coat the first few applications than afterward, and it should be renewed in this manner till it discharges freely, then take it off.

In swelling of the joints the plaster may be applied first on one side, and when that becomes too sore to be borne longer apply on the other side. So in other cases, it may be changed from one place to another as the case requires.

If it becomes very sore apply a slippery elm or a bread and milk poultice; put it between a thin piece of cloth and renew it till the inflammation is subdued. But poulticing will seldom be required.

To keep it discharging, and as a proper dressing, use the following ointment:

Take of Resin one table-spoonful.

“ “ Lard do do

“ “ Beeswax one half do

First, melt the beeswax and resin together; then add the lard, and continue to stir constantly till it becomes cold, or it will be lumpy. This may be spread on a thin piece of muslin, and placed over the sore. This ointment can be had at the drug store, and is known as “resin cerate” or Basilicon ointment.

NUMBER 19.

STRENGTHENING ANODYNE PLASTER.

This number is an anodyne, strengthening plaster. It allays pain, supports and imparts tone or strength to the part to which it is applied. It especially relieves that pain in the back, hips and legs, of which females so frequently complain. It may also be beneficially applied over the stomach, or between the shoulders, for pain or weakness in those parts.

DIRECTIONS.—Warm and spread it on a piece of thin leather, three or four inches square, renewing it occasionally.

NUMBER 20.

EMMENAGOGUE PILLS.

This is a tonic alterative, and special stimulant or promoter of the menstrual function. It is used for deficient, irregular, suppressed or painful menstruation, and for no other affections. When the courses are attended with great pain, begin with these pills two or three days *before* they are expected, and omit them as soon as they appear. If the courses have longer intervals than natural, begin with the pills three or four days *before* they should appear. For suppression, No. 20 may be used until regularity is established.

DIRECTIONS.—Take two pills, three times a day, before meals. [Omit all other medicines while using this number].

NUMBER 21.

ALTERATIVE SYRUP.

The medical properties of this number are similar to No. 9, and differ only in this particular: It possesses special *tonic* properties superadded to the alterative qualities of that number. In remarking upon No. 9, we said it was not suited to the stages of *debility* in the several types of disease requiring its employment, but should be given in the febrile stage. When the class of diseases there spoken of reach the stage of *debility*, then No.

21 takes the place of No. 9. The importance of this number (21) will be readily perceived. It may be given early, even before there are night-sweats or obvious emaciation; and in Consumption and Bronchitis, as soon as *pus* is expectorated (which may be generally known by its sinking in water). This remedy should be used also in jaundice, enlargement of the liver or spleen, scrofula, and in all those cases which show evident signs of failing health, with a sallow, dingy skin, loss of appetite and enfeebled digestion. Rheumatism and Dropsy, and in anæmia of females, known by a peculiar pallid hue of the countenance, and pale blue lips; also in Leucorrhœa, deficient, suppressed, or irregular menstruation.

DIRECTIONS.—Add the contents of this box to one pound of *white* sugar, and pour on it half a pint of hot water, and stir constantly till all is dissolved; then raise to the simmering point. This syrup when prepared should measure just *one pint*. If it does not, then add enough whiskey or diluted alcohol to make the pint. Keep it in a cool place; shake the bottle before using.

DOSE.—From a half to a table-spoonful three times a day, either before meals or two hours after, as may best agree with the stomach.

NUMBER 22.

CONSTITUTIONAL ALTERATIVE.

This compound is prepared with special reference to its action upon the blood, the absorbent vessels, the muscular system, and sero-fibrous structures immediately surrounding the joints, the heart, the brain, the lungs, and the abdominal viscera generally. It is an anti-rheumatic remedy of great efficacy, and may be employed in every stage of that disease. I have had much experience in the use of this remedy, and know its adaptation to all rheumatic and neuralgic diseases.

From the nature of the peculiar *tissues* it operates upon, its use in many other diseases will be readily inferred—in dropsy of the limbs especially, also of the abdomen and chest. It is a specific for Chorea, or St. Vitus's Dance, and in very many nervous diseases. In the early stage of consumption and bronchitis, of asthma and scrofula, this will be found a safe and efficacious remedy. It is really just what it is called—a *constitutional alterative*. Patients should remember, however, that medicines do not affect the human system mechanically, and that they must be used a sufficient time to produce the change from disease to health. It often requires more time and medicine to get the system in a condition to *begin* to improve, than for the full recovery afterward.

It is well known that much of the sufferings of females attributed to falling of the womb is really *rheumatism* of the womb, and that neuralgia more frequently attacks

that organ than any other disease; hence much of the suffering experienced by females in the back and region of the womb is from these causes. In all well-marked cases of this kind this number may be employed.

DIRECTIONS.—Put the powder into one pint of diluted alcohol (which is alcohol and water *equal parts*), and let it stand eight or ten days, shaking it frequently, but not when you use it.

DOSE.—One teaspoonful three times a day, in water.

NUMBER 23.

WASH FOR NIGHT-SWEATS.

This remedy was prepared in accordance with *new views* of the cause of what is usually termed “night-sweats”—a profuse colliquative perspiration supervening upon the advanced stage of Consumption, and commonly attending the stage of debility in every constitutional disease; and occurring during sleep, whether at night or day. Night-sweats have generally been treated by internal medicines of the most powerful nature, which often not only fail to check or remove it, but injure the coats of the stomach by being too long continued. Mineral acids never, internally or externally used, are reliable, prompt or permanent in their effect. I give no internal medicine for this peculiar affection. The contractile power of the cutaneous exhalents (or pores in the skin) is merely relaxed—admitting an increase in the flow of the watery part of the blood

through them. With this is evaporated a vast amount of animal heat which the vital forces at this stage are inadequate to supply; and consequently rapid prostration ensues. The indication in these cases is to strengthen the skin, contract the pores to nature's standard of elimination, and restrain the serum of the blood and animal heat within the system to aid in performing the function of life.

In No. 23 we have a specific for "night-sweats." Never has it been known to fail when properly and perseveringly used. I believe that it so effectually protects the life-fire and life-water of the system that it would prolong or add from three months to a year to the lives of those who are *incurable*.

DIRECTIONS.—Dissolve the powder No. 23 in one quart of rain-water, and bathe or sponge the entire body, rubbing briskly, every six or eight hours, according to the urgency of the symptoms, until perspiration subsides. The surface needs only to be wet—more than this is not needed: it should be applied while the patient is covered in bed, to prevent chilliness, and any time, even when the patient is sweating; nor ought the surface to be wiped at all after the bathing.

NUMBER 24.

ABSORBENT COMPOUND.

The general properties of this compound are like No. 22, but it is more especially designed for the affections named under that number which are attended with fever

or evident inflammatory action. All the remarks made under No. 22 are applicable to No. 24, with this exception, that the former is intended for the more advanced stages, when there is great debility, and the latter for more *recent* cases, in which there is a febrile and inflammatory condition of the system. There is no class of medicines which so often disappoint the patient and physician as those prescribed for dropsy, rheumatism, neuralgia, and kindred affections. But the reason of this is the fact that the system is not *prepared* for them. This is evident, as in dropsy if *diuretics* are given *before* the inflammation is subdued, and while the skin is hot and dry, the diuretic medicine *increases* the disease they were intended to cure. This is the reason why so many good remedies for the above affections have disappointed the patient. And I will state that many efficient preparations—those justly celebrated for curative virtues—have failed in particular cases, or perhaps done an injury, because they were administered *improperly*. This is a fact of great importance, and all will do well to remember it when they buy “patent medicines,” and such nostrums as are sent out to be used on the *judgment of the patient alone*. Here is a cough remedy, sent forth and recommended for *all* coughs and diseases of the lungs. Now, you will admit that a *dry*, hard cough, with fever, must require a very different medicine from a cough attended with *profuse* expectoration and great debility. The same principle holds good in regard to all diseases.

All my preparations are arranged strictly with reference

to the different stages of disease, and pathological conditions, and not for mere symptoms only.

DIRECTIONS.—Add the contents of the box to one pound of white sugar, and pour on it half a pint of hot water, and stir constantly till all is dissolved; then raise it to the simmering point. This syrup, when prepared, should measure just one pint. If it does not, then add enough whiskey or diluted alcohol to make the pint. Keep it in a cool place, and shake the bottle before using.

DOSE.—From a half to a table-spoonful three times a day, either before or after eating, as best agrees with the stomach. Begin with the *smallest* dose and increase it gradually, if it agrees with the stomach.

NUMBER 25.

GARGLES.

Gargling the throat is a useful mode of applying remedies in inflammation of the mouth, tonsils, palate or uvula and fauces, or that part lying back of the palate. Inflammation and ulceration are of frequent occurrence in these parts, inducing cough, laryngitis (loss of voice), and will invariably terminate in bronchitis and a fatal affection of the lungs, if they are permitted to progress or remain uncured. The frequency of these throat affections is truly surprising, and their absolute tendency to terminate in the manner above mentioned is a well-established fact.

Consumption originating in dyspepsia invariably manifests the *first* symptoms here. I have examined many thousands of cases, and in all, when the digestive organs were primarily affected, ulceration of the throat was present, and beginning there it rapidly extended from the continuity of surface, to the respiratory organs. This fact deserves the early attention of every person having dyspepsia. Ulceration may exist without the least pain, as we have found in repeated cases. When there is constant accumulation of phlegm in the throat, and an inclination to "hawk," or clear that part, not really a cough, but commonly termed "hemming," that symptom calls for immediate attention. Many cases that have terminated fatally, might have been saved had this simple suggestion been observed. Within the last three years I have examined many cases in whom this symptom existed, and yet the patients had paid no attention to it, nor would they believe that it was the seed of a fatal malady; or, if they did, they consoled themselves in the faith that there was "time enough yet." Say they, "We have no cough, only a little phlegm gathering in the throat, and that not much sore." Well, it will never *feel* much sore until consumption is established. The low form of inflammation in these parts is never productive of acute pain. We have known cases where the fauces were ulcerated as far as could be seen, and yet the patient felt no special soreness, and was not at all aware of the fact. If you would prevent the fruit, you must destroy the bud; it is an easy matter to change the channel of a rivulet, but who can dictate the course of the mighty river? We know that

these throat symptoms are small for so lengthy observation, yet it were wrong in the physician not to give the patient full warning of the ultimate tendency of disease, however mild the first symptoms might seem.

DIRECTIONS.—Put the powder into half a pint of rain-water, and sweeten with honey at the time it is used. Keep it in a cool place. Gargle two or three times daily about an hour after meals, and take no drink for some-time, so that it may adhere to the affected parts. It is not to be swallowed. In mild cases gargling once a day is enough.

NUMBER 26.

THROAT WASH.

This number is designed as a wash for ulceration of the throat and tonsils; for in these cases gargles cannot be used sufficiently strong to do any good. In applying this wash it is important to touch all the ulcers, and if they are up behind the palate, carry the swab up as far as practicable. This will cure all those cases of sore throat which the gargles are too weak to reach.

It is to be applied with a *swab*, which can be readily made as follows: Prepare a handle about the size of a pipe-stem and six inches long; wind a piece of old linen around the end and tie it securely; then ravel the edge to the extent of half an inch; dip this into the liquid when prepared, and brush over the diseased parts as above directed. If the ulceration be deep it must be applied more frequently than when the parts are only inflamed.

DIRECTIONS.—Put No. 26 into four table-spoonfuls of soft water and swab the throat as above directed once a day—or every second or third day. No rule for repeating the wash can be given better than this: that the *smarting* produced by one application should be allowed to subside before repeating it. Some cases require it daily, others not more than once or twice in a week.

NUMBER 27.

SPECIAL ALTERATIVE.

This number is alterative, anti-periodic, and tonic. It supplies a *desideratum* in medicines for certain types of ague, intermittent neuralgia and skin diseases. It is best suited to third-day agues and neuralgia that comes on at certain periods, whether the interval be longer or shorter. For all these affections this is a valuable remedy; also for certain forms of disease of the skin, especially those attended with a *scaly* eruption, called Leprosy, and for a similar eruption produced by constitutional syphilis, and in the rheumatism of the latter class of patients.

DIRECTIONS.—Dose for chronic ague and neuralgia, from 10 to 16 drops three times a day for one week; then omit it a week, and take again if necessary. For *skin* diseases it may be used two weeks at a time; then omit four days and take again.

It must always be taken half an hour or so *after* meals, in a wine-glass full of sweetened water, and the bowels kept open with No. 12 pills. Avoid the use of vegetables

and acids, and omit the medicine if pain in the stomach or derangements of the bowels occurs, or pain in the head, or any unusual nervous symptoms. After four or five days it may be used again.

NUMBER 28.

LIFE ELIXIR.

Many important indications are filled by this number ; it approaches as near a catholicon as any one compound can. It is one of the four great liver and stomach remedies peculiar to the pathogenetic system. This number operates with great certainty in that class of cases wherein the liver does not secrete a sufficient quantity of bile. Such patients become very pale, or have a dingy yellowness of the skin, which is dry and rough, also great derangement of the nervous system, as the legitimate effect of this inactive state of the liver.

I have used this remedy for many years, and speak from positive knowledge of its virtues in all obstructions of the liver and torpidity of that organ, in jaundice, in dyspepsia attended with coldness of the hands and feet, and languid circulation of the blood, and deficient nervous energy of the system ; also in flatulency of the bowels, and constipation from debility of the muscular coat of the intestines. It acts upon the kidneys and skin, and is therefore beneficially used in dropsies dependent upon disease of the liver.

It is a valuable remedy in dyspepsia unattended with "heart-burn," or a hot, burning sensation of the stomach,

and in irregular, suppressed or painful menstruation. Weakly persons, having cold feet and hands, a languid circulation, and loss of the natural energy of the body and mind, will find prompt relief from this preparation. Patients have repeatedly told me that not only the above symptoms, but that peculiar *confusion* of mind, loss of memory and irritableness attending diseases of the hepatic and digestive organs, were promptly and permanently cured by No. 28.

DIRECTIONS.—Put the powder into one gill of diluted alcohol (which is water and alcohol, *equal* parts) and let it stand one week at least, and two weeks would be better, shaking it frequently, then strain it slowly through flannel.

DOSE.—From one-half to a teaspoonful three times a day before meals, in water. If any sediment is found after straining, that should not be used. Patients who have piles should not use it while they are inflamed.

NUMBER 29.

ANTI-SPASMODIC PILLS.

In this pill we have remedies that act directly upon the nervous system, and are especially designed to meet those symptoms arising from an irregular distribution and generation of the nervous fluid. This fluid or substance (by whatever name called) is subject to the same defects, or changes in its distribution, as the blood; and at times may

be generated in increased, at others in deficient quantities—the great nervous centres not acting in harmony, or, from irritation, with increased vigor, giving rise to numberless painful, annoying, and distressing symptoms, or sensations. Spasms, or various forms of fits, are thus produced.

To equalize or harmonize the distribution with the generation, or production of this fluid, is the single aim of this preparation. In every affection, therefore, wherein nervous symptoms predominate, these pills form an essential part of the treatment. Hence, in every form of nervous disease, in neuralgia, whether of the head, stomach, back, or womb, and nervous pains of all parts, these pills are indicated; and especially in convulsions, spasms, or fits, hysteria, rheumatism, or pain attending any disease. I do not claim for these pills a specific power over epilepsy, because cases of long continuance are known to be but little benefited by any medicine. These pills are often used with great benefit in connection with, or while taking, other remedies, and, like No. 36, I often prescribe these to control the nervous symptoms while the patient is using other medicines.

There are also many cases of disease, when tonics are clearly indicated, yet from the excessive irritability of the stomach, or morbid sensitiveness of the nerves, tonics cannot be borne. This fact fully accounts for the frequent remarks of patients that such or such remedies do not agree with them, etc. Therefore, in cases of great irritability, I give these pills for a week or more, before beginning

with other remedies, and even then continue them for a time longer. They assist the action of other remedies.

DIRECTIONS.—Dose, *one* pill two or three times a day, according to the case. When given with other medicines the dose will be stated on the bill of directions. Dose, in neuralgia, epilepsy, and continued pain, *one* pill three times a day, omitting them when the pain is relieved.

The dose of No. 29, that is put up in vials, is from 6 to 10 drops two or three times a day, before meals, in a wine-glass full of sweetened water.

NUMBER 30.

LITHONTRIPTIC COMPOUND.

Urinary *calculi*, or gravel as it is commonly called, has, under previous modes of treatment, proved very intractable. I have fully investigated the treatment of these affections and have combined, in the Lithontriptic Compound, agents which not only dissolve the smaller calculus, but is intended to fill that important indication of *preventing its formation*.

The two indications in the treatment of “gravelly diseases” are met by this remedy. By its primary actions upon the digestive organs, it produces such changes in the chyle and blood as to prevent or remove the tendency to the formation of gravel or calculus in the hepatic ducts or gall bladder, as well as in the kidneys, and urinary bladder. And secondly, by reason of its diuretic properties, it is brought in contact freely with those concretions,

wherever they may exist in any portion of the urinary organs. This number, then, becomes a very important remedy as a *diuretic* to relieve the pain and difficulty in passing the urine; also in chronic irritation of the inner coat of the bladder, ureters, and kidneys, as well as in dropsy and certain diseases of the stomach and liver.

DIRECTIONS.—Add the contents of the box to one pound of *white* sugar, and pour on it a half pint of hot water, and stir constantly until all is dissolved; then raise to the simmering point. This syrup, when prepared, should measure just *one pint*. If it does not, add enough whiskey or diluted alcohol to make the pint. Keep it in a cool place; shake the bottle when taken.

NUMBER 31.

ANTI-DYSPEPTIC POWDER.

Acidity of the stomach—a frequent rising of sour, acid, *gas* or *wind* from the stomach—is a general, if not a universal attendant upon dyspepsia. The most that has been aimed at or accomplished, in treating the symptoms, is merely neutralizing the acid by the use of alkalies, such as soda, lime-water, lye from common ashes, etc. They afford a present relief, but never effect one cure, and their continued use inevitably injures the coats of the stomach. The most unyielding cases I have treated were such as had made free use of soda or alkalies in some form. Here let me remark, that any person, physician or not, who prescribes or advises the use of soda in any form for this

sympton, *knows nothing about treating the disease*; for it only neutralizes the acid, and has no power to prevent its re-accumulation. No. 31 contains no alkali or soda, yet it has the peculiar power of preventing the excessive generation of acid—this is a *cure*. Both Nos. 14 and 31 possess the property of curing acidity of the stomach, and both will move the bowels slightly. I do not think it possible for a person to have a sour stomach while using either of these remedies, unless they gorge that organ, and eat as long as food “tastes good.” “Stuffing” a weak, irritable stomach, is a sure mode of defeating the action of medicines, and an infallible means of perpetuating the disease. It is the habit of some persons not only to *fill* the stomach, but, to use expressive, vulgar parlance, literally *stuff* and *cram* it, as if they were stuffing a wool-sack. Not only this, but if the appetite flags, it must be, like a weary beast of burden, coaxed, whipped, or spurred up to the same labor that it is capable of performing in its refreshed and most natural state.

A little food, well digested, affords the system more support than a larger quantity which must ferment and become sour. In this state it acts as a local irritant on the already inflamed coats of the stomach. In this country but few people *starve* to death; but it must be admitted that very many *eat* themselves to death. Our table habits are more like the burial of a cholera patient, in silence and in haste. The table is not so sacred as to be profaned by whole-souled, innocent mirth, nor the occasion of eating so dignified that the roguish dimples on the cheek of laughter should be strangled into compliance with puritan-

ical gravity. Who ever saw a cheerful dyspeptic? No one. The right kind of hilarity and mirth are as important in their effect on the mind and stomach as *exercise* or *rest*.

But this number has a more extended use as a medical agent. It is very useful in chlorosis, and all forms of debility, and paleness, or "thin blood," and in certain cases of neuralgia, and in such cases as require a general, invigorating treatment.

All of the *pathogenetic* medicines are prepared with special reference to *pathological* conditions. One preparation is no more suited to all the stages of dyspepsia than is a physic or an emetic to *all* the *stages* of bilious fever, simply because such medicines are usually required in the first stage. No. 31 is indicated in the more obstinate cases of stomach affections where there is persistent acidity, a nauseous taste in the mouth, fetid breath, obstinate constipation, with bloating of the stomach and bowels.

DIRECTIONS.—Take from a half to an even teaspoonful three times a day, in cold water, about half an hour before meals.

NUMBER 32.

BLOOD PURIFIER.

In the preparation of this scientific compound, the greatest care and most diligent research has been had in regard to the nature and treatment of scrofula. Heretofore there has been no safe and reliable remedy offered to the public

for this obstinate and so generally fatal disease. The scrofulous constitution is generally at the foundation of constitutional and hereditary consumption. Physicians, as well as patients, have long been satisfied of the inutility of the common remedies in the treatment of this disease.

In the preparation of this compound the particular and varied conditions of the scrofulous habit have been thoroughly studied, and I am confident no combination is so well calculated to correct the diseased humors of the blood as is 32. It is truly a constitutional renovator and affects every emunctory of the body in addition to its direct alterative effect upon the glandular system, producing the absorption of glandular tumors and enlargements, and removing any inflammatory action that may exist there. To adapt my language to the more clear understanding of patients—it purifies the blood, and prevents those morbid changes which give rise to the local manifestations of this dreaded and obstinate malady. In all diseases dependent upon humors in the blood, no matter from what cause produced, No. 32 is superior to any other compound ever proposed as a remedy.

This number is indicated in every form of scrofula, and in consumption arising from that diathesis, tubercle of the mesenteric glands, in every form of cutaneous eruptions, or disease of the skin—in blotches or pimples on the face—ulcers—scaly affections of the surface—and no remedy has a more beneficial effect upon the blood. In all cases requiring a constitutional alterative with an especial reference to the glandular structure, it is a safe and reliable

remedy. In order to obtain its full effect, it should be continued for several weeks, or even months.

DIRECTIONS.—Add the contents of the box to one pound of *white* sugar, and pour on it *half* a pint of hot water, and stir constantly until all is dissolved; then raise it to the simmering point. This syrup, when prepared, should measure just *one pint*. If it does not, then add whiskey or diluted alcohol enough to make the pint. Keep it in a cool place; shake the bottle when taken.

DOSE.—From a half to a table-spoonful three times a day, about two hours after meals, or before meals, if preferred, beginning with the smaller dose.

No. 32 compound is a different preparation for the same diseases, and is prepared and taken in the same manner as above.

NUMBER 33.

PILE OINTMENT.

No chronic disease (not immediately dangerous) is more troublesome and obstinate than piles, whether of the bleeding, "blind," or external varieties. The difficulty in curing these hemorrhoidal affections may be inferred from the great variety of remedies which have been recommended and in their turn been found useless. Without entering into the special details of the effects of my remedies for this disease, I will say that no better are put up. But no matter what remedies are given, or applied,

without due attention to the regular action of the bowels, no remedy will do more than afford present relief. Physic and constipation both irritate the piles.

First. No. 33, A, is designed for irritable piles, when there is great pain in going to stool, with slight discharges of blood, great external soreness just at and within the margin of the anus, either with or without tumors in those parts. This number is also an efficacious remedy for all external sores, superficial ulcers, and abrasions of the skin—also for salt-rheum and eruptions of every kind.

DIRECTIONS.—Apply a piece of this ointment, about the size of a large pea, once or twice a day, introducing it well up.

No. 33, B, is especially designed for cases of great relaxation, when the piles “come down,” or protude, and remain in this situation after the stool. This remedy may be applied when the piles are thus protruded, or down, after which they should be returned to their natural position. They must not be allowed to *remain down*, at any time. This pile oil corrugates the part, preventing the piles from protruding, and is also a specific for any form of hemorrhage from those parts. It may be applied once or twice a day, just enough to oil the part affected.

The diet in these affections should be rigidly insisted upon. Rye bread, or rye mush and molasses, is not only a proper food, but is also a medicine, as any one will be

convinced, if they try it. The preparations of No. 33 will cure a large proportion of all forms of piles, and are the best remedies ever offered to those afflicted with that disease.

NUMBER 34.

ANTI-DYSPEPTIC AND ANTI-SPASMODIC PILLS.

Chronic irritation or inflammation of the stomach (which is the true cause of dyspepsia) may result in ulceration of the villous coat or mucous membrane of the stomach, of the second stomach or duodenum, and extend to the alimentary canal. As another result of irritation, we have a peculiar symptom usually called "water-brash," which is characterized by a sudden gush of hot, sickish fluid from the stomach occasioning sickness and vomiting. It generally comes on either at or shortly after taking food, and the nausea induced causes the patient to vomit what food he may have taken. The patient becomes weak and pale, with many other symptoms of derangement of health merely from deficient nutrition. More or less disease of the liver and stomach attend this affection, and dyspepsia is almost invariably present, with constipation of the bowels.

The cause of "water-brash" is a weakened and irritable condition of the mucous follicles, situated in the mouth, throat, and stomach. The chemical constituents of the secretion are also changed, being thin, watery, and deficient in the compounds of sodium. The stimulus of

the food causes these glands to throw out their contents suddenly, and in too large quantities. To cure this affection, the mouths of these glands must be corrugated—closed within nature's limits. Many have failed to cure this disease because they did not understand its pathology or cause. The medicine I prescribe (No. 34) for this symptom acts directly upon these glands, and very soon checks the gushing out of this diluted secretion.

This number also has anti-periodic properties and is, perhaps, more reliable in epilepsy or "falling sickness fits" than any one we possess. I have much confidence in their efficacy in such cases, having had much experience in their use.

DIRECTIONS.—Dose, one pill night and morning for two weeks; then, if the symptoms are not fully relieved, take one at noon also. For epilepsy, take one night and morning for one month.

NUMBER 35.

BLOOD TONIC.

This number is designed for loss of tone of the stomach, unattended by irritation. It improves the appetite and aids digestion, and invigorates the general system. These drops destroy acidity and strengthen the stomach and nerves—improve the natural functions and enrich the blood, though they are not so well borne when the tongue is "furred," or the stomach tender upon external press-

ure. They are especially indicated in the "whites," chronic irritation of the urinary passages, and in that form of chronic diarrhœa not attended with pain. Also in *chlorosis* and *anæmia* of females, deficient menstruation or obstruction of the courses. In all such cases, No. 35 is a very prompt and efficient remedy. Patients who are pale, feeble, nervous and dyspeptic will often find such symptoms entirely removed by this number alone.

DIRECTIONS.—Dose from eight to twelve drops three times a day in a wine-glass full of sweetened water. For chronic diarrhœa, gleet and irritation of the bladder, and bloody urine, from four to eight drops may be taken, three times a day.

NUMBER 36.

ANODYNE PILLS.

These pills hold an important rank in treating some forms of disease. They are not intended as an independent remedy, but to be given with other remedies, to qualify their effect on very weak and irritable stomachs. It allays irritation, quiets pain, and in a great degree controls those restless, anxious, and disagreeable nervous symptoms that attend dyspepsia and liver affections. They relieve headache, and when taken at bedtime, procure sleep. These pills never move the bowels, nor sicken or distress the stomach, but may be used to remove those very symptoms. Whenever a medicine is required to relieve pain, or quiet the nerves, this number

may be used for that purpose. These pills, therefore, are an important auxiliary in the treatment of a great variety of diseases, and as they do not constipate the bowels, are a very desirable anodyne.

DIRECTIONS.—Take from a half to a whole pill once, twice, or three times a day, just as the symptoms for which they are given are controlled by them. They may be dissolved readily in a little warm water if the patient prefers. The numbers 14, 31, and 28 generally are materially assisted by this pill, given either with each dose, or only at night and morning.

NUMBER 37.

PIMPLE WASH.

This is expressly designed for pimples and blotches on the face and hands, or any part of the body, but *never* to be used internally. The contents of the vial No. 37 may be added to one pint of rain-water, and a little piece of sponge dipped in it, and the skin slightly moistened with it at night, and oil or sweet cream applied to the part in the morning. If the eruption be extensive, only a *part* of it should be wet at a time; when that is cured apply to another part. This number will cure “scald-head”—all scaly eruptions, erysipelas, salt-rheum, etc.

DIRECTIONS.—Put the contents of the vial into one pint of pure, soft water and use as directed above.

NUMBER 38.

GRAVEL DISSOLVENT.

This number is designed expressly for diseases of the urinary organs, attended with gravel or calculous deposits, whether in the biliary ducts, kidneys, ureters (those little tubes which carry the urine from the kidneys to the bladder), or bladder and urethra. But it is applicable to only one form of gravelly disease,—that is of red, or brick colored variety. In such cases, if the vessel be allowed to stand six or twelve hours, the urine then being slowly turned off, and the vessel being allowed to dry, the sediment remaining will look *reddish*, and feel like fine sand, when the finger is rubbed over it. Cases of this kind require No. 38. It not only removes the gravel, but the effects of it upon the mucous membrane of the urinary passages, and the pain in discharging the urine.

DIRECTIONS.—Put the contents of the vial into one pint of water, and keep it well corked.

DOSE.—A table-spoonful in a tumblerful of water-gruel three times a day. Rinse the mouth well after each dose.

NUMBER 39.

ASTHMATIC MIXTURE.

Although many other numbers will be efficacious in the treatment of Asthma, yet, No. 39 has been prepared with

particular reference to the radical cure of that affection, and in connection with inhalation is the general treatment of this disease. It is especially intended to relieve the distressing symptoms attending a paroxysm or a sudden attack of asthma. It relieves the spasm, promotes expectoration, induces perspiration, allays the cough, and quiets the pain.

DIRECTIONS.—Pour on to the *powder* marked 39 one pint of boiling water, cover tight and let stand three hours, then boil to one half and strain by expression—then add diluted alcohol sufficient to make just a *half-pint* by measure when prepared. Keep it well corked.

DOSE.—One teaspoonful three times a day.

No. 39 in the *vial* is a different medicine for the same disease.

DOSE.—From 15 to 20 drops, in half a glassful of sweetened water, three times a day, before meals.

NUMBER 40.

CARMINATIVE MIXTURE.

Sick-headache is a very common and painful affection, for the speedy cure of which this number is particularly designed. It is supposed by many that this disease cannot be permanently cured, but the faithful use of this number will convince any one so affected to the contrary. I believe it to be as near a specific for sick-headache as is ever obtained in medicine.

When sick-headache is connected with dyspepsia or derangement of the liver and stomach, and constipation of the bowels, as is generally the case, a regular course of medicine is necessary to insure a perfect cure. This number is only intended to arrest the disease at the time of attack.

DIRECTIONS.—Put this powder into a half-pint of good brandy, or diluted alcohol, and let it stand four days, shaking it occasionally.

DOSE.—One teaspoonful, to be taken in a little water as soon as the *first* symptoms of the disease are felt, repeating the dose in one or two hours, if necessary. This number will also be found to promptly relieve pain in the stomach, in dyspepsia, caused by gas or “wind,” called flatulency; also acidity. To relieve these symptoms, a dose may be taken at any time.

NUMBER 41.

NERVE TONIC.

There are certain conditions of the system where the nerves of organic life appear to have lost to a degree their power of action, or are subject to irregular action. There does not appear to be any actual disease of any organ, yet the function of one or more of the internal organs is not performed. There does not seem to be sufficient nervous *force* to produce a *harmonious* action of the various functions of the body. The cause of this is, a want of tone or force in what is called the ganglionic system of

nerves. The nerves supplying the stomach may be thus affected, producing dyspepsia—or it is more frequently the effect of dyspepsia.

Constipation of the bowels of the most obstinate character is produced by this want of tone in the nerves which supply their muscular structure. Epilepsy also depends upon an irregular action of the ganglionic centres, for upon no other hypothesis can that mysterious disease be explained in many patients, as well as many other forms of spasmodic diseases. Impotency of the male organs of generation is referable to the same cause; also incontinence of urine, or inability to hold the urine.

From this brief explanation of that portion of the system which these pills are designed to affect, it will be seen that they will constitute a very important part of the treatment in many affections.

These pills are indicated whenever the symptoms are referable to the above cause, such as epilepsy, neuralgia, some forms of dyspepsia, rheumatism, impotency, constipation from debility of the muscular coat of the intestines, weakness in the bladder from the same cause, and in all cases of palsy or paralysis not depending on lesions of the brain, and in spasmodic asthma.

DIRECTIONS.—Dose, one pill at night and morning. If headache occurs, omit two or three days, then take them again.

NUMBER 42.

SPECIAL COUGH SYRUP.

There are two conditions of the respiratory organs attended with cough which require a special remedy therefor, and which the usual remedies fail to reach. The first is a form of bronchial irritation including the *trachea*, or wind-pipe and the throat, which causes a frequent, sometimes an excessively hard, spasmodic coughing, yet there is but very little raised or expectorated. The character of the sputor is a thick, light tenacious or "stringy" mucus. It is just that kind of secretion observed in patients who are getting over the whooping-cough. Patients call it an "aggravating cough" because they cough so very hard and raise but little. It is really a spasmodic cough; it often attends bronchitis proper in some of its stages, and is the very affection I am describing in the latter stage of whooping-cough.

The second condition referred to is when the expectoration is thin, muco-purulent and very *profuse*, as in the advanced stage of consumption. In these particular conditions attending disease of the respiratory organs, this number is indicated and in no other.

It may be given as a specific in whooping-cough after the more acute stage has passed, generally from the fourteenth to the eighteenth day.

DIRECTIONS.—Put the powder 42 into half a pint of brandy or pure rye-whiskey and add half a pint of strained honey—shake the bottle till it is well mixed. If the pow-

der does not fully dissolve, sit the bottle into warm water where it will heat to the simmering point. Shake the bottle when used.

DOSE.—From a half to a table-spoonful three times a day. If the cough is spasmodic, a little of this taken upon the tongue, even half a teaspoonful at any time, will stop the cough immediately and relieve that peculiar “tickling in the throat,” as patients express it, in such cases.

NUMBER 43.

DIABETIC POWDER.

For particulars concerning the disease known as diabetes, reference may be had to that article. This number is especially indicated in the above affection and should be taken with a large quantity of loaf-sugar, which may be either eaten or dissolved and used as syrup with the food.

It is also indicated in gravel or urinary calculi and in chronic irritation of the bladder.

DIRECTIONS.—Put the powder 43 into half a pint of hot water, and add one pound of loaf-sugar; stir till dissolved, and just raise to the boiling or simmering point.

DOSE.—One table-spoonful three times a day, in a glass of cold water-gruel.

NUMBER 44.

COMPOUND CATHARTIC PILL.

In the treatment of some forms of chronic, and generally in acute diseases, an active anti-bilious physic becomes necessary. In cases of liver complaint, with frequent headache, a furred tongue, and feverishness, a cathartic which acts especially upon the liver, but is not drastic, is productive of great benefit. The above pill is just such a medicine. I have prescribed it for twelve years, and fully believe it the most effective cathartic pill that has ever been prepared. It operates without griping, and does not leave the bowels costive. For a general family medicine it is superior to any in use. These pills may be used at any time during the treatment, when the symptoms require a physic; but all other medicine should be omitted at night, when these are taken, and also the *next* day after, nor should a full meal be taken for one or two days. The *curative* effects of a cathartic are often utterly defeated by eating hearty food, or taking a *full* meal too soon after a passage. Either let medicine alone or give it a chance to help you. The food, on the day of the physic, should never exceed a bit of plain toast and a cup of tea, and very plain and spare diet only should be used for two or three days. The observance of this rule *once* will establish confidence in their usefulness.

These pills are safe, proper, and always indicated in threatened attacks of bilious fever, ague and fever, and

will not interfere in the least with the subsequent treatment of fevers of any type.

DIRECTIONS.—Dose, as physic, from 1 to 3 pills, according to the known habits of the patient, some requiring more and others less to operate. Two, however, is an ordinary dose, taken on going to bed; and you may expect to get up early.

In gall-stone, take three pills, and in six or eight hours, take four table-spoonfuls of purified sweet-oil—or table-oil, as it is called. This treatment is efficient, safe, and reliable in such cases. It is the only reliable physic for the removal of gall-stones, or biliary calculi. These pills sometimes cause vomiting when the patient is very bilious; but that is no objection to them; for they are more effectual when nausea is produced.

NUMBER 45.

DROPSY PILLS.

There are two different modes of evacuating the water in dropsy. One is by remedies called diuretics, and operate through the kidneys; the other is by giving medicines which produce copious watery discharges from the bowels. There are several numbers intended to fill the first indication, particularly No. 24, and these pills are for the second. They are an active watery cathartic, and must be so to do any good. They sometimes occasion nausea or vomiting. That is no objection to their use.

Some patients think they cannot take pills. I have,

therefore, put up a liquid which has the same general properties as the pills.

In cases of dropsy of the abdomen and lower extremities, these pills are an indispensable remedy. When dropsy occurs in the chest, from disease of the heart, the drops are the most reliable.

DIRECTIONS.—Dose, one pill at bedtime. This will generally be found sufficient, producing copious watery stools. If, however, it does not operate by seven or eight o'clock in the morning, another may be taken. But two of the pills should never be used at one dose. The physic should be repeated once or twice a week until the "bloating" is removed—and resorted to again whenever the water begins to accumulate.

Dropsy mixture No. 45 is put up in *vials*, merely for the convenience of those who cannot well take pills.

DOSE.—From 20 to 40 drops, three times a day. When it purges freely, omit it for a few days and then use again. Take it in a glassful of cinnamon tea.

NUMBER 46.

ANODYNE EXPECTORANT.

This number is designed for those cases of bronchial and lung disease which do not admit the use of stimulating expectorants. This remedy, therefore, fills a very important indication: quieting the cough and soothing the inflamed membrane.

In those cases of frequent, hard, spasmodic coughs with but little or no expectoration, this number is a valuable anodyne, and gentle expectorant. It is specially indicated in coughs dependent upon irritation of the throat or larynx—also in common colds and catarrh—whooping-cough, and that weak and irritable condition of the lungs and bronchia following the measles.

DIRECTIONS.—Dose from 20 to 30 drops three times a day; the last dose to be taken at bedtime, if no other medicine is ordered for that hour.

NUMBER 47.

TETTER OINTMENT.

This ointment is designed for obstinate, eruptive diseases, unattended with acute inflammation; and is a reliable remedy for a class of cutaneous diseases, not generally cured by the ordinary treatment. Among these, is a species of “running tetter,” appearing on the face, about the ears and nose. At first, it is characterized by circumscribed roughness of the skin, followed by a discharge of a yellow watery fluid, attended with slight itching.

The scab gradually assumes a dark appearance, becoming raised, thick and rough. The matter changes in color; is thicker and more pus-like, and oozes out from beneath the scab.

If the scab falls off or is removed, a deep, unhealthy ulcer is seen beneath.

This species of tetter when not of “running” variety

is often by the unlearned pronounced a cancer, merely on account of its *dark* appearance.

It generally attacks persons of middle age or those more advanced in years.

This ointment will cure all cases of this variety of tetter. Also that obstinate and troublesome affection of children known as scald-head, and many other eruptive and ulcerative diseases of the skin, which it is not necessary to enumerate.

DIRECTIONS.—If there is a large surface affected, apply the ointment only on a part at a time. When that is healed or begins to heal, then apply it to another portion of the eruption; and so on in this manner till a cure is effected.

Should the part become inflamed, omit the ointment for a few days. The parts should be washed in warm water with castile-soap every night before the medicine is applied. But great care should be had not to irritate the part, or remove the scabs forcibly.

One application a day is generally sufficient, but when there is no particular irritation produced, it may for a few times be applied twice in the 24 hours. But once a day is enough for children.

NUMBER 48.

VEGETABLE ELIXIR.

The properties of this number are somewhat similar to No. 11, yet it is milder in its action and must be continued for a longer time to obtain its full effect. And though

milder in its operation it is not less certain in its results. It is always well borne by all classes of patients; nor can it disagree with the most delicate constitutions.

There are a class of patients that do not bear either tonics or stimulants; and anodynes afford only temporary relief, being deceptive remedies at best. In all such cases, No. 48 is a medicine of the first importance.

For a detailed description of the particular symptoms indicating the use of the vegetable elixir, refer to No. 11.

DIRECTIONS.—Put the powder into half a pint the best rye-whiskey, and let stand seven days, shaking frequently, then turn off the clear liquor for use; or you may strain it.

DOSE.—One teaspoonful three times a day, before meals, in a little water, sweetened if preferred.

Those patients who can not use even this small quantity of liquor, may prepare it thus: Put the powder into half a pint of boiling water—cover the vessel tight and let stand where it will keep warm, for four hours; then strain, and add half a pound of loaf-sugar and raise to the simmering point. It should measure just half a pint when prepared.

DOSE.—The same as above.

NUMBER 49.

HEALING OINTMENT.

This ointment is prepared for a certain class of superficial eruptions or diseases of the skin which do not admit of stimulating remedies.

Small rose-colored patches from the size of a sixpence to a quarter of a dollar frequently appear on the surface of the body, the arms or legs. They do not ulcerate, but the skin comes off in thin scales. The part looks red and inflamed; and is attended with a burning heat and intense itching. Sometimes these patches come upon the face or scalp, and is frequently called tetter, ringworm, etc., but it is really neither. The cause and nature of this eruption is entirely different from either of the foregoing diseases.

This ointment, conjoined with the internal use of 32, 21 or 27, will radically cure this affection in from four to eight weeks.

DIRECTIONS.—Apply the ointment at night to a few of the eruptions, and as fast as they heal, apply it to others, and so on till all the patches of the diseased skin are cured.

Washing the parts once a day with the alkaline bath will materially assist in the cure.

NUMBER 50.

ACOUSTIC BALSAM.

This number is designed expressly for diseases of the ear, and is used with the Acoustic Vaporizer, as is described under the article on deafness. The warm water converts the balsam into vapor, in which state it is conveyed to all the labyrinths of the ear, in a manner similar to inhaling medicines for disease of the lungs. In this attenuated

form the medicines are more directly and thoroughly applied to the nerves and diseased membranes of the *ear* than can be done in any other way.

The acoustic balsam readily dissolves the hardened, concrete "ear-wax" which gathers upon the surface of the tympanum, and often filling up completely the eustachian tube which leads from the ear through to the back portion of the nose, and connecting with the throat. Many cases of partial or total deafness are produced by these hardened concretions, the drum of the ear becoming incrustated with them, and so dry that air cannot reach the auditory nerve. This balsam has the peculiar property of dissolving this glutinous matter, and opens the pores of that membrane, inducing a healthy action. This is not only reasonable but is true, and has been fully attested by practice.

The acoustic balsam operates more promptly in curing ulcerations of the ear, or thickening of any of its membranes, than any other mode of applying remedies. In all curable cases it will be found a most valuable and reliable remedy; and even in cases where a perfect cure cannot be effected, it will so far restore the hearing that the patient can enjoy the pleasures of ordinary conversation.

DIRECTIONS FOR USING THE ACOUSTIC VAPORIZER.

1st. Fill the instrument about two-thirds full of water, at the temperature you use your tea or coffee.

2d. Put a piece of wet sponge in the top where the

holes are. The sponge should not fill the cup tight, and may be washed often or changed.

3d. Put on the sponge from 15 to 30 drops of the Acoustic Balsam, No. 50. Then put one end of the tube attached into the ear—take the end of the other tube in the mouth, and *blow* gently at first, then more freely as the medicine becomes evaporated.

The vapor may be used *once* a day in this manner, and from five to ten minutes at one time.

This process carries the warm, medicated vapor directly into the remotest windings of the ear, and through the eustachian tube, dissolving the “car-wax”—cleansing the membrane; and brings the medicine directly in contact with the diseased tympanum, or drum of the ear.

After the vapor has been used as above, from 2 to 4 drops of the Acoustic Oil, marked No. 51, may be dropped into the ear. When both ears are diseased, treat one on one day and the other the next. The frequency of the application will be given on your bill of directions.

The amount of No. 50, and the length of time the vapor is to be used, must to some extent be decided by the feelings of the patient. The time and dose given above should not be exceeded, and may be diminished, if unpleasant symptoms follow. Syringe the ear in the morning with some of the preparations given in the Appendix, as may be ordered.

NUMBER 51.

ACOUSTIC OIL.

This oil is designed exclusively for the ear, and to be used in connection with the acoustic vapor. It softens the dry membranes—opens their pores, promotes the natural secretions, and reduces all inflammatory action; and materially assists in restoring the sensitiveness of the nerves of the tympanum.

DIRECTIONS.—Drop into the ear from 2 to 4 drops at night, and syringe the ear in the morning with warm milk and water; or any of the preparations mentioned in the Appendix for that purpose.

Formulas are here given, also, to use when there is ulceration and purulent discharges; and will be directed on your bill of directions when their use is required.

NUMBER 52.

CATARRHAL FUMES.

Chronic inflammation of the membrane of the nose, particularly of the back portion, that opens into the throat and communicating with the frontal sinuses, is usually denominated Catarrh. It is a very frequent affection and always difficult to cure. Not that it is more obstinate in its nature than chronic inflammation in any other mucous membrane, but the remote situation of the affected part is such, that the means heretofore employed to apply the

remedies, have altogether failed to reach the seat of the disease.

Inhalation is the nearest approach to a reasonable and successful treatment. That, though well adapted to treating disease of the respiratory organs, has not proved as effectual in catarrh.

I have invented an instrument by the use of which medicine of greater strength can be carried to all the cavities and minute windings of the posterior nares, and sinuses therewith connected.

No. 52 is a new and peculiar compound, designed especially for the cure of catarrh. By means of the CATARRH PIPE, the medicines are converted into fumes or smoke, which, by a little effort of the patient, is also conveyed to the seat of the disease. And it especially reduces the inflammation—heals the ulcerated surface—destroys the nauseous fœtor of the discharges.

DIRECTIONS.—Put a thimbleful of 52 into the pipe, or enough to smoke about five minutes; apply a coal of fire, shut the cover, and turn the top *downward*; then draw the pipe as is done in smoking tobacco. Fill the mouth full of the fumes, close the mouth and blow the smoke out through the nostrils. In many cases it will be necessary to close the nose also, then make the effort to expel the smoke. This will force the fumes into the frontal sinuses and all the smaller cavities and retain the medicine *longer* in contact with the diseased surfaces. If the pipe is held, the top of the bowl upward, the medicine is liable to melt and fill up the opening at the bottom, thereby obstructing the passage of the smoke.

The amount of 52 to be used at one time, must be left in some degree to the judgment of the patient. Enough, however, to produce slight smarting is necessary to make an impression on the disease. From three to five minutes will be sufficiently long to continue the operation. A little practice with the instrument will enable the patient to decide upon these matters.

Many people suffer from catarrh for years, which finally terminates in catarrhal consumption. But this instrument, faithfully used, will radically cure nine-tenths of such cases in six or eight weeks.

BATHING.

THE occasional washing of the body is not only important for personal comfort and cleanliness, but is conducive to health. But even this, when *daily* practiced, without regard to the condition of the system and season of the year, is, or may be, injurious. I have known some who have carried water-cure principles so far as to be positively injurious.

I do not intend to discuss the question, however, and will only add, that bathing in *cold* weather is unnatural and unnecessary, and should only be practiced under the most favorable circumstances or conveniences for it. In warm weather it is necessary—a luxury, and beneficial. As a *medicine* it may be used at any time like other remedies, but I have observed that invalids are more improved

by it in warm than in cold seasons. Medicated baths are not liable to the ordinary objections by reason of their stimulating properties, which *aid* the system in the reaction essential to obtain their good effects. A few rules are important for the sick to notice in regard to the usefulness of bathing, and the propriety of continuing it :

First. The room must be sufficiently warm to prevent becoming chilly, and to avoid being exposed to a current of air.

Second. All of the clothing should not be laid off, but only expose that part to be bathed first ; for example, one arm then the other, then bathe one of the lower limbs, after that the other ; then proceed to bathe the breast and body.

Third. By bathing I mean simply *washing* the parts and then rubbing them dry, or till the skin reddens, and a glow of heat is felt over the whole system.

Fourth. The temperature of the bath for very feeble persons may be tepid, or the “*chill*” removed at first, and gradually cold water, or such as has been in the room over night, may be substituted. Cold water is more strengthening than tepid.

Fifth. Patients must use their own judgment to some extent in bathing. If the bath is indicated, and *is* doing them good, the body will become warm, and the patient will feel invigorated and refreshed after it. If it is followed by stupor or headache, it has either not been properly used, or is not benefiting the case.

SALT BATH.

To prepare this bath, add half a teacupful of salt to one or two quarts of rain-water, and stir till dissolved. This will last for several applications. Bathe as above directed.

This bath may be repeated once or twice a week, or every day if the feelings of the patient are improved by it.

The best time for using this or any other bath is in the *morning*, before the system becomes heated. But invalids may be governed by their own feelings from the effect it produces.

OIL BATH.

Take four ounces of pure olive-oil, four ounces of alcohol and one drachm of bergamot—mix and shake the bottle every time it is used. Wet or moisten a small piece of sponge with this mixture, then brush it lightly over the extremities and body, rubbing the surface well. But very little of this liquid is required at a time. Repeat the bath once a week.

The object of this bath is to supply the skin, when *dry* and rough, with an oily substance in imitation of nature, —to protect the sensitiveness of the skin from dampness, and to *prevent* the liability of taking cold, of which invalids, and especially those having lung diseases, so frequently complain.

ALKALINE BATH.

This bath may be readily prepared by adding a spoonful of soda or saleratus to one or two quarts of water. This is especially useful when there are pimples, eruptions of the skin, or a want of natural heat—also for local pains in the limbs and joints. Use as above directed for bathing.

MUSTARD BATH.

Add a table-spoonful of ground mustard to one pint of whiskey. Let it stand four days, then strain it.

This is intended only for a partial bath—to wash the arms, hands and lower limbs, and will generally relieve that *coldness* of the extremities so common in chronic diseases.

It may be used daily or less frequently, as the symptoms indicate.

PART III.

SYMPTOMS OR DIAGNOSIS

OF CHRONIC DISEASES,

WITH THEIR PATHOGENETIC REMEDIES.

PART III.

CONSUMPTION:

ITS CAUSE AND TREATMENT.

THE best talent in the medical profession for many years has been employed in studying the causes and elucidating the treatment of pulmonary disease, and at no period have such investigations been more faithfully, ably and patiently prosecuted than at the present. The abundance of such information, accessible to every reader, as well as the practical observations elsewhere made in this work, render it only necessary here to present a brief summary of general symptoms.

First. As I have said in the preceding articles, healthy blood will alone preserve the body in a state of health.

Secondly. Blood deficient in any of the elements of nutrition, or mixed with any impure ingredients, must produce a corresponding change in the health of the person.

Thirdly. According to Dr. Cless, Dr. Lewis, Dr. Latour, Dr. Dupasquier, Dr. Pereira, Sir James Clark, and Dr. De Vittis, and, in fact, every intelligent author who has writ-

ten upon Consumption, deficient nutrition is given as a prime cause of, or a universal attendant upon this disease.

Fourthly. Never, until Professor Liebig, of Giessen, Germany, directed his attention to animal chemistry, and laid the foundation for the only rational practice of medicine (see Preface to his work), was known the true mode of detecting and also of curing these changes in the gastric juice and bile; and for the truth of this remark, I refer to the Appendix of his work.

Fifthly. Consumption is fully developed in the system long before there is cough. Reader, bear this in mind, *long before there is any cough all the changes have occurred which produce the disease.* The blood is thin, deficient in red globules and fibrin, showing that the vital forces have lost their energy. The red globules, in healthy blood, are a hundred and twenty-seven, and the several stages of Consumption are marked by a regular decrease, till they descend to seventy-two. The blood, in this condition, cannot furnish fibrin or vitality, the result of which is a lower degree of organization, like half-ripe fruit: hence the softness of the flesh, wrinkling of the skin, pale or sallow hue, sunken eyes, and coldness of the extremities. All the new growths in this case (or the supply of waste), possess a lower degree of vitality, and a lower degree of organization, unnatural to the parts, and, when accumulated to a certain extent, still change in character, and, by accumulation, act as a foreign substance and local irritant. This change may occur in the nutrition of any part of the body. When it falls upon the lungs, it is called Consumption, and this matter of low organiza-

tion is called Tubercle. The same change occurs in the mesenteric glands and peritoneum. Andrel found Tubercles in the latter localities in every case of Tubercles of the lungs.

Sixthly. You will now see the reasonableness of my first proposition, that Consumption has its origin in indigestion, even in the stomach, from a change in the gastric juice and bile, which are the acknowledged agents in furnishing healthy chyme and healthy blood. The first indication of this change in the blood, is, in many cases, detected even by the fetor of the breath—the unnatural condition of the blood, undergoing the usual change in the lungs during respiration, gives out unnatural gases, which is the cause of the fetor. Reader, notice this fact, that a bad breath is a positive symptom, although the lungs may not become affected, in some instances, for several years. The bile acts mostly on the fatty substance of our food—the soda it contains being alone capable of dissolving the fat taken in our food, and preparing it for absorption. Persons often say, they eat heartily, but their food seems to do them no good; they still feel weak and faint, and sensible of failing strength. All these symptoms depend upon the above causes. Whenever these symptoms are present, it is at the peril of the patient if he allows them to continue; for time will as surely develop Tubercles in the lungs as the standard of health is allowed to sink from poor digestion, and deficient nourishment of the system.

Seventhly. Whenever Tubercles have been allowed to form, cough occurs, indicating the more serious stages of

Consumption. It is then, and during the subsequent stages of the disease, that Medicated Inhalation is an important remedy in the treatment. After *local* disease has manifested itself, it must be treated *locally*. At the same time that we direct our remedies to correct that condition of the system which has caused the local disease, at this stage, we have two diseases, in the room of one, to treat. Inhalation applies the remedy *directly to the part diseased*, as washes or ointments are applied to an ulcer or an inflamed surface. One cause of failure in treating internal lesions, or disease of the intestines, bladder and stomach, is, that we cannot apply our remedies directly to the parts affected; but the medicated vapor is carried to every air-cell in the twenty thousand square inches of surface which the lungs contain, mixed with three hundred and ninety cubic inches of atmospheric air, which they are capable of containing. Estimating eighteen respirations per minute, there will be three thousand six hundred square inches of medicated vapor brought in contact with the blood and surface of the lungs every ten minutes. The application of medicine by Inhalation is so reasonable, that it needs no further argument. In no other way can we correct or destroy the poisonous gases and putrescence which are continually mixing with the blood. The decay of animal tissues out of the body, are often the cause of malignant disease, but especially so when they mix with the fluids of the living body. No poison is more deadly in its nature than the blood of a dead person, or the secretions of a gangrenous sore, when mixed with the blood of another person.

Inhalation, adapted to the several stages of Consumption, is the only reasonable hope of relief, and connected with a thorough constitutional treatment, based upon the above propositions, will cure nine out of ten, even when the disease is in the second stage. Persons predisposed to Consumption will find the Pathogenetic remedies to afford prompt relief, and effectually prevent the occurrence of Tubercles. We say, *prevent*, because, as we have said before, the true cause of the disease exists long before the lungs are affected. See to it, then, you who are feeble, dyspeptic, having the symptoms above set forth, and be treated for the true cause before the lungs become diseased.

So varied are the premonitory and initiatory symptoms of pulmonary consumption, in different patients, that to point out all of the attending symptoms would be no less than a history of individual cases. The more usual and significant signs, those of which patients take notice, are such only as I design to mention.

By consumption, is to be understood a slow, gradual inflammatory action in the substance of the lungs, whereby the air is first obstructed in its circulation through them, which increases until there is no admission of it into the cells. The extent of this obstruction is often very small, perhaps not larger than a dime, and even less at first. The nucleus once formed, a like change takes place in the part surrounding this hardened or impervious portion of the lung which continues to extend in like manner till a large surface is involved. This change or hardening in

the air-cells is substantially the same, and its progress the same, from whatever *cause* produced.

This has usually been described as the first stage of consumption, but we regard it the second. The *first* stage consists of those *constitutional* changes which produce this *local* inflammatory condition of the lungs, for the local affection is the *result* of constitutional changes in digestion or the nutritive functions, which are very gradual in their approach, and may be operating for years *before* cough or expectoration announces that the substance of the lung is inflamed and the air-cells closed and hardened.

The *first* stage of consumption dates from the time the stomach fails to digest the *fat* or animal oils used in food, which deprives the system of one of its principal elements of support. Such being the case, the effect of this deficiency of animal fat explains the *very first symptom* usually noticed—that is, emaciation, and a slight feeling of weakness, with an uneasy sensation—not confined to any particular part—with an irritable condition of the system—not a fever proper, but what is generally called “feverishness.” Now, are not all of these disturbances of the general health just such as every person experiences, while restricted to a less amount of food than the system requires? Are they not such as invariably attend “short rations,” or starvation? Precisely so, and in nearly every particular; the only difference being that the famishing person does not eat the food at all, while the consumptive does, but from the impaired condition of the digestive organs it is permitted to pass out of the body unappropriated its to inourishment. Hence, we often hear it said

of certain invalids that they are not sick, but only "spleeny;" that they "*eat more than a laboring man.*" This fact proves our theory, for they eat like *starving men*, and are, physiologically, such. The system is, in other words, consuming itself. Hence, the emaciation of consumptive persons is caused by the consumption of the fat, which is deposited in the adipose tissue beneath the skin, and between the muscles, giving a full, plump figure to the body, and the failure of the stomach to keep up a supply. The correctness of this theory is further proved by the effect of Cod-Liver Oil; for, if the stomach has not wholly lost the power to digest oils (of which this is the most easily digested), patients very soon increase in weight and strength, and in the same proportion the fever subsides. Not only is this a true explanation of the symptoms, but a careful analysis of the blood proves the same point. It is evident, therefore, that Cod-Liver Oil, being so readily assimilated, supplies certain fat molecules, which are essential to the formation of nuclei of the fat cells of the tissues, which has the physiological power of coagulating the albumen around them.

The symptoms, then, in the first stage of Consumption, are, either a deficient or voracious appetite, with a consciousness on the part of the patient that his "food seems to do him no good." And, whether he eats much or little, the same feeling of faintness, weakness, "goneness at the stomach"—"a feeling of being neither sick nor well," by whatever name expressed—are often the only warnings given of the approaching disease. As these feelings progress, a feverish restlessness at night comes on,

with occasional headache, constipation, and a more manifest derangement of the digestive organs.

The first visible symptoms are a pale hue of the skin, attended with slight flushes of the cheeks, an evident softening of the flesh, and a strange susceptibility to atmospheric changes—or a feeling of having taken cold; hence, the patient says, “I take cold so easily, every few days.” But this is no cold (properly) at all; it is only the *successive steps* of the disease, in *approaching* the respiratory organs; for all slight inflammations in those organs will produce these very symptoms. Almost every consumptive is deceived precisely at this point or stage of his affection. Such attribute to an ordinary cold the symptoms which *invariably mark* the *progress* of this insidious and delusive malady.

There is often, quite early, more or less pain in the upper portion of the chest and shoulders, and at or near the margin of the short ribs, or, as some describe it to me, a feeling of pressure, weight, or heaviness, a “*tired feeling*,” with occasional shortness of breath, with irregular, or at times a rapid beating of the heart. Some say the feeling is like the gurgling of water in the side; others, a tightness, or rubbing sound and sensation. But the difference is not so much in the real condition of the parts, as in the mode of expressing it; for the sick sometimes do not really comprehend the language used to convey their ideas or feelings. The throat also becomes dry at night, the spittle frothy, with a slight soreness in the throat, and when examined, appears either pale and relaxed, or “*puffy*,” or quite red and inflamed, with a constant accu-

mulation of phlegm or mucus, and often ulcerated, looking rough and gorged, because the little glands are swollen and enlarged; the uvula (or palate) becomes relaxed, elongated, and there are occasional hot flashes passing over parts of the body.

At the same time there is either coldness of the feet and fingers, heat in the palms of the hands, with unnatural moisture, or a "burning sensation" in these parts.

These are some of the more general premonitory and initial symptoms and signs observed by patients *before* they apply to physicians. "Their symptoms were mild—did not suffer much pain, and really did not think their cases *sufficiently* urgent to require any treatment."

Then comes on a slight cough—dry—perhaps it can scarcely be called a cough at first—"hack," in the language of patients. This, even, often fails to arouse the person to a sense of the real nature of his case. But I trust that all such as may attentively read this little work, will be able to detect the early symptoms, and to understand their tendency and progress so as to arrest them while they are in a curable state. What has been usually called neglect or indifference in the patient is fairly attributable to his want of proper information in reference to his case.

When a cough is fully developed, with a corresponding *increase* of the above symptoms, the *second* stage is clearly reached.

TREATMENT.—To improve the condition of the liver and digestive organs, preparatory to constitutional treatment, give 10, 7, and 11; or such other numbers as the present

symptoms indicate. *Inhalation* should be used from the beginning in all cases. If the skin and eyes are yellowish, the urine scanty and high-colored, and the tongue furred, give No. 28 or 13, followed by 3 or 11. For the hot flashes, or fever and chills, give 17.

If the glands of the neck are swollen, or scrofulous symptoms are present, 9—32, or 32 compound, are the proper remedies. Should there be wandering muscular pains, and rheumatic complications, use 13 or 22. The debility attending this stage is best counteracted with 3, 11 and 17. The proper constitutional remedies are 9, 11, 13, 21, 32, 42 and 48, any of which may be used as the symptoms require. When expectorants are thought proper to be administered, 5, 8, 39 and 46 will be found the most valuable of any of that class of remedies. Several excellent formulas for the same purpose are also given in the Appendix.

The use of the salt bath is applicable in all cases where there is an increase of the heat of the body. Cod-Liver Oil *cannot* be dispensed with when even the first signs of emaciation appear, but should be used early in the disease. It should be taken in large doses, and persevered in for months, or even a year. A few weeks' use of this remedy will do no good; it must be used until the nuclei of *fat* molecules are fully restored. If there be much pain in *any* part, use No. 18, and when the throat is affected, inhalation, and gargling the throat with No. 25, are essential.

It is proper to state that tubercular consumption is rarely attended in this stage with *pain*; indeed, it is a

well-established fact that consumption may run its whole course without pain or even much cough; this has been abundantly proved by *post-mortem* examinations. But patients generally attach more importance to the *cough* than any other symptom, whereas it is the most deceptive of any. Merely quieting the cough is no indication of a general improvement in the constitution. A temporary subsidence of the cough is common, even to the natural course of the disease.

The second stage is characterized by frequent cough, and more or less expectoration of a frothy, or thick, tough phlegm or mucus. The former symptoms are increased—there is more fever—slight or quite hard chills—the digestive organs and liver are in most cases more deranged, and the countenance wears the unmistakable appearance of organic disease. The duration of this stage is variable—so also the first. The former or first stage may exist for several years—the latter, or second stage, for several months, or even one or two years, before it passes to the third and last stage.

From these remarks the reader will discover the true reason why consumption has hitherto proved so unmanageable; because medical aid is not procured until the first stage is fully past, and perhaps the second existed quite too long to prevent ulceration.

I have said nothing concerning certain physical signs—those sounds obtained by putting the ear to the chest—and also those which are heard by percussing, or tapping gently on the chest. This the patient is unable to do, as it requires great study and experience to obtain

sufficient knowledge of those sounds to apply them, or to interpret them truthfully. The scope of this work is confined to those symptoms with which the patient has to do.

So various and changing are the symptoms in the second stage of consumption, that I can but little more than give general directions for using my remedies, for they must be varied to meet the present indications of each case. The medicines are so arranged that each patient has the benefit of a change of remedies, as frequently as the pathological condition of the system may require. This is an advantage I have over other itinerant physicians, and one that no invalid will fail to appreciate.

In all cases the condition of the liver should be attended to, remedies for which may be found under their respective titles, and fully described, in Part II. of this work.

Generally, all derangements of the stomach, liver, and all mere functional disorders of the nutritive apparatus, may be effectually regulated by the use of some of the following numbers: 10, 14, 28, 7, 34. After that has been produced, or if those organs require no special treatment, the constitutional remedies, as given above, may be used at once. These must be changed and varied from time to time, so as to meet the changing features of the case. Chills and fever may be effectually controlled by 17 or 3. Pain, sleeplessness, and general unrest may be fully relieved by 29, 36, 6. For this purpose, one pill of *either* of those numbers may be taken at bedtime, and repeated once or twice during the day, if necessary.

The occurrence of diarrhœa will require the use of 6, 35, or some of the remedies mentioned in the Appendix,

for that purpose, All local pain or soreness about the chest, or elsewhere, will be promptly removed by the thorough use of 18. Even if there be no local pain, this number (18), constantly worn over a portion of the breast, will greatly facilitate the absorption of tubercles, or other engorgements of the pulmonary structure.

No. 23 will positively cure *night-sweats* if properly applied, and for a sufficient time. It may be used at any time, and several times during the day or night, until the sweating is suppressed; and it should be used once in the twenty-four hours, even for several weeks thereafter.

To arrest the emaciation, and to diminish the quantity of the expectoration, Cod-Liver Oil, in unison with Nos. 4 and 3, will be the most reliable of any remedy known. I aim to avoid eulogizing any particular medicine, but this peculiar combination merits more than a general notice. I have had extensive experience in its use, and can confidentially say that it is far more efficacious when properly prescribed and faithfully taken, than any other remedy in use. No. 4 increases its virtues, and 3 not only conceals the nauseous taste, but enables the stomach and absorbents to apply it directly to the nourishment of the body.

In all cases the general rule is to use but one number, or such as are prescribed *together* at one time—that is, during the day—and to continue them till they are *all* taken, or till the particular symptoms for which they are given are removed. But they should be so changed as to meet all the symptoms of the case.

THIRD STAGE.—This may be known by the presence of

the foregoing symptoms and the character of the matter coughed up. The local hardening spoken of has now become ulcerated and matter or *pus* formed, and cavities exist. The matter will be thick, of a bright straw color, and will *sink* in water. The fever now is regular; the hot flashes spoken of have developed their real nature; the night-sweats are more profuse; the chills recur regularly; there is diarrhœa, and great palpitation of the heart; the tongue becomes deeply *red* at the tip, and heavily coated further back; the throat is generally very sore, or even ulcerated—with a manifest increase of previous symptoms; and emaciation progresses rapidly. Physical diagnosis, or the various sounds of the chest are very important at this stage, in deciding upon the particular location and extent of the disease, but cannot influence the treatment, which is now very simple, viz: to nourish the system and invigorate the nutritive function, while inhalation is used at least three times a day.

The treatment of this stage will require a more liberal use of stimulants, tonics, and the most nourishing diet that the stomach will bear. Rye-whiskey, porter, ale, etc., may be taken daily. The white of an egg beat to a foam and mixed with a spoonful or two of whiskey is an excellent stimulant, and may be repeated once or twice during the day.

But so varying are the symptoms in different patients that I can give only a general outline of the treatment, and speak of the several numbers as a *class*, not as a speciality.

Among the following will be found a sufficient variety of medicines, if properly selected, to meet all the particular symptoms in each case: 3, 4, 11, 17, 21, 5, 8, and 42.

The tar pills, as directed in the Appendix, in muco-purulent expectoration, are a valuable remedy, especially in catarrhal and bronchial consumption.

I am often asked if *cavities* or *ulcerated* lungs ever heal? Dr. Bennett and other good authority say they do, and I have in many cases had evidence of the same fact. Even after the formation of cavities the disease may be kept in check for a long time. This remark is also true of the second stage, and to a far greater degree; even when we are unable to remove the hardened state of the lungs, and restore the air-cells, we may keep inflammation down, and defeat the exciting cause, retarding, perhaps, for many years, the ulceration of the part, and the formation of cavities.

OTHER VARIETIES OF CONSUMPTION.

There are other forms of consumption which, for convenience, we shall call *accidental* or *secondary*. These depend upon entirely different causes, and are of the most frequent occurrence.

1st. There are cases which result from acute inflammation of the lung—that is, the lung becomes hepatized, and although the patient recovers from the acute symptoms, yet the lung is in a situation quite similar to what I have described as the *second stage*. Ulceration finally takes

place, cavities form, and the same general symptoms supervene as in the other varieties, and the same general treatment is required. The case, however, is far more likely to recover than those which primarily depend upon constitutional causes.

2d. Other cases are the *result* of protracted Bronchitis, or common cold—the inflammation extending from the bronchial tubes by the continuity of surface, and when the air-cells become involved similar changes then take place as in the first variety of lung diseases.

3d. Local inflammation of the Larynx—the result generally of a common cold—may, and generally does, terminate in the same manner. In these cases there is obstinate *hoarseness*—a change, or even an entire loss of voice. This is denominated *Laryngial*, the other *Bronchial* consumption.

A fourth variety is the result of catarrh, long-continued, the disease *extending* by degrees through the respiratory organs to the substance of the lungs. A fifth variety begins in the fauces, the upper and back portion of the throat. Chronic inflammation of that part is followed by ulceration, and from the continuity of surface *extends* till, in like manner as above, the air-cells are reached. The former is called *Catarrhal*, the last *Dyspeptic* consumption, because catarrh and dyspepsia are regarded as the *exciting* causes.

Of the treatment and symptoms of these several varieties we shall speak under their appropriate heads.

CHRONIC BRONCHITIS.

This disease consists of chronic irritation, or sub-acute inflammation of the mucous membrane lining the bronchial tubes—that portion of the respiratory organs situated between the wind-pipe, or trachea, and the air-cells. A frequent, hoarse, distressing cough invariably attends this affection, and is characteristic of it. The coughing spells often continue till vomiting is provoked. In some cases, but very little matter is raised; the coughing is spasmodic and protracted. This is true of the first stage. In other cases there is profuse expectoration of a thick, tough, adhesive mucus, which the patient calls “ropy phlegm.” It is, in the first stage, about the color and consistency of the white of an egg. This invariably indicates bronchial inflammation. In the early stages, the general health is not much disturbed. More or less pain is experienced about the chest, with a peculiar tightness,—a hot or burning sensation is felt along the middle of the breast, under the breast-bone, and often considerable pain is complained of in that part, and in the sides and shoulders.

As the disease progresses, slight fever occurs, with night-sweats and chills. At this stage the lungs are frequently involved. The expectoration gradually assumes a yellowish color, becomes thicker, but is more or less surrounded by thick, tough mucus, as before spoken of. The voice, too, is early changed, becomes hoarse, or reduced to a mere whisper.

Constitutional disturbances do not appear so early as

in the other forms of consumption; still the liver, stomach and bowels often become affected, and require treatment. After the lungs are reached, the disease progresses in like manner, as before described, and like treatment is required. But while the disease is confined to the bronchial tubes, the mode of treatment is quite different, except *inhalation*, which is in all of these affections an indispensable auxiliary to other remedies.

TREATMENT.—Give *inhalation* in all cases, for that appears to have a more decided influence over *bronchial* inflammation than any other disease of the respiratory organs. No. 18 should be worn upon the breast and so changed as to keep up a continual counter-irritation until all pain and soreness are fully removed.

The cough will be controlled by the use of 5, 8, 39, 42, 46; and it is important to alternate these cough remedies with the use of the following constitutional alteratives: 13, 11, 21, 32 compound, and 9. The throat and fauces must be strictly attended to, as the chronic inflammation in those parts rapidly degenerates into a species of ulceration which is very difficult to heal. Swabbing the throat with No. 26 once a day, or even three times a week, will be found a reliable means of healing the ulcers, and of subduing the inflammation before that stage is reached. Gargling also is quite effectual in the early stage of the disease, for which No. 25 may be used.

When the liver is prominently involved select some of the following numbers: 10, 7, 28, 44. And all dyspeptic symptoms may be readily removed by any of these: 14,

36, 31, 11, 34, 3. The bowels must be regulated with No. 12, 41, or 44.

The rule is, treat the most important symptoms first, then the others in their order, remembering that the nutritive function is the most essential in the human system. For remedies to control special symptoms, reference may be had to Part II., of this work.

Whatever remedies reduce the inflammatory condition of the mucous membrane, will improve the case. One fortunate circumstance is, that the same treatment required for bronchitis is also the special treatment for loss of voice, or hoarseness.

Expectorants, properly so called, are never to be used in this stage, as they only increase the *amount* of secretion to be removed, and will increase the disease, just as physic increases the action of the bowels in diarrhœa. This is a new mode of practice, I well know; but it is reasonable to suppose that expectorants will act in this manner. The object is to *diminish* the secretion by directing, as far as possible, the blood and fluids *from* the part. Very much harm has been done by the too free use of this class of remedies, indiscriminately, in coughs. For example, a person has a *dry* cough; he will use expectorants, to "help him raise." Now that is the very medicine to increase the existing inflammation. Soothing, quieting, and alterative remedies would perhaps *prevent* expectoration from taking place. This is on the same principle that an active purgative may induce a diarrhœa.

CHRONIC LARYNGITIS.

This disease is becoming of frequent occurrence, as an individual affection. It generally, sooner or later, comes on during consumption and bronchitis, as the *result*, or a part of those diseases. But that form which I now propose to speak of, is a primary or original affection, where the larynx is first diseased. The *larynx* is that portion of the respiratory organs *wherein* the voice is produced. It is situated just within that cartilaginous substance which projects on the front of the neck commonly called "Adam's Apple." It is known by a partial loss of the power of speech. The patient is either extremely hoarse, or unable to speak above a *whisper*. The slightest change in the voice indicates a difficulty in these parts. This disease is often *mistaken* for bronchitis, and pronounced so, even by physicians. I am frequently applied to by persons who say they have *bronchitis*, when the affection is wholly *laryngial*. This mistake is not a fatal one, but it does in one important particular change the early treatment. *Laryngitis* requires the use of Nos. 9, 7, and 32, from the very beginning, and their continuance a much longer time—from six to eight weeks—while No. 18 is kept on the breast.

Chronic *Laryngitis* is seldom attended with much pain; there is a tired feeling at first, which, as the disease progresses, settles into more or less pain, in the upper part of the chest, shoulders and sides. Because of the absence of pain or suffering, patients are but little alarmed at first, and sometimes a strange indifference is manifested. But

the fatal—the invariably fatal tendency of this disease must not be concealed. Unless promptly arrested, it will terminate in *Laryngial Consumption*, and from one to two years is the average duration of this latter disease before death. As yet, but few physicians have learned how to treat it; there is really but one mode of correct treatment. A great variety of medicines are not called for. It has been regarded as a very unyielding affection, and truly it is, when treated in the usual way. But when submitted to my mode, I have found it quite obedient to medicine. If my system fails to cure it, no cure may ever be expected from any other.

If this disease progresses till the lungs are affected, then the usual symptoms of *Bronchical Consumption* are super-added to the *Laryngial*. Indeed, it becomes *bronchical*, and then *pulmonary*; hence it will be noticed that a great extent of surface is diseased before the lungs are involved. This fact accounts for the obstinacy of Laryngitis when it has existed for any considerable length of time.

TREATMENT.—The appropriate treatment of Laryngitis may be summed up as follows:—First, Inhalation; No. 18 constantly worn on the breast, changing the location when it becomes too sore to be longer borne. A piece of cotton or linen cloth, of sufficient length to reach twice around the neck, may be wet in beef brine, wringing it gently till the brine will not drip from the cloth, and placed around the neck, and then a flannel bandage, of *four thicknesses*, put over it. A piece of oiled silk is a great addition, as it effectually prevents escape of “steam” or vapor which

arises by the heat of the part. Unless the vapor is retained it will do no good. This may be applied every night till improvement is manifest.

In recent cases when there is not much debility, Nos. 9 and 7 are the principle remedies in connection with inhalation; and must be continued for several weeks. The improvement in all these cases is quite slow, and the patient never recovers the voice *by degrees*. It always returns suddenly after several weeks' treatment, during which time there is no particular change in the strength or tone of the voice.

Other numbers will also be required in the progress of these cases, such as 5, 8, 39, 32 compound, and 13, according to the symptoms.

During every stage the stomach, liver and bowels must be strictly attended to. The patient must strictly avoid *talking*—too much use of the vocal organs will effectually defeat the action of any remedy, as much as the constant use of an inflamed joint will keep up the inflammation. Cold, *damp* weather is equally injurious, and more; avoid walking or riding against a strong wind. Unless these restrictions are rigidly adhered to the remedies, which are fully adequate to cure, will fail. The patient, in all diseases, has a duty and a responsibility as well as the physician, but especially so in this disease. The temptation to converse is constant, and silence is almost unbearable. The blessing and pleasure of speech is not, nor cannot be fully appreciated until one is deprived of it; and in this instance it may be truly said :

“ Blessings brighten as they take their flight.”

As to diet and *exercise*, this must be left to the sound discretion of the patient. Riding or walking, when the weather is *dry* and agreeable, is highly beneficial in all diseases where it can be borne without much fatigue.

CATARRHAL CONSUMPTION.

This form of pulmonary disease, as before stated, *begins* in the nasal passages and frontal sinuses, and at first is known as a common catarrh in the head. From long continuance, and the continuity of surface affected, it gradually extends to the larynx, bronchia and lungs.

There is in such cases a great susceptibility to taking cold, with an increased and altered condition of the usual secretion from those parts. In the advanced stages the matter ejected from the nostrils and emitted from the throat, is thick, yellow, crusted, and often very fetid.

TREATMENT.—Inhalation is of the first importance in this affection, especially in the early stage, before ulceration has taken place. The *Catarrhal Pipe*, also spoken of elsewhere, is an efficient remedy in many forms of this disease.

The proper local and constitutional remedies are not materially different from those specified under the other forms of consumption, and need not be recapitulated here. Several very valuable formulas are also given in the Appendix, particularly the *tar* pills.

After *bronchial* and *pulmonary* symptoms are developed,

the treatment above pointed out for these affections must be rigorously employed; especially the *tar* syrup made with rum, as previously explained, is an efficient remedy. This form of disease being rather rare, and not differing essentially in treatment from the foregoing cases, nothing further is needed to point out the proper course of medication. Refer to No. 52, page 163.

DYSPEPTIC CONSUMPTION.

This perhaps is an unscientific classification, but as some authors have adopted it, and as patients will comprehend me better, I shall retain it. This peculiar disease, so far as the existing cause is considered, properly ranks under the head of Dyspepsia, because, as its name imports, it is caused by it.

The primary symptoms are a soreness of the throat or fauces, that portion situated immediately back of the palate, involving the palate or uvula and tonsils. The membrane in these parts first appears *red*, inflamed, and sometimes swollen. The little glands situated upon its surface become enlarged, and the blood-vessels are injected and also enlarged. The soreness is quite slight at first, and at no time is very severe until deep and extensive ulceration occurs. If allowed to progress, these glands suppurate and become covered with a thick, white, or yellow matter, which may easily be seen adhering to the parts. Indeed, I have frequently discovered deep ulceration existing there without the patient being at all aware of the fact, or as

yet having felt any soreness. A slight difficulty in swallowing is now experienced, and an occasional cough, or effort to clear the throat, occurs. As the patient expresses it, there is a constant accumulation of phlegm in the throat which looks like matter at times, yet evidently does not come from the lungs. There being no settled cough or pain, the patient feels no alarm.

There is another condition of these parts, quite the reverse of what I have just described, and which still will terminate in the same manner. The fauces present a *dry*, glassy or shrunken appearance. In this case there is a sensation of dryness of the throat and mouth, which becomes very troublesome during the night. The cough resulting from this species of throat disease is *dry* and "hacking."

Both of these conditions of the throat will terminate in bronchitis and consumption, if permitted to continue. The frequency of those diseases is to be attributed to the persistence of these throat affections. From the many hundreds of cases of lung diseases which I have examined, their history shows that a very large proportion of them are clearly the *result* of inflammation of the throat in one of the forms described. The most common exciting cause of this throat affection is derangement of the stomach, or the different grades of dyspepsia, especially those where there is frequent eructation or belching, or as some, I notice, call it "rifting," of a sour acid gas from the stomach, which produces a burning, painful, hot sensation in the throat. The same feeling is experienced in the stomach, often called "heart-burn," but which is in reality an irri-

tation of the mucous membrane, produced by sour, acrid gas which rises into the throat. Any food that disagrees with the stomach, or sours upon it, gives rise to these symptoms,—hence its frequency in dyspepsia. This coincidence has given the name to this form of consumption. Any disease, therefore, about the throat, demands early attention and persevering treatment till cured. If it cannot be radically cured, it may nearly always be controlled and kept back by proper management.

In the treatment, the first object to attain is the removal of the dyspeptic symptoms, for as long as these remain a constant irritation is kept up. The treatment of dyspepsia will be given under that head.

TREATMENT.—The local symptoms in the throat must be treated by swabbing with 26, or gargling with 25, and the use of Inhalation and the remedies directed for bronchitis. When the disease has extended to the substance of the lungs, the same general treatment is called for as is prescribed for other forms of consumption that may have originated from different causes.

DYSPEPSIA AND ITS COMPLICATIONS.

A proper explanation of terms is necessary to a correct understanding of the subject treated. I have found that provincialism is quite prevalent in our country, and even in the State of Ohio. Different words are used in the North to express the same idea from what are commonly

used in the South, therefore I shall use such words or phrases as are common with the varying localities.

Dyspepsia, and *indigestion*, mean the *same* thing—the loss of the stomach's power to digest or prepare the food taken in it for absorption and nutrition. Not an entire, but a partial loss, so far that certain kinds of food, or but a small quantity of any, is fully digested. There are three important points to be noticed: 1st, the actual condition of the stomach in dyspepsia; 2d, the symptoms which result from this impaired condition of the digestive apparatus; and 3d, the proper remedies calculated to remove the various symptoms which this disease gives rise to in its separate stages.

1st. The mildest form of dyspepsia is the occasional sort, which is the result of "*over-eating*"—taking more food than the system requires, and more than a healthy stomach can digest. This form readily subsides when the individual consults his judgment, and not his appetite. Another mild form of the disease occurs in those who deny themselves the exercise which the body requires to assist it in the performance of its functions. Inactivity and a sedentary life are the two primary causes of that disease, so far as the stomach alone is at fault.

Constipation of the bowels and a desponding state of the mind—a suppression of the cheerful, mirthful, or laughing faculties, have a very decided tendency to restrain the healthful action of both stomach and bowels. Much has been said by hygienic, as well as medical writers, against the use of "rich food," and in praise of "bran bread," or bread made of unbolted wheat, but it

may all be summed up, even massive volumes of dietetics, in the single phrase, viz: it is not the *quality*, but the *quantity*, that produces so much mischief, loading down the poor stomach, till, like an over-burdened beast, it refuses to do its work. This unnatural *distension* of the stomach, if continued for a length of time, produces *irritation* of its mucous membrane, then the disease is fully established. *Irritation*, or slight, and at times even a sub-acute form of inflammation supervenes. This is nearly universally the case when the stomach is the primary seat of the disease, and is an important feature, from whatever cause produced. Irritation of the mucous membrane appears to be a primary and essential condition before the process of digestion is interrupted. Hence the impropriety, even injury, of using tonics and spirit bitters. Though proper in *true* debility, yet it will aggravate every symptom in the early stages of the disease. No more prevalent error exists than that indigestion is generally, or even in three per cent. of the cases, dependent upon debility. This egregious error alone may explain the failure, hitherto, in treating it, because the remedies proper for debility are injurious, if irritation be present. The effect of my medicines prove that irritation is the true cause and attending condition of the membranes, for I do not give either stimulants or alkalies, yet speedily remove and permanently cure the disease.

Not only is the membrane irritated or inflamed, but this condition often prevents a full secretion of gastric juice, the quantity sufficient to digest the food, and from long continuance there arise actual changes in its *quantity*,

either an excess of acid or a deficiency of the compounds of sodium, all of which must exist in certain exact proportions, or it will not act upon the food with promptness or efficiency, and if the food is allowed to remain in the stomach indigested too great a time, spontaneous decomposition or fermentation takes place. The gas thus produced is acrid, and produces irritation both from its own acridness, and by *distending* the stomach, called "bloating" or "swelling" of that organ. These acrid gases induce a state of irritation in the throat and even the mouth, as every one knows who has "sour stomach."

That I may be better understood, the causes of dyspepsia proper will be enumerated in the usual order. 1st. Overloading the stomach, whether with rich or poor food. 2d. Sedentary habits—not taking sufficient exercise to give the body the necessary degree of excitation. 3d. Constipation of the bowels, which obstructs the passage of the digestive element into the smaller intestines where absorption takes place. 4th. Despondency, or a gloomy state of mind—being habitually under the influence of the depressing passions. These have a deep and direct influence over the actions of the stomach, as most persons have learned by experience. As this depression of spirits increases, in the same ratio the stomach refuses to act, and dyspepsia has a direct tendency to produce this gloomy state of mind, the stomach being the great central organ of sympathy; hence the condition of the stomach induces this state of mind, and the mind reacts on the stomach. Especially is this true when the liver is likewise affected.

The exhilarating, exciting, and pleasurable feelings

resulting from reasonable, whole-souled mirth, cheerful, natural unaffected, unrestrained hilarity, is the language God has given to express the creature enjoyments, and pleasures of our being, and is an absolute condition of health, taken in its general meaning. Buckling down the face to certain prescribed limits, suppressing every feeling of gayety and squeezing out of the heart every feeling of mirth, in its ultimate effects is palpable suicide, and as great a violation of the laws of the human constitution as would be to make the cultivation of those feelings the exclusive objects of pursuit. The effect of these two conditions of mind all have known in some degree. One brings moisture in the mouth, sends the blood rapidly through the body, swells out the lungs with good, pure, fresh air, expels the drowsy, stupefying carbonic acid from the brain, shakes up the stomach and bowels, and seems to give a fresh impetus to the functions of life and health, while the desponding, foreboding, or what expresses it better, habitual solemnity, has precisely the opposite effect in every particular, producing dryness or feverishness in the mouth and throat, confining the lungs and chest, retarding the secretions, especially of the liver, constipating the bowels, and reducing the mind to a painfully acute apprehension of *future* suffering or troubles. Mark the difference between this latter state of mind, and that observed in consumptives: they seldom get discouraged or out of hope till the last stage. But I have digressed from the view of connected remarks, yet if the experience of invalids proves the truth of any thing I have said, it will

be in relation to the importance of attending to the conditions of the *mind*.

Many occasional causes of dyspepsia might be noticed, still as the true condition of the digestive organs is essentially the same, they may more conveniently be noticed in another place.

How far dyspepsia is independent of disease of the liver is a question not easily answered. It is evident that the former disease, if long continued, becomes complicated, involving the liver and kidneys. Certain it is that some form of liver disease generally attends dyspepsia, either as a *cause* or a consequence of it. Any particular organ does not remain long diseased without involving others immediately connected with it. The primary influence of the function of digestion over other organs of the system is apparent, but how far any deficiency therein may involve the other organs or conditions of health cannot so readily be explained or defined. The stomach is the fountain whence issues the stream or phenomena of life; and if that be deranged, or in anywise impaired, corresponding deterioration reasonably may occur in other parts or conditions of the system.

2d. The symptoms resulting from the above-described conditions of the digestive apparatus are "legion," and I have not space to give any thing like a detail.

The primary or first symptoms are a dull, heavy, uncomfortable sensation after meals, a feeling of a load or weight in the stomach; some describe it as a "misery," others as a pain. This varies from very slight feelings of discomfort, to extreme pain, which is referred to the pit

of the stomach, at times in the sides, or extending up into the chest. These feelings of distress may come on soon after taking food, if there is much irritation. In some cases an hour or more may elapse before pain is felt. In some cases the stomach rejects the food, and the person must leave the table in haste to vomit, or the vomiting may not occur till a short time after meals are taken.

Other cases present different symptoms; the food being "spit up," that is, it seems to rise in the throat, without any nausea or special effort, and is in the same condition as when swallowed. The food remains for several hours in the stomach unacted upon by the gastric juice, fermentation takes place, and creates a great amount of acid, giving rise to those distressing and injurious symptoms, "sour stomach," and frequent belching of acrid gas, which has the very taste of the food when taken. Patients often ask me, "Where does the gas or 'wind' in the stomach come from?" I will tell you. If you mix flour and water there is no gas at first; it is a heavy mass; but when it becomes slightly warm, after a certain length of time bubbles of gas begin to rise in it which increase until it quadruples its bulk. This is the result of a certain degree of decomposition, or *rotting* of the flour, whereby the gas in it is set free. Just so it is when the gastric juice fails to act upon the food; the heat of the stomach induces the fermentating process, and fills the stomach with an enormous amount of this acrid gas; this distends or swells the stomach, producing great distress, and tenderness externally.

Another distressing symptom of dyspepsia is a hot, burn-

ing sensation extending from the stomach into the throat and mouth, commonly called "heart-burn," more appropriately *stomach-burn*. Nor are the symptoms confined to the stomach alone; the same sort of feelings are experienced rather below that organ, in the duodenum or second stomach; and irritation here gives rise to the most painful and obstinate forms of dyspepsia, occasioning obstinate diarrhœa alternating with constipation. In every form of dyspepsia, attended with "sour stomach," there is also a painful distension of the bowels, or "bloating," with a feeling of inaction, as though they were in some way obstructed, all of which, however, are relieved, when a free evacuation occurs. The appetite, too, is very changeable—at times capricious, or quite deficient, not relishing well any kind of food. Again, the appetite is voracious, can eat indiscriminately, and a great amount, yet the stomach does not really feel full or uncomfortable; the same feeling of faintness continues, followed by stupor or headache; nor does the system appear to be nourished by it. In some cases there is an insatiable thirst, in others a disgust for drinks. So varying and changeable are the symptoms attending upon protracted cases of dyspepsia that I cannot presume to give more than a general outline, and as many of them arise from the liver, I shall defer the mention of such till speaking of diseases of that organ as the cause of some some forms of dyspepsia.

TREATMENT.—Begin the treatment with No. 10 during the day and No. 7 at night. If there is pain or soreness in any part about the sides, stomach or back, apply No.

18 and continue until the soreness is all removed. Nos. 10 and 7 are to be followed with 14, 31, 36, in cases of acidity of the stomach, "belching of wind," costiveness and fetor of the breath. When there is a languid circulation, coldness of the extremities, a gloomy, desponding habit, and furred tongue, give 28, 13, and 11. Should there be too much irritation of the stomach to admit of the immediate use of the above numbers, then give 29 for a week or more previous to using them. In some cases there is an increased flow of saliva, or "watery stomach," as patients call it. It is not attended with nausea, as in "water-brash," but constant spitting. This very troublesome symptom will be promptly cured by No. 34.

Chillness or great susceptibility to cold will require No. 17, 13 or 3. When the nervous symptoms predominate, the patient being subject to sudden alternations of exhilaration and despondency of mind, 29, 28, 36, 11, 35, will be the *class* of numbers from which to select suitable remedies. The bowels must be kept regular by the use of one of the following pills: 12, 41, 44. These cases require external friction and cold baths. Much advantage will be derived from rubbing the stomach and bowels every morning, immediately on rising from bed, with the bare hand until the skin reddens deeply. Rub hard and briskly. This, though a simple process, produces a degree of action in the stomach and bowels, and gives a healthy impetus to the circulation of the blood.

All of the numbers will require to be changed to meet present or urgent symptoms, and continued a longer or

shorter time according to the circumstances of each case.

Patients who discover one number to help them in a marked degree should continue it, and omit such as may not agree with them, after using it a sufficient time to decide that fact. They should in all cases read the directions for preparing and using them faithfully, for much depends upon their being properly used. The regulation of the diet is of the first importance, but what should be eaten and what refused is a matter that the patient can better decide than any one else, for in no instance is the old adage, "what is one man's meat is another's poison," more truthful than in this disease. A kind of food agreeing well with one person may disagree as much with another; therefore, use that which you *know* will not disagree with you, and ever remember that it is the *amount* you eat, more than the quality, which causes pain in the stomach. Coffee is never well borne by any dyspeptic. Never try frequent experiments with the stomach, but select a mild, plain, and easily digestible diet, and be contented until you are restored.

People often denounce the drunkard for drinking because he has a strong appetite for liquor, yet forget that it is an equal transgression of the laws of health to *gorge* the stomach for the same identical reason.

Mirth and conversation should be freely indulged in at every meal; not conversation that requires much *thinking*, but pleasant, cheerful remarks, that the mind may be both diverted and agreeably excited at the time. These directions may appear trivial to the uninformed, still they are

based upon well-established physiological laws of our nature, and need only to be observed to satisfy all of their truthfulness.

Another rule is imperious, and should never be violated by dyspeptics, that is, avoid too *active exercise* of the body soon after taking meals, than which nothing is more injurious. Neither should the mind ever be actively employed during the *first* stage of digestion. It is a well-known fact that active labor of the body or mind soon after meals, especially full meals, will retard digestion for an hour or more, often till fermentation takes place. In dismissing this part of my treatise upon Dyspepsia, I trust that the plain and concise views and directions given will enable patients to understand their case, and how to use my remedies, and also how to regulate their own habits, diet, and exercise; how to avoid many things calculated to aggravate the disease. The reader will find this chapter of more practical value than any other of the hundreds in print.

DISEASES OF THE LIVER—ITS COMPLICATIONS, SYMPTOMS AND TREATMENT.

Any affection of the liver is frequently spoken of as "Liver Complaint," but as that term conveys no special idea, and applies to no particular disease of that organ, I shall not use it.

There are certain affections of the liver quite distinctly marked by symptoms which may be easily recognized, and

others very obscure which are not so readily distinguished, or if so, only indicate fatal disorganization and changes that no medicine can remedy. I shall speak of the most frequent first, and the others in their order.

1st. Chronic irritation of the liver is by far the most common. By *irritation* is understood that condition of a part which precedes inflammation; it is a very mild form of inflammation. Inflammation may be of different degrees of intensity, and is designated by medical men as the acute, the sub-acute, incipient, and chronic. Whenever I use the term *inflammation* it should be understood as the mild and chronic that is referred to.

The liver becomes inflamed from various causes, still the effect is the same whether from obstruction or malaria. It then becomes enlarged, and its function, secretion of bile, severely interfered with. The condition is generally called *torpor* of the liver; though its function is torpid, yet this depends upon a degree of inflammation present, obstructing that function. In such cases there is frequent pain, or a dull, heavy feeling in one or both sides; more or less headache over the eyebrows and forehead, or in the back part of the head; a full, uncomfortable sensation in the stomach and bowels—thirst—tongue some coated, and slight “flashes of heat” in the face, with impaired appetite; in some cases diarrhœa, in others constipation, or these may alternate in the same case.

These are only initiatory or first symptoms, and treatment is seldom had so early in the disease. The disease being allowed to progress, in addition to these common symptoms, and merely feeling unwell or “out of fix,” “a

little under the weather," the liver begins to manifest its disease more plainly by the gradual increase of all former symptoms with the development of *new* and more severe ones.

These are a sallow or dingy color of the skin, which feels rough and dry—loose, shriveled or contracted; the eyes have a dull expression, sometimes a tinge of yellow; the sleep is either partial, very profound, or the patient is unable to sleep at night, but remains very drowsy during the day; more or less headache, pain in the back part, and *heat across the top* of the head. In some cases the pain is mostly in the fore part of the head, with dizziness and a sensation of coldness across the top. The *taste* is changed, and becomes either bitter, sour, fresh, salty, or there is a manifest *loss* of taste, all of which have special indications.

If the stomach has not long before this stage become affected, it will now show some of the more obstinate symptoms of dyspepsia, such as I have previously referred to as the result of disease of the liver. This form of indigestion differs in nothing from the usual form, but the practical inference is that, as the disease is primarily in the liver, the treatment must be directed to that organ *first*: the liver being restored, the dyspepsia either subsides or is soon removed by proper remedies. Any one who fails to make this distinction will fail to cure the patient. If dyspepsia has existed so long that the liver has also become affected, then the liver must be treated as a primary disease.

The condition of the bowels is variable; the discharges

being frequent and in small quantities, either very dark or light clay-color—when constipated for several days, the evacuations are mixed with or surrounded by a thick, tenacious mucus. As the disease of the liver advances, the evacuations may become dark, hard, and lumpy. The urine is changed both in quality and quantity; either thick and high-colored, or very pale and clear, and passed in much larger quantities than usual.

Disease of the liver is frequently complicated with affections of the kidneys and spleen; and the whole glandular system is implicated more or less. This explains the great diversity of symptoms that arise during the continuance of chronic inflammation of the liver. Enough has been said, however, to enable any one of ordinary powers of observation to detect the existence and distinguish the stages of "liver complaint." Many additional remarks will be found in Part I., of this work, also in Part II., showing that the liver becomes affected in consumption and dyspepsia. A multitude of symptoms, aches, pains, and bad feelings, which result from hepatic or liver diseases, have been purposely omitted, as they are not essential to give in order that patients may know the location of their malady and the organ affected.

As connected with disease of the liver and the result of it, in connection with certain defects in digestion, is the production of gravel or stone-like concretions called *gall-stones*, similar in formation to those found in the urinary passages. They have a nebulous origin in the small ducts of the liver, but are generally found in the larger ducts, which convey the bile to the gall-bladder, and in that

sac, as also in the duct which conveys the gall into the second stomach, where it mixes with the chyme as that flows down from the stomach, after the first stage of digestion is performed.

The symptoms are those which generally mark liver-disease, and jaundice, in addition to frequent attacks of *extreme pain* in the region of the liver (the right side) and stomach. Patients often call it "cramp-cholic." The *characteristic* symptoms, however, are suddenness of the attack, great severity of the pain, the absence of the usual signs of inflammation, and sudden subsidence of the pain. The positive signs, of course, are the presence of the gall-stones in the fæces, or discharges from the bowels.

TREATMENT.—In the first stage, it is proper to begin the treatment by administering a full physic of 44, which is to be occasionally repeated when the bowels become costive, or any bilious symptoms occur. The headache, or fullness and heavy feeling in the head, so common in these cases, will be promptly relieved by the use of the above pills, or by two of No. 12 and one of 7, taken at bedtime.

No. 18 should be faithfully applied over the short ribs of the right and left side, also on the back over the kidneys, when there is pain or soreness in those parts.

Begin the alterative course by the use of 10 and 7, and follow with any of these: 28, 13, 21, 9, 32 compound, 38 and 22. If the skin and eyes assume a yellowish tinge, 28 is the special remedy, followed by 13 or 3.

Nos. 10 and 7 are the most important remedies in the

treatment of chronic inflammation of the liver, especially when there is a deficient secretion of bile, and acidity of the stomach. If dyspeptic symptoms are present the remedies previously spoken of, for that disease, should be alternated with such as are more particularly designed for the liver.

After the more urgent symptoms have been subdued, 3 or 13 may be continued as a tonic to invigorate and strengthen the system.

Patients under treatment for disease of the liver, of whatever grade, should use the salt bath faithfully. In cold weather the water may be slightly warmed, and the room warmed also, to prevent becoming chilly at the time of bathing.

In selecting numbers for any disease, Part II. should be carefully consulted; for having therein dwelt fully upon the *uses* of remedies, less is required here.

JAUNDICE.

It is quite a prevalent opinion that jaundice is a distinct and separate disease from that of the liver. This is a very decided mistake. Jaundice is but an external manifestation of an *internal* disease—an obstruction in the separation of the bile from the blood in the liver. The bile is retained in the blood, or from an obstruction in the hepatic ducts, it may be *reabsorbed*, and thus carried into the blood. The peculiar coloring matter of the bile is depos-

ited in the skin and the coats of the eyes, and is called jaundice. All the remarks made under disease of the liver are specially applicable to jaundice, since the latter is but one variety of the former.

TREATMENT.—This is very similar to the directions given for the treatment of liver complaint under that head. Begin with Nos. 10, 7, and 28, to be followed by any of these numbers: 13, 3, 24, 32.

ON DISEASES OF THE FEMALE SYSTEM.

I. PUBERTY, OR THE BEGINNING OF MENSTRUATION.

THE human female system is distinguished from all other species of mammalia by certain phenomena which indicate the period when it becomes capable of propagation. Nature has so ordained this law that no female can become pregnant *before* the menses appear, during their suppression, nor after they have ceased from age. When a female begins to menstruate, she is said to have arrived at *puberty*, or at an age capable of reproducing her species.

The age of puberty is usually stated at fourteen years, but the appearance of this function is governed by the laws of development of the system more than by the calendar; some are better developed at twelve than others are at sixteen, hence the reason why the courses are es-

established in some at an early, and others at a later period in life, even in the same climate. In very warm climates, this function is said to begin at nine or ten years, but in cold latitudes it is not till eighteen or twenty years. Hence the laws of *development* determine the age of puberty, and not merely the years. I make this observation because mothers have much solicitude about their daughters' health if this function is not established at the *usual* age, and much useless medicine has been taken, or perhaps injuriously used. Medicine has no influence over the uterine system to produce the menses—nature does that. But when she is unable to do it, that fact is shown by certain unmistakable symptoms. To restore the *general health*, then, is the true point in the treatment. When that is accomplished the menses will appear in Nature's *own* time.

So long as the patient's general health is good, and no manifest disturbance in the functions of other organs, there is no occasion for medicine. I have known one case of a woman who never menstruated, nor had the least symptoms. Her age was 35 when she communicated this fact, and it is the *only* case of the kind that I have ever known. But the earliest symptoms of declining health must be promptly met by proper treatment. When the menses do not appear at the proper time, it is designated Retained Menses, of which I shall now speak.

II. RETAINED MENSES.

As I am writing for the common reader, I shall use as few medical terms as possible, and give *definitions* rather than technical words. Retained menses, then, is that condition of the female system when the courses *never* have appeared, and “*suppressed* menses” is where they *have* been regular, but from other causes than pregnancy are obstructed. These are two essentially different conditions of the system, and of their symptoms and treatment I shall now speak.

1st. RETAINED MENSES.—The symptoms usually present when the courses ought to appear, but do not, are a great degree of languor, a feeling of general weakness, a disposition to sleep late in the morning, frequent headache and diminished appetite. These are the earliest symptoms noticed. Then the patient begins to lose the natural color of the face—not only the freshness of the countenance, but the healthy look of the skin gradually fades away to almost a transparent paleness—the eyes have a dull or unnatural sharp expression, with a dark shade under them. The lips become blue, or almost colorless, the respiration hurried, and palpitation of the heart is excited by the least exertion or sudden emotion. All these are unmistakable indications for treatment. But the case seldom reaches this point without involving the digestive organs, the liver and bowels, and perhaps the lungs; hence dyspepsia, costiveness or a “hacking cough” will indicate the increased danger of the patient’s condition.

This condition of the female system is named in the books *Anæmia*, *Chlorosis*, or *Green-sickness*; but I have described the *symptoms*, and no one can fail to recognize them, and the true cause is retention of the menses, call it by what name we may.

THE INDICATIONS OF CURE are to improve the general health, to restore the action of the liver, to regulate the digestive function, and to invigorate the nutritive process, thereby *increasing* the quantity of the blood and giving tone to the vital and nervous energies; in other words, in retained or suppressed catamenia, good health is Nature's emmenagogue or regulator. I speak thus to correct a wrong idea of treating such cases by giving remedies which act specifically upon the uterus as promoters of the menstrual secretion. Such remedies are never indicated till the general health is restored, and the patient has the usual symptoms, viz: pain in the back and loins, etc., all of which are well known.

THE TREATMENT may begin with Nos. 10 and 7, followed by 14 and 36, or 31 and 36, 28, 35, 3, 20, varied and repeated so as to meet all the symptoms pertaining to the general health. The bowels should be regulated by No. 12 or 41, local pain removed by 18, and all the symptoms treated on general principles.

When the patient is so far restored as to feel the usual symptoms of approaching menstruation, then No. 20 may be given, and other medicines for the time omitted, for a week or two, then resumed again. This treatment has been universally successful in my practice. The salt or

mustard bath (see Baths) should be used in warm weather, two or three times a week, and the patient should take all the exercise out-door she is able to bear without too much fatigue. Riding on horseback or in a buggy is highly beneficial. Out-door sports and amusements should be practiced daily if possible. The exhilaration of the animal spirits, diversion of mind, or in common parlance, fun, real fun, that makes one laugh till every air-cell of the lungs is filled to its utmost capacity with pure fresh air, has a more potent influence over the functions of the body and springs of life than is generally admitted. The de-carbonization of the blood takes place in the extreme or minute ramification of the air-cells of the lungs, hence the necessity of deep breathing, or their full expansion, that that change may be perfect. But as I shall give a chapter on the mutual dependence of *body* and *mind*, further remarks here would be out of place.

III. SUPPRESSED MENSTRUATION.

This as defined elsewhere is that condition of the female system where the patient has been "*regular*," and from accidental causes the courses have been obstructed. The important influence of this function over health of the female is shown by the serious effects which result from its derangements, especially its suppression. It is unnecessary to detail the symptoms which are produced by suppression of the courses, for whenever that does occur immedi-

ate and persevering treatment should be had till they are restored. The same effects are produced upon the constitution by suppression as are experienced from *retained* menstruation.

THE TREATMENT is the same, constitutionally, as for the former disease, with the exception that special uterine stimulants may be resorted to *earlier*. The general health should first be improved by the use of Nos. 10 and 7, 14 and 13, 28, 35, and such other alterative medicine as the conditions of various functions of the system may require. No. 18 worn on the loins, the frequent use of the salt or mustard bath, and suitable exercise, will materially aid the action of medicines. Whenever the usual pain in the back, and other symptoms occur, indicating an effort of nature to re-establish that function, then recourse may be had to emmenagogues, such medicines as act specially on the uterus, such as No. 20, while the bowels are kept open by No. 12 or 44. After this period is passed, the above general treatment should be continued, whether the courses return or not. And in 25 days Nos. 20 and 44 should again be used as above, till the courses return regularly as to time and natural quantity.

IV. PAINFUL MENSTRUATION.

This name sufficiently indicates the nature of the disease to be treated. It is characterized by intense pain in the back, bearing down, and many other symptoms which

every female readily understands. The menses in these cases come on slowly, and the pain in some cases becomes almost as severe as "labor pains." The cause of this affection is the smallness of the mouth of the womb, or its contraction, which prevents the menstrual fluid from passing out freely, and by being *retained* in the womb it coagulates and becomes very difficult to expel, requiring considerable dilation of the womb to admit of its expulsion. The pain, therefore, is produced by the contraction of the womb to get rid of the coagulum.

THE TREATMENT consists, first, in regulating the other functions of the system when deranged, and of attending to the general health during the intervals of the menstrual periods. Three or four days *before* the courses are expected, begin with No. 20 and keep the bowels open with No. 44, and take a tepid sitz bath at bedtime.

When the pain becomes very severe, then inject a half pint of warm water into the vagina with a female syringe. The hips should be well elevated and the water retained in the vagina ten or fifteen minutes, so as to relax the mouth of the womb. This will sometimes afford immediate relief when internal treatment fails. The injections may be repeated two or three times a day if the intensity of the pain requires it; and the patient may take at the time No. 29, or any number in the Appendix recommended for that purpose.

V. EXCESSIVE MENSTRUATION.

Although no rule can be given as to the amount of the menstrual flow, yet every female is competent to decide when it is excessive and when deficient. Each constitution has its own law of necessary quantity and time of continuance; therefore every female is "a law unto herself," except in regard to the interval, which is generally one lunar month.

THE TREATMENT during the interval should be directed to the improvement of the general health, for in these cases the patient often becomes much debilitated by the loss of blood. When the flow is so great as to cause prostration and weakness, it ceases to be menstrual and becomes hemorrhage proper. This class of patients often present a pale or pallid hue, and experience a general feeling of lassitude, from which they scarcely recover before the next period supervenes; nor can this condition continue long before other functions become affected also. The stomach, the nervous system, the bowels and liver may become deranged; and when very long continued palpitation of the heart, dropsy, or pulmonary disease may be the result. During the interval, therefore, all these conditions of the system should be fully treated by the proper remedies described in another part of this work.

After the menstrual flow has continued two or three days, or at any time when it is evidently *excessive*, No. 16 should be used once, twice, thrice, or even four times in the twenty-four hours, according to the urgency of the

ease, till it is controlled or subsides altogether. No other medicines should be taken at this time, and all previous treatment should be discontinued for several days thereafter. In very obstinate eases, the following has been used with very prompt effect. Take a teacupful of equal parts of vinegar and rain-water and dissolve in it one table-spoonful of powdered alum; then take a piece of old cotton or linen about five or six inches wide and roll it up till it is about an inch and a half in thickness—saturate this with the alum solution, and press it up against the neck of the womb, letting it remain an hour or more. This application will only be required in very bad eases. If the excessive menstrual flow is preceded by a miscarriage, or there appears to be a great *relaxation* or dilation of the mouth of the womb, No. 15 should be used during the intervals to give tone to the parts and subdue all irritation. To quiet pain use No. 6.

In all these cases of immoderate flow of the menses great caution is required on the part of the patient in regard to over-exertion—such as lifting, or frequent sexual intercourse—just before the expected period of the "monthlies," for these organs should be kept in as quiet a state as possible.

VI. THE "TURN OF LIFE."

The child-bearing period begins with the first appearance of the courses, and ceases when they subside. The former condition is marked by special changes in the

female system, and so important are their effects when they begin to decline that it is appropriately called the "critical period" of female life, and but few pass over it without the general health being for the time more or less affected.

The age at which this change occurs is stated at *about* forty-five, but this rule is subject to exceptions. With those who have never borne children the menses cease earlier than with those who have. I know of one case in which it had not subsided at sixty. From forty-five to fifty is usually the age at which the "turn of life" may be said to take place.

As the female enters upon this critical change the menstrual period is prolonged to five, six, eight weeks or more, and the usual symptoms of suppression are experienced. When the menses do return, however, they are much more copious than when they regularly appear, and continue a longer time. In some cases there is a continued wasting or irregular flow, and almost every case will present some variation of symptoms peculiar to itself. But it is not my design in this or in any of my articles to trace the various changes and modifications of disease. The important pathological conditions, and the most positive and common symptoms will alone be noticed.

Patients passing the critical period of female life may be divided into two classes, viz: the plethoric or those who are fleshy and of full habit, and such as are of a feeble, "weakly," or frail constitution, and deficient in vitality. Now, the two opposite conditions will naturally give rise to opposite symptoms and consequently demand different

modes of treatment. There are many grades, however, between the extremes of these classes. The degrees of plethora and degrees of debility will be gradually lessened as they converge to the standard of ordinary health, and close discrimination will often be required to determine to which of the classes the patient really belongs.

So common is it to regard the turn of life as a period of *debility* that much harm has been done by the administration of tonics and stimulants.

THE TREATMENT of the plethoric class will be to control the *present* symptoms. If there is periodical headache and other signs of a preternatural fullness of the blood-vessels, as is generally the case with such patients, such means as are known to be efficient in reducing the volume and momentum of the circulation should be adopted, such as bleeding, saline cathartics, and such remedies as will equalize the circulation, subdue the inflammatory tendency and quiet the nervous system. But as I treat chronic diseases, I shall give only the Pathogenetic treatment for the common and ordinary cases of this kind.

The principle to be kept in view in treating this class of plethoric females is, that the true condition of the system is febrile and inflammatory. Keeping that in view, the treatment becomes very plain and simple.

Attend, then, to the general health, and treat all the symptoms on general principles. The plethoric, as well as the debilitated patient, during this critical period will have a class of nervous symptoms, "whose name is legion," superadded to those which are legitimate, from derange-

ment of the whole system. Such nervous affections can only be controlled by treating the *legitimate* symptoms. This nervous condition bears about the same relation to the actual disease as smoke does to fire—put out the fire, and the smoke ceases at once.

No specific treatment can be given for this class of cases, for each case will require some modifications. Among the remedies are Nos. 10 and 7, 32 compound, 28, 24, 13, 32. The bowels should be kept open with No. 12. For all other remedies refer to the second part of this book.

The second, or *debilitated* class are also to be treated on general principles, and always with reference to *debility* or exhaustion. The condition of the stomach, liver, bowels, and blood will indicate proper remedies, and among the numbers are 14, with 36, 10, 35, 31, with 36, 3 and 11, and if nervous symptoms predominate, 29 and 28. Of course other numbers will be used as the special symptoms require.

There are certain other diseases peculiar to the female, and to which they are liable from puberty to the end of life. These are known by various names; the most common are the *Whites*, and *Falling of the Womb*.

VII. THE WHITES, ALSO CALLED LEUCORRHOEA.

This very troublesome and frequent disease is characterized by a white, thick, tenacious mucus discharged

from the vagina. The discharge originates about the neck of the womb, and is produced by local irritation of those parts. The consistency and color of the discharge varies. At some times it is quite thin, at others thicker, resembling in appearance the white of an egg. In protracted cases it is much changed, becoming thick and yellow. The cause of this disease is chronic *irritation* (a mild form of inflammation), and as this increases, the secretion becomes thicker, higher colored, and often slightly tinged with blood.

It is unnecessary to describe this disease at length, or to dwell upon the symptoms that attend it. Every female will readily recognize it. Among the more immediate effects are bearing-down pains, a constant feeling of weakness in the back, and languor. Such is its effect in weakening the system that it has obtained the name of "female weakness;" but weakness is the consequence of the disease, and not the *cause* of the symptoms.

The Whites, when long-continued, or when proper attention has not been given to cleanliness, and the acrid secretion allowed to remain in contact with the membrane of the vagina and neck of the womb, frequently results in ulceration of the parts. Ulceration is also often caused by "tedious labors," or where the neck of the womb has been injured by the use of instruments in such labors. And it may be produced by *prolapsus*, or change in the natural position of the womb. When the vaginal discharge becomes purulent, having an offensive feter, or tinged with blood, ulceration generally exists. But the only way to ascertain that fact positively is to use the *spec-*

ulum, an instrument made of glass or silver, and so shaped that the vagina and neck of the womb can be inspected and their true condition observed. If the parts are found ulcerated, local applications are necessary for a cure, and must be made by the resident physician.

Ulcerative disease of the neck of the womb is of frequent occurrence, and far more so than was believed till Dr. Bennett of Edinburgh, made uterine disease a speciality in an Infirmary established for that purpose. He enjoyed rare facilities for investigating and treating every grade of disease of those parts, and his writings are a valuable legacy to the medical profession. I refer to Dr. Bennett more particularly from the fact that he successfully subdued the common prejudice against the use of the speculum, the instrument above spoken of.

Dr. Meigs, of Philadelphia, has also written a volume on the same diseases, and advises the use of the speculum as the only means of successful treatment.

At the present time all intelligent physicians acknowledge the importance of this peculiar mode of applying medicines to uterine ulcers, and the objections urged against it at first have no longer any influence with patients.

The usual mode of treating this ulcerative disease by injections has been abandoned on good grounds. The remote and often concealed situation of the ulcer renders it impossible to make direct applications. Cases of the most obstinate character will generally be permanently cured in a few weeks when thus treated by the aid of a specu-

lum; and no physician ought to dispense with its use in such cases.

Even very slight ulcers at the *os tincie* will produce all of the symptoms usually ascribed to prolapsus, and be the occasion of protracted suffering.

One symptom I have found very uniformly to attend these cases; that is a chronic inflammation of the neck of the bladder, paroxysms of painful dysuria—almost a constant desire to micturat, but voiding very little at a time.

Whenever this last symptom is present in uterine disease, it is proper to make an examination, that the patient may be thoroughly treated. I attach much importance to this paroxysmal dysuria as a means of diagnosis! For all the usual remedies for irritation of the bladder will fail if disease of the uterus be the exciting cause of the urinary affection.

I do not treat these ulcerative diseases, from the fact that the patient must have daily attention and local applications made direct to the ulcers.

In all such cases, then, apply to a skillful physician who can give the case proper attention, daily if necessary.

The pain and difficulty in urinating in the above cases, will be promptly relieved by the use of 24. Much relief may also be obtained by the use of decoction of Buchue leaves. Peach leaves in some cases will be found beneficial. The queen of the meadow, a very common herb in this State, is one of the best diuretics in these cases of all the domestic remedies with which I am acquainted. Infuse one ounce of the root in a pint of boiling water, the whole of which may be drunk during the day.

TREATMENT.—In the ordinary form of whites, give Nos. 10, 28, or 3, 11; at the same time, No. 15 should be used as directed under that number. In the more protracted cases, when the discharge is yellow, the patient weak and pale, and the general health poor, first restore the general health by the use of the above numbers, then use No. 35. This number, aided by injections of 15, is almost a specific in such cases. When the discharge is very profuse, 15 may be added to one quart of soft water, and a small piece of fine bleached sponge, freed of all particles of dirt, may be wet in it, and placed up against the neck of the womb, and allowed to remain during the night. This may be repeated for several nights in succession, or every other night, according to the symptoms. The patient should refrain from sexual intercourse until the discharge subsides.

In the ulcerative form of the whites, besides the internal remedies, Nos. 10, 32, 28, 21, 14, 11, 3*e*, with local applications of nitrate of silver, and chloride of zinc, should be made by the aid of the speculum. Every case of this kind can be radically cured if these directions are intelligently followed.

VIII. PROLAPSUS UTERI, OR FALLING OF THE WOMB.

The womb is situated in the pelvis between the bladder and rectum; its form resembles a pear with the small end downward, and it is held in its position by four ligaments,

or fleshy bands, attached to it. These are so arranged as to hold the womb in its proper position and sustain the weight of the child during pregnancy. The great increase of the size of the womb in the several stages of that condition requires a corresponding change in the ligaments; although a true ligament is not capable of contraction, yet the peculiar structure of these admit both of contraction and relaxation. The causes, therefore, of the displacement of the womb is the relaxation of those ligaments, produced by a great weakness of the system, a violent strain of the parts, constant sitting in an inclined and unnatural position, frequent pregnancies, and tedious labors. These different causes produce an irritation, or a mild form of chronic inflammation, in the ligaments of the womb and surrounding tissues. Chronic inflammation of the neck or other portions of the uterus or its appendages is, in a very large proportion of cases, the first and real cause of the prolapsus. The neck of the womb (the lower end) in this case falls, so to speak, down into the vagina. In some cases the ligaments are so much relaxed as to allow the lower portion of the womb to protrude through the external opening of the vagina.

This is a brief description of the position of the womb and its ligaments in that very troublesome and obstinate disease which heads this article. The time when females are liable to this disease may be stated thus: never before puberty and at any time after it. But it very seldom occurs after the "change of life." If it existed before that period be passed, of course it may continue to the end of life.

SYMPTOMS.—These are constant “bearing-down pains,” a sensation of weight or heaviness across the abdomen, frequently a hot or “burning sensation” in that part of the abdomen, and shooting pains or soreness from thence up on the inside of the hip-bone, even up to the short ribs on either side. That is a very general symptom. There are also pains in the loins or small of the back, sensation of heat, and often a *throbbing* sensation. Some patients describe the local symptoms as “a misery all through or across them;” and *misery* is quite an expressive and appropriate word. These pains, likewise, frequently extend down the thighs and lower extremities. One common attendant is the irritation of the urinary bladder and pain in voiding the urine. The neck of the womb presses up against the neck of the bladder, not only producing inflammation but mechanically obstructing the passage of the urine. Hence, painful micturition or voiding of the urine is a very constant attendant upon falling of the womb.

The effects of prolapsus uteri upon the general health and nervous system are such, that to describe them all would be no less than to enumerate all the aches, pains and bad feelings, or *misery* that the female system is capable of suffering, for it seems to derange nearly every other function, and so involves the nervous system that the patient knows nothing but *misery*, and that continually. For these reasons this disease is usually associated with dyspepsia, torpor of the liver and bowels, headache, neuralgia, and affections of the heart, or respiratory organs.

TREATMENT.—One point should be constantly borne in mind in treating this disease, viz: that it is chronic inflammation of the womb and its appendages.

The cause of this disease has generally been regarded essentially debility; hence, tonics and stimulants were freely given to overcome the debility, and the effect has been really to make the patient worse. The general failure of the common treatment to cure these cases is well known, and the reason is, that they have been treated for debility when they should have been treated for chronic inflammation. The old idea of using pessaries of wood, glass, and India-rubber, was based upon the theory of debility, and they were used to afford mechanical support. But these are now abandoned, as they only increase the disease. A sponge, however, in many cases, may be used to great advantage. It absorbs all the acrid secretions. A fine piece of bleached sponge, the size of a small egg, from which every particle of gravel must be removed by thoroughly washing it, may be used. Put a piece of tape through it three or four inches long: wet the sponge in rain-water, and put it up against the neck of the womb. It should be removed night and morning, well washed, and then replaced. If there be any discharge, No. 15 added to one quart of soft water may be used to wet the sponge with. But when 15 is used as an injection, it should be dissolved in only *one pint* of water.

The numbers indicated for the cure of fallen womb, are 10, 3, 13, 29, 11 and 35. But all the other organs of the system and their functions must be considered, and at-

tended to; for as before stated, the stomach, liver, bowels, and nervous system become very much involved during the progress of this disease.

Much has been said by writers and others in regard to the use of abdominal supporters. Conflicting opinions are given, some claiming that they will cure prolapsus, others that they afford only temporary relief and are often positively injurious. All this discrepancy is explained by considering the *degree* of inflammation present in the different cases. If there be considerable inflammation, supporters are not well borne. The womb being suspended in the cavity of the pelvis, all pressure against the lower part of the abdomen has a tendency to press the womb *down* rather than to elevate it!—therefore, the present relief felt from the supporter is rather from its action upon the abdominal muscles than any good effect upon the uterus *itself*.

A common bandage, properly made so it will fit close to the lower part of the abdomen (as is generally used after confinement), will do all the good that a \$10 supporter will. But the patient can judge of their utility by the relief obtained from a common bandage.

There are many other diseases of the womb and its appendages, but I shall not describe them as it would increase the size of this book beyond its intended limits. I design only to describe such diseases as I can successfully treat, and furnish this little volume as a guide to those under my treatment.

ON CERTAIN DISEASES OF THE URINARY BLADDER, AND THE SEXUAL ORGANS.

The bladder is situated in the pelvic cavity behind the pubic arch, and rising above it. It is capable of great expansion, and necessarily so, to hold the urine as it constantly drops into it from the ureters. These are small, fleshy tubes that convey the urine from the kidneys, where it is separated from the blood, and empty it into the bladder; and when a sufficient quantity has accumulated, the bladder *contracts*, and thus expels its contents.

The principal disease affecting this organ, aside from those that pertain to the urine, is chronic inflammation of its inner surface or mucous membrane. I say *chronic*, because I do not treat of any acute disease. This affection is usually spoken of as irritation of the bladder only. But its substance as well as mucous coat may be subject to chronic inflammation. Indeed, it is a very frequent disease in both sexes.

The *causes* of this affection are various. It may be the sequel of acute inflammation, but generally is induced in the female by tedious labors and prolapsus uteri, or may be the result of *over*-distension in either sex, by not urinating as required, or neglecting to attend to this "call of nature," through false delicacy, until the bladder becomes so full as to *lose* its power of contraction. No one should attempt to retain the urine when they have the desire to pass it, because the bladder is not capable of distension beyond that period without serious, and perhaps permanent, injury. No person of good sense will regard atten-

tion to this "call" a breach of politeness—the vulgar *only* would do so, for "to the pure all things are pure."

Turpentine and the absorption of the Spanish-fly, when blisters have been left on too long, are very common causes of this disease—also the too long continuance of *bal-sams* as internal remedies for gonorrhœa. Stone and gravel are direct causes of irritation of the inner coats of the bladder. In old men the postate gland is generally enlarged and inflamed, and with it involving the neck of the bladder. Many other causes occasion this disease which we have not time to enumerate.

THE SYMPTOMS of this disease are, a frequent desire to urinate—passing but little at a time, and often attended with pain—a feeling of fullness, as though the bladder had not been fully emptied—heat and tenderness over the region of the bladder, and often extending along the course of the ureters to the kidneys and small of the back. There is generally a feeling of tightness across the lower part of the abdomen. The urine starts slowly, at other times so *quickly* that the patient has scarcely time to wait upon the call before the urine flows. It is often very thick with a tenacious mucus, which the patient calls milky; after standing it becomes very thick with a red or whitish sediment. More or less pain is felt in micturition, or a burning sensation. A few drops of blood often escape, either before or after urinating.

TREATMENT.—Due regulation of the diet is indispensable in this disease; a cure from any treatment may not be expected unless this be attended to. Any thing acrid or

stimulating must be avoided, such as pepper, vinegar, or spirituous liquors. The best diet is mush and molasses, and griddle cakes. The free use of sugar, any thing sweet, is a remedy as well as food. Much relief will be obtained from the acetate of soda—that is, take a part of a glass of apple cider, not very hard (it is best when just worked), and add common soda enough to destroy the acid, and drink while foaming. This remedy in many cases will effect a cure.

Begin the treatment with Nos. 10 and 7, followed by Nos. 30, 21, or 32 compound. Use the liniment in formula No. 44 across the abdomen and back, once or twice a day. Either of the formulas, Nos. 18, 19 or 21, may be beneficially used while taking the above.

These remedies will effect a cure in all curable cases.

ON GRAVELLY OR CALCULOUS DISEASES OF THE KIDNEYS.

The kidneys are subject to morbid changes in structure and perversion of function, as are all other secretory glands. Either from changes in the blood or changed action of the kidneys (perhaps both are present), the urine becomes altered in its healthy qualities or proportions of its constituents in health.

Among the more common results of this change, is the formation of a gravelly or sand-like substance, or concrete matter, which is passed off with the urine. The real

nature of the disease is the same whether the calculi are large or small. These sand-like concretions form in the little ducts or tubes in the kidneys, and as they are passed along with the urine into the ureters toward the bladder, they produce great irritation of its membrane, often inducing acute inflammation, and the most intense pain and suffering. If these accumulate in sufficient quantity to obstruct the passage of the urine, the most intense pain follows. This is called a *fit* of the gravel. But as I do not intend to describe any acute diseases, I shall not detail the usual symptoms of a "fit of the gravel," but merely group together the positive symptoms that characterize the disease in the intervals of acute attacks, or in its chronic form. The gravel, as it passes, gives rise to severe and frequent pains along the ureters, also the bladder and urethra; however, these are all usual symptoms of chronic inflammation of those parts. But the same inflammation may be present from *other causes*, therefore to understand when it is from gravel, the following summary of *Symptoms* will be found important:

SYMPTOMS.—First, a dull, heavy pain in the loins; frequently a transient, sharp-shooting pain, from the back or hips down the inner side of the hip-bone, extending to the region of the bladder; pain at the neck of the bladder, particularly just before and after urinating. The pain at times seems to be in the very end of the penis—either a sharp or an indefinable ache, and more or less pain in the testicles—a characteristic pain of renal disease, beginning in the region of the loins, shooting down to the

hip-joint, or inside of the thigh, extending even to the knee or foot. A frequent desire to urinate, passing but little at a time, attended with more or less pain, and frequently the urine is bloody. But the positive symptoms of gravel is passing them, which can be readily ascertained by closely inspecting the urine.

Patients afflicted with calculous diseases generally have more or less functional derangement of the stomach and liver, disordered digestion, and very many of the symptoms attendant upon disease of those organs, also more or less feverishness and prostration of the general health.

Stone in the bladder being but an accretion of these sandy particles, requires no further notice here as it is a surgical disease.

TREATMENT.—Very much may be done for the above class of patients by proper treatment and a corresponding faithfulness on the part of the patient in regard to regimen. If the stone has attained any considerable size, it must be removed by the surgeon; for as a general rule it cannot be dissolved by medicine. Still treatment may prevent its *increase* to some extent, and greatly mitigate all present symptoms, and thus prolong the patient's life and add greatly to his comfort.

While as yet there is only gravel, a cure may be expected from proper medicines, if continued a sufficient length of time.

There are different *kinds* of gravel. Some have an alkaline base, others an acid base, and my remedies are arranged to meet these several conditions.

But in treating these affections the condition of the general health, and of the stomach, liver and bowels must be taken into consideration. The following is the general treatment, to be modified according to the circumstances of each case.

Begin with No. 30, which may be followed by any of these numbers: 10, 24, 38, 32, 43, 22, 14. If the gravel have an alkaline base, No. 38 is an efficient remedy, and No. 5 or 42 when great acidity is present. If there is *pain* or restlessness, a pill of 36 or 29 may be used at any time as an anodyne.

The diet is of the utmost importance in treating calculous diseases. The most simple, plain farinaceous diet should be used, and all fermented or spiritous liquors must be avoided. The drink may be highly mucilaginous; flax-seed, slippery-elm or gum-water will remove the acridness of the urine and allay irritation of the urinary passages. The free use of sugar with the food has the same effect. No. 18 may be worn upon the back, changing the plaster from place to place as it becomes too sore to be longer borne.

In treating calculous diseases there are two essential features to be noticed: 1st, the formation of this concrete matter or sand in the urine; and 2d, to combat or remove the inflammation or irritation *produced* by them in their passage from the kidneys through the ureters, bladder and urethra. To prevent the formation, or to dissolve it when formed, and to protect the various parts from the injury of the passage of these rough substances, will constitute the indications of cure.

OTHER DISEASES OF THE KIDNEYS.

The kidneys, like any other glandular structures, are liable to be attacked with inflammation, acute or chronic, to become enlarged, atrophied, or otherwise organically changed. This, of course, will generally produce an abnormal condition of the urine. A variety of such diseases are described in the books, of which it is not my purpose to speak. Chronic inflammation is a frequent affection of the kidneys, even when there is no gravel, albumen, or other morbid elements noticeable in the urine.

I have observed in dyspepsia, in disease of the liver and the lungs, a uniform attendance of all the symptoms of *chronic inflammation* of the kidneys, in a greater or less degree. An uncomplicated disease of the kidney is of rare occurrence, but it is equally rare to find them healthy when the above affections exist. I fully believe that the functions of the renal glands have been greatly overlooked in treating chronic affections of the stomach and liver. The separation of effete matters from the blood by the kidneys is just as essential to health as the similar function of the liver or the lungs. Death ensues sooner from a suppression of *urine* than bile. The due action of the kidneys is essential to the elimination of the effete and poisonous gases and compounds of the blood. Although uncomplicated renal inflammation is comparatively rare, yet it does occur far more frequently than many physicians are willing to admit.

SYMPTOMS.—All the symptoms spoken of as attending gravel may be present, except, of course, the *sand* itself, because the gravel from its irritating qualities produces the inflammation. The more common symptoms are a feeling of soreness or stiffness in the region of the loins, scanty, high-colored urine, and generally much difficulty in voiding it—a peculiar, drowsy, dull, listless feeling; and so far as the general symptoms are concerned they are such as are almost invariably attributed to derangement of the liver. There is headache, more or less; the tongue is frequently furred with increase of thirst, variable appetite, and much restlessness at night.

TREATMENT.—These cases will not bear tonics or stimulants. Patients with the above symptoms often have these prescribed for them, but they get worse, or are not benefited, and for the reason that this chronic inflammation or irritation of the kidneys has been overlooked.

All such cases require a longer course of medicine than in common liver or stomach diseases *before* the administration of tonics.

The following numbers will be found useful in the above cases: 10 and 7, one pill of 44 at night, for a few days, 32 and 32 compound, then the more tonic alteratives, such as 21 and 22.

INCONTINENCE OF URINE.

The patient in this disease loses the power to control the action of the bladder, and the urine escapes involun-

tarily. It is mostly confined to children and old people. It occurs in the young before the bladder has attained a healthy tone, or power of contraction, and in the old when that tone is lost from age and debility. Parents, or those having care of children, should treat this infirmity with great forbearance and charity, for the child *cannot help it*. I have known children treated very roughly for this defect, as though it were a vice or habit. It is not so; it is a want of development in the strength of the urinary organs. The fear of punishment in the child will *increase* the difficulty. It would be as reasonable to attempt to cure an *old* person by correction, for this infirmity, as a child. There is but one mode of curing this troublesome and disagreeable affection, and that is by the use of the *porte-caustique*, which every good surgeon understands, and to such only should application be made. One or two applications of this to the neck of the bladder will effectually cure the incontinence of urine in the young or old. Medicine does but little if any good, especially in young subjects.

DIABETES, OR SWEET URINE.

The true cause of this well-known disease is not fully decided upon by the best writers. Many conflicting theories have been advanced, but the treatment is quite well settled. The phenomena or symptoms as initiatory and consequent, are a great increase in the quantity of urine,

and changes in its physical properties. It is very pale, is sweet to the taste, and contains sugar. Patients will pass from one to several gallons of such urine in twenty-four hours. Each time the bladder is emptied, it is attended with a feeling of exhaustion, as in cases of diarrhœa; early symptoms of emaciation occur, and the appetite seems to *increase* as the disease advances. Intense hunger, and intense thirst always attend diabetes. The pulse becomes quick and hard, the tongue red and mouth dry. There is more or less fever, and a constant feeling of weakness and languor, with wandering pains, and a weakness across the back. This description is sufficiently clear to enable any one to recognize the disease at once.

In diabetes there is evidently a perverted action of the nutritive function, for all the symptoms (except the urinary) are just such as are observed in persons who do not have sufficient food to sustain life, or in cases of gradual starvation.

It is generally believed that the sugar in the system is in *excess*; the saccharine matter in the food is converted into sugar by the acids of the system. But that is the very reason why the saccharine matter in the system is *deficient*—it is removed in large quantities, therefore it must be deficient. This fact positively demonstrates the great fundamental principle of *Pathogeny*, upon which the Pathogenetic practice is based, viz: to supply the deficiencies, and diminish the excesses in the elemental proportions of the fluids of the body.

Sugar and soda are known to be deficient in this disease, therefore sugar and alkalies are two curative agents,

as any one will be convinced who will use or prescribe them in diabetes. Enough sugar should be used daily to counterbalance the waste—from one to two, or even three ounces—and as soon as the equilibrium is reached, those peculiar feelings of faintness and debility will begin to subside.

TREATMENT.—Begin with No. 43, then give 5 or 31, 10, 35, with a daily bath of 23, and such other remedies as improve digestion and nutrition. No. 18 should be worn upon the back, changing it from place to place as it becomes too sore to be longer borne.

A long course of treatment is required to effect a cure in such cases, and they must not get discouraged; for the old mode of treating diabetes with powerful tonics of iron have been tried, and are known to have no reliable curative virtues.

ON CERTAIN DISEASES OF THE SEXUAL ORGANS OF THE MALE.

I shall not treat in this chapter of those infectious diseases propagated by sexual intercourse, such as gonorrhœa and syphilis, for it would not be proper to specify the numbers used for those affections; neither shall I mention the special numbers for any other sexual disease, for the same reason. Patients and all persons not acquainted with medicine generally have a very imperfect idea of the process of curing disease. They do not comprehend that

all internal medicines cure diseases on general principles, or as general alteratives, and that the *whole system* must be more or less affected by medicines. Hence they fail to know why *one* number is given for different diseases; but to a medical man it is apparent, and looks consistent, and is common practice. Although specific diseases are understood to be treated by specific remedies, yet they operate as alteratives.

There are two diseases of the male organs which are usually spoken of as "*seminal* weakness," but as that term is too general to convey any correct idea as to the nature or cause of the disease, I shall speak of them in the order in which they occur; and as this is an important chapter to the young, I shall be plain in my remarks.

I. NOCTURNAL EMISSIONS.

By this term is meant emissions of the *semen* during sleep, attended with erections. These erections and consequent loss of semen depend upon lascivious dreams, as the reaction of amorous thoughts and fancies while awake. This morbid fancy begets a burning passion from which the patient cannot free himself even during sleep. This unfortunate action of the sexual organs is sure to undermine the constitution and destroy the health, the *mind*, and manly bearing of the person so afflicted. The insidious, the deceptive, yet sure cause of maladies so difficult to cure does this lead to, that I deem its importance to

those unacquainted with its tendencies a reasonable apology for this chapter.

Nocturnal, or nightly emissions are generally induced by the equally pernicious habit of masturbation, sometimes called *self-pollution*, and *onanism*, all referring to the same thing. There is no difference in the effects of this habit, whether the emissions occur unconsciously, during sleep, or are produced by other artificial means, while in the waking state—the effect upon the system is the same. Night emissions, however, show that the sexual organs have been *weakened*, and are inflamed by masturbation; this latter is always the exciting cause of the former. The habit of this unnatural vice is contracted while the person is very young, and long before he is aware that it is hurtful or can in any way prove injurious. I have had confessions from many to this effect. Books of instruction are now more common, still there are thousands who know not that this habit is a suicidal act.

Night emissions never can be cured while masturbation is practiced, and the use of opium or ardent spirits, if persisted in, will not more surely result in the ruin of the constitution and inevitable death than will this habit of self-pollution!

This habit is not confined to males alone, but is practiced by females also, whose education has been neglected. A physician or any intelligent person cannot fail to detect the habit in either sex, by the effects it has upon their manner and appearance.

The diseases produced by this abuse of the sexual organs are far more difficult to cure than the *same ones* are

when produced by *other* causes; and indeed they *never* can be cured while that habit is continued. Its first effect is upon the nervous system, inducing a feeling of languor and depression—an indescribable feeling of depression in the morning—loss of appetite for breakfast, an irritable and gloomy temper, love of seclusion, aversion to company, and, in common parlance, a manifest want of energy, ambition, and vacillation of mind. These are only the earliest symptoms. The secondary effects are constipation of the bowels, dyspepsia, palpitation of the heart, and then follow those protean symptoms which are known to attend these diseases. I have treated patients having these last mentioned affections, and they would wonder *why* they did not get well—and perhaps infer that the treatment was wrong, or not efficient, when the true reason was, that those secret habits which *caused the disease* were continued, and as I before stated, no such can ever be cured until he or she *discontinues* those practices.

Many physicians have been accused of unskillfulness, because of the patient's sinfulness in this matter. It is true, these cases are more obstinate than others, yet I have never failed when I have had a reasonable *time*, and my advice has been faithfully followed.

Masturbation in the beginning is the sin of ignorance—the patients do not know that it is injurious, much less its fatal tendencies. But after reading these pages they will have no excuse.

II. SPERMATORRHŒA.

This disease differs from the last mentioned in this respect, that the semen passes away *without* any erection, or partial one. The patient is not at all conscious of it at the time, and it may take place while asleep or awake. It frequently passes while at stool, if the bowels are costive; at other times it is noticed in voiding the urine.

This disease is only the termination—the result and inevitable consequence—of masturbation or excessive sexual indulgence. It is not a distinct disease, but the *last stage* of a previous one. Spermatorrhœa depends upon chronic inflammation of the seminal ducts, more in bad cases upon ulceration of them. When the stage of spermatorrhœa or involuntary loss of semen occurs, all of the constitutional symptoms are alarmingly increased; in this as in night emissions, the nervous system and mind are prominently diseased. The mental sufferings are intense, bordering upon insanity and melancholy that cannot be described.

The patient has now passed the ability to masturbate, and he is in a degree impotent, hence his despondency.

TREATMENT.—In addition to the medical treatment, very much may be effected by mental, moral, and physical considerations. The first object to attain is to *break* up the *morbid* condition of the mental habits and social feelings. This can only be done by change of place, society and associations; cultivating a thoughtless, mirthful state of mind. Those who are, in common parlance, rude, wild,

and fond of social life, are very seldom subjects of these seminal diseases, but the reserved, studious, bashful, are generally its victims. A sea voyage, with proper medicine and full instructions in the nature of the malady, is a quite sure means of recovery.

In addition to the above, the patient should sleep upon straw or a mattress with as little covering as may be, according to the season. The object is that the body be not over-warm, for this excites the sexual feelings. To avoid the heat, the patient should never sleep upon the back. This rule must be insisted upon. A liniment of camphor and laudanum, the formula of which is given in the Appendix to this volume, may be applied on the small of the back on going to bed. The numbers for the treatment I do not specify, for reasons stated at the beginning of this article.

The shower-bath or sea-bathing is highly beneficial in restoring the nervous system, and breaking up the morbid condition of the mind and social feelings. Whatever in habits, diet, or medicine, or social influences is capable of arousing the vital energies, allaying the irritation or restoring the impaired functions of nutrition, should be brought to bear upon these cases, and the patient will generally recover.

There are many symptoms by which the above disease may be known which I have purposely omitted, as it would only expose the patient, and might lead the inexperienced to accuse the innocent of secret vices.

I would say in concluding this subject, that the married may injure their health in like manner, and induce *all* the

diseases above described as the effect of masturbation, by *excessive* indulgence. And in their case there is not any apology as in the case of the young and uninformed.

DROPSIES.

THE term *dropsy* is applied to all watery accumulations, in whatever part of the system they are abnormally found. It is a yellowish fluid somewhat of the color and consistency of milk-whey, and it is never found except in cavities lined by a *serous* membrane or in the cellular tissue. The latter lies immediately under the skin, and in an attenuated form invests all the muscles of the body. The *fat-cells* are situated in this tissue.

I shall briefly speak of the different forms of this disease, for it is always the *same*, but occurs in different parts of the body.

I. DROPSY OF THE CHEST.

There are two large cavities in the human body which are separated by the diaphragm or "midriff." The cavity above the diaphragm is the thoracic cavity, or chest. In this are found the lungs and heart only. The lower is the abdominal cavity in which are, immediately

under the diaphragm, the liver and stomach, and below them the intestines.

Dropsy of the chest is often the effect of disease of the heart, but may result from disease of the lungs and frequent pleurisies; and it may occur from any organic disease of the body. Dropsy is the same from whatever cause produced. In this disease the water is in the cavity of the chest, but there are many subdivisions of the thoracic cavity. This cannot be well understood without more anatomical knowledge than is generally possessed by common readers. There is a cavity between the ribs and lungs wherein effusion may take place. The heart itself is surrounded by a thick membrane, called the pericardium, or "heart case." Effusion in this cavity generally follows inflammation of that organ, especially if it pass into the chronic form. For my present purpose, the usual detail of watery accumulation in these several parts will be dispensed with as unnecessary, and I will include the whole under the general head of dropsy of the chest.

SYMPTOMS.—There are but few diseases more difficult to diagnose or ascertain than this, and I shall only refer to a few of the more uniform and special symptoms present which would be readily noticed by common observers.

The patient's breathing in all such cases is much disturbed. It is short, quick and gasping. If the amount of fluid in the chest be much, it obstructs the expansion of the lungs, and a sufficient quantity of air cannot be admitted. The patient complains of a peculiar feeling of *tightness*, as though a bandage were drawn tightly around

the chest. Percussion, or gently striking the chest with the ends of the fingers, produces a sound like striking a barrel full, or partly full, of liquid. The more important symptoms attending this disease are only found by what is known as physical diagnosis, with which the reader is not supposed to be acquainted.

The heart's action also is interrupted similarly to the lungs, for it too must have *room* to perform its functions. The heart's action may be interfered with, either from an accumulation of fluid in the "heart case," or from a large amount in the chest. In either case the symptoms are the same. The heart seems to *labor* hard, and the beating is not heard or felt to be so near the surface, but more deep and distant.

In all these cases of dropsy of the chest, when far advanced, the *posture* of the body, as well as exercise, has an important effect upon respiration and the pulsations of the heart. The patient feels the *tightness* and constriction of the chest, and the difficulty in breathing to be suddenly increased by exercise, or a quick effort or sudden emotion of mind. It is also much increased by the recumbent posture, and is relieved by elevating the chest with one or two additional pillows. In the later stages the recumbent posture cannot be tolerated at all; the patient cannot lie down, but has to be raised to nearly the erect position in the bed. The water then falls to the lower part of the chest, and allows more freedom to the upper portion of the lungs. The pressure of the fluid upon the diaphragm accounts for some of these symptoms.

There is generally a certain degree of pallor in such

cases—to use a common phrase—a “sickly countenance,” indicating grave organic disease. There are many other symptoms, referable to the stomach, liver, bowels and general health, which attend the above, and all are given under their respective heads; for dropsy of the chest is always more or less complicated with other diseases, or disease of other parts. It is more the *result* of a disease than a disease itself.

Dropsy of the chest is soon followed by effusion in the abdomen, and in the feet and lower limbs.

II. ABDOMINAL DROPSY.

This is readily recognized from the increase in the size, and the absence of that occasional softness and flaccidity of the belly which is common in health. Dropsy of the abdomen is called *ascites*; when the lower limbs become swollen it is called *anasarca*. This latter form of dropsy consists of an effusion in the cellular tissue, of which I have before spoken.

TREATMENT.—There is no disease in which all of the functions of the system are more implicated in its several stages. The treatment therefore must be directed to the whole system, or all the morbid conditions present. It must in all cases be remembered that dropsy is the result of previous disease more than a disease of itself. The first indication is to subdue all inflammatory action; for until that be done, diuretics will only increase the symptoms. The

kidneys cannot be stimulated while *inflamed*. This fact explains the frequent failure of our most potent and useful diuretics. Patients are often so anxious to get the "bloating" removed, that they become impatient, when, if they would consider this fact, they would not *trifle* with the kidneys while there is fever present, a hot, dry skin, or a furred tongue.

The treatment may be commenced with the use of Nos. 10 and 7, and a full dose of No. 44 once or twice a week. Then use Nos. 24, 22, 28, 30, 13, and while using these, a full dose of 45 should be used once a week till the bloating is removed. Then use medicines to support the system, and correct functional derangements; such as Nos. 11, 14, 31, or 35.

Sweating by means of "cold packing," or wet sheets, will be found a decided aid to the medical course advised. The water has to be removed through the skin, bowels and kidneys; hence the importance of attending to the skin as well as the other emunctories. Diuretics do not act freely unless the patient is kept *warm* and out of the cold air, especially if it be damp.

My remedies are full and complete for the cure of dropsy, but must be varied according to the condition of each case; some require to be continued, and others so changed as to get their special effects upon the organs the disease of which may be thought the cause of the effusion.

I have given several very useful formulas in the Appendix which may be used, when so directed on the bill of directions you receive with the prescription.

RHEUMATISM.

It is wholly unnecessary to detail the symptoms present in rheumatic affections; every one who has been thus afflicted understands them. As stated under No. 22, there are two kinds of rheumatism, or rather two different structures which are affected. When the joints are the seat of the disease it is called *articular*; when in the muscles or back, muscular rheumatism or lumbago; when in the hips or lower part of the back, in the region of the sciatic nerve, doctors call it *sciatica*.

Of the acute forms of this disease I will not be expected to speak, as I treat of *no* acute affections in this work. Still the chronic is but the sequel of the acute form. In cases where there has been a high degree of inflammation long continued, alterations of structure generally follow; the joints become enlarged, swollen and painful, often stiffened and displaced, the limbs weak, and their natural use destroyed. The use or mobility of the limbs is lost by two causes: 1st, the inflammation, and 2d, the non-use of the muscles, the natural strength and tone of which are always impaired by not using them.

TREATMENT.—All of the functions should be duly considered, and such numbers given as will make a general impression on all the secretions and emunctories of the body. If the liver is torpid, bowels confined, give No. 44 as a preparatory medicine; then give Nos. 10, 7, 13, 32 compound, 22 and 24 for the rheumatic diathesis, alternating with such other numbers as the symptoms require.

When the blood is thin and the patient pale and weak, Nos. 14, 31 or 35 are indicated. If there is a depraved condition of the blood and humors, then use 32, 21 or 27.

In cases of severe local pains and swelling of the joints, I have seen the most speedy improvement follow the application of No. 18 near or on the joint. A small plaster may be spread and put on one side; when that begins to discharge, apply it to the other side, and change it in this way, keeping the part sore for two or three weeks. This is an effectual treatment in connection with the remedies above-mentioned. No. 18 should likewise be perseveringly used on the back in *sciatica*, directly over the seat of the pain. I have cured many of the latter cases with No. 18 alone.

DISEASES OF THE HEART.

The heart, the great central organ of the circulation of the blood, is subject to organic as well as functional diseases. By organic disease of the heart is understood an alteration in its structure—such as an enlargement with thinning or *thickening* of its walls; also a change in the different valves, from the muscular to the cartilaginous or bone-like character, which renders them unyielding, and prevents them closing sufficiently tight to sustain a natural circulation of the blood through the heart. The above affections are wholly beyond the reach of medicine, and happily of extremely rare occurrence.

It has become quite common to pronounce every little disturbance in the heart's action "heart disease." I am daily consulted by patients who have been under treatment for "heart disease," and whose minds are sadly depressed by the hopeless nature of such a serious affection. On examination, I can truly say that not *one* in a hundred of these cases had any of the positive, or general signs of *valvular* disease or of enlargement of the heart. By reason of the effect of mental impressions over the heart's action, a physician ought never to pronounce that such disease does exist, without a full concurrence of the well-known symptoms. The *close* discrimination so frequently made by many who would *appear* wise above others, was illustrated to-day while writing this article. A lady called to consult me who had been rather feeble for a year past, and was evidently passing the climacteric period or "turn of life." She was greatly depressed in mind, and when speaking of her supposed fatal malady, the heart would respond to *emotions* of the mind and beat or palpitate furiously. But when the mind was engaged upon other subjects no such effects were observed. I inquired what particular disease of the heart her physician had pronounced hers to be. She replied that he had told her "there was a *very little* water in the heart—did'n't think there was much, but there was a little!!" He probably discovered just enough to *lay claim* to her confidence in *his* superior skill, and just enough to disturb her mind so that the heart would *thump* assent to his learned opinion!

Valvular disease of the heart can only be detected by

certain sounds which are produced by the above condition of the valves, and it requires a practiced ear to detect them—no external or visible signs are at all reliable.

Functional affections of the heart are more frequent. By this term is understood that the heart's action is not natural—that it beats too rapidly or too slow, too frequently or irregularly. This condition is called palpitation of the heart, and perhaps no one disease or attendant *symptom* upon disease has perplexed the physician or alarmed the patient more than this. But what is palpitation of the heart? Is it a disease of itself?—or is it only a *symptom* of a certain enfeebled condition of the body and general health? After very extensive observation of this phenomenon of the circulation, I believe it to be, in nine-tenths of the cases, only a necessary effect of other diseases, and not an idiopathic or separate affection.

A patient just recovering from a fever or any acute sickness, if he gets a little fatigued, will have palpitation; one who is debilitated from *any* cause is subject to the same upon the occurrence of sudden mental emotions and over-exercise, as is well known.

When the stomach is weak and in a state of chronic irritation, palpitation can be *produced* at any time by eating a bit of meat, mince-pie or apples, drinking strong tea or coffee—in fact any thing that irritates the *stomach*. Every dyspeptic and invalid knows this to be true. Palpitation then may be, and often is, only a symptom of other diseases; the change in the heart's action is but the result of a debilitated and irritated condition of the general system. Hence this affection is almost invariably found associated

with dyspepsia, disease of the liver and lungs, and nearly all forms of *chronic* diseases, whether functional or organic. In all departures from health, whether it be in a chronic or acute form, the nervous and circulatory systems are affected. In that class of cases where there is imperfect digestion and consequent defective nutrition this disturbance of the heart forms one of the *prominent* symptoms.

Many patients, especially weakly females, are often treated with active remedies for "heart disease," or *palpitation*, when no such disease exists, the palpitation being the result of other derangements, as headache is often produced by derangement of the stomach or bowels.

The treatment proposed is to regulate all derangements of the system, invigorating the general health by removing all irritation, giving tone to the organs of nutrition and the nervous system. This course will readily cure four-fifths of the cases of "heart disease" and other nervous affections about which physicians are so perplexed, and patients so much alarmed.

I could report many cases illustrative of the truth of these remarks. I recollect two cases in particular, who applied to me eight years ago. One was a young man of twenty, the other about twenty-five; both had been treated by physicians of high standing. The usual treatment had been faithfully applied for over one year in the first, and three months in the second case. Being consulted in these cases, I advised treatment to invigorate the nutritive powers of the system, not, however, with "tonic bitters," and trash usually given for that purpose, but pathogenetic remedies, and in six weeks both of these

patients were well, and have remained free from "heart disease." Cases of this kind are frequent, and may be readily cured by directing medicines to the digestive organs, with a view of improving the blood and general health, whereas, if treated for genuine disease of the heart, they will result in consumption or dropsical effusions.

Whatever tends to over-stimulate or to debilitate the nervous system is a direct cause in the production of palpitation of the heart. Masturbation or excessive indulgence of the venereal passion is a prolific cause of this disease in the young. That habit and the opposite excess must be abandoned, or a cure will not be effected.

TREATMENT.—As preparatory to medication every artificial stimulant must be abandoned, such as liquor, tobacco, coffee and tea. A quiet, even tenor of mind should be cultivated, guarding against all sudden or violent excitements of every kind. Quietness and moderation is the mental part of the treatment. Medication also will vary according to the age and sex of the patient; therefore, I can only give general rules.

Every organ and function of the body must be duly considered in treating these cases, for harmony of function is health, and to sustain that the elements of nutrition must be in a definite proportion corresponding to the consumption or waste of these elements in the support of life.

The following are among the numbers to be used, so changed and varied as to meet all the various derange-

ments and symptoms present. When dyspeptic symptoms, torpor of the liver, and costiveness are present, use Nos. 10, 14 or 28, 31, 11 or 13. It is not intended that the numbers must be given in the order here enumerated, either for this or any other disease.

After those organs have been restored and a more tonic and anodyne treatment is required, any of the following numbers may be used : 13, 3, 11, 29, 41 or 48.

DISEASES OF THE NERVOUS SYSTEM.

NEURALGIA.

THE symptoms of neuralgia, like rheumatism, are so marked and plain that it is not necessary to detail them. The treatment, therefore, is all I speak of here.

Neuralgia appears under two forms. In one class of cases the pain begins at a particular *time* of day, and increases until it becomes intense, then gradually subsides and disappears at a particular hour. At the beginning the pain may be more diffused over the head if that be the seat of the disease, and it gradually settles at one point when it becomes the most severe. This type of neuralgia is known as *intermittent*, from the regular recurrence of the pain. It may recur every day, or on particular days, like ague. Some have it every third, fifth, seventh, or fourteenth day, and even at longer intervals.

The length of time between the attacks is not important to observe, but the regularity of its return shows its periodic or intermittent character.

The other variety of neuralgia is *continued*, the pain changing from place to place. It much resembles the pain of "wandering rheumatism." All of these migrating pains, not dependent on local inflammation, are properly neuralgia, and they may occur in any part of the system.

TREATMENT.—In the intermittent variety, the disease is produced by malarious causes; the liver and stomach must be attended to. Give Nos. 10 and 7;—or a bilious physic (44) first, and follow it with 10 and 7. Then give No. 27, followed by 3, 13, 17, 29, 28, or such other remedies as the present symptoms indicate.

SPASMODIC DISEASES.

I. EPILEPSY OR FITS.

WITH the usual symptoms of epilepsy or "fits," every person is acquainted who has had the care of such patients, and it is not within the design of this work to describe at length any disease with which the public are sufficiently acquainted to recognize the symptoms by the usual name. But for further information the reader may

refer to remarks upon the following numbers, viz: 29, 34, 41 and 13.

In treating Epilepsy, every known cause of nervous and mental excitement should be scrupulously avoided, and strict attention should be given to the condition of the bowels and other habits which tend to weaken the system.

TREATMENT.—First correct all derangements of the stomach, liver, and bowels, by the use of appropriate remedies for those purposes. Then give No. 34 for several weeks, and if they seem to control the spasms, continue their use for six or even eight weeks. Then these may be omitted and Nos. 29, 41 or 13 may be substituted. When using these numbers, if headache or dizziness supervenes, the dose should be lessened or omitted for a few days.

II. HYSTERIA.

Before describing this affection I wish to correct some popular and vulgar notions which are almost universally connected with it.

Hysteria or hysterics is unfortunately an unpopular disease. To have the gout is no disgrace but an acknowledged evidence of "good living," good liquors, and late suppers. Hysteria on the contrary, in the minds of the vulgar, is a term of reproach, as though this disease was a

matter of choice, or to be classed among the vices like intemperance or lewdness. Even the most charitable view taken of it is that it is "nothing but the hysterics." For the want of a proper understanding of this disease it has become so unpopular that a physician has to avoid the use of the name altogether. Should the honest doctor say "the lady has hysterics," it would be almost a personal insult, and if she have a husband or lover it might lead to an "affair of honor." Hysteria has become a useless word. Its use where it properly belongs is no longer tolerated, and should it be incautiously used the doctor will see *one* wry face at least, and it always will remain wry and nothing but wry toward the "ignorant blockhead who thought *I only had hysterics.*" A case of hysteria is something about which every body must have a word to say, and in a spirit too which reflects no credit on their intelligence or goodness of heart. Why, to be unsympathizing, harsh, or to make merry over patients of this class is no part of any one's moral duty so far as the books of "*Maccabees*" teaches, that I am aware of. But, to be serious, there is just such a disease, call it by whatever name we may. Nor is that any more reason for reproach than there would be to cuff a five-year old urchin because his daddy's name is Smith!

All of these common ideas concerning hysteria have grown out of the fact, that it has not proved fatal frequently enough to be regarded *dangerous!* The sympathy for the patient is lost for the reason that, while suffering so intensely, she did not die when the spectators thought she would. It is often said that one will never die with

hysteria, but that is an error. It may gradually wear out the system, like consumption or any other chronic disease, but such patients will never die *when they expect to!*

Is hysteria a disease, or the *symptoms* of a disease? I regard it the latter, and its cause is to be found in derangement of the nerves of the uterine system—sometimes of the stomach or liver. Functional derangement of the e organs generally precedes an attack of hysteria, or sudden unpleasant mental emotions may excite it.

SYMPTOMS.—Were I to undertake to describe *all* of the various phenomena which have been observed in this disease, it would comprise *all* of the symptoms that ever are present in *all* and every disease known in the calendar of human suffering, *with a few symptoms added*, the better to satisfy the patient that her doctor “understands the case.” I shall therefore speak only of a few uniform characteristics.

1st. MENTAL CHARACTERISTICS.—The patient is constantly dwelling upon the probable speedy termination of the disease in death. There is a morbid acuteness of feeling, and every pain or change of feeling is at once believed to be either an *increase* or a fatal change of the disease, or, peradventure, an entirely *new* disease “setting in!” Every change of sensation is thought to be a disease of the part where it occurs, nor can the patient be convinced that it is *not so*. The mind seems to be in an untiring search for some *new* view of the case whereby to account for the “manifold suffering.” There is a morbid *fear* of death—

the full conviction of a speedy death—not so much a fear of it as a certainty of it.

2d. There is a remarkably incredulous state of mind in regard to any opinion given by physicians or others. No one doctor or one person need expect long to retain the confidence of a hysterical patient, so far as the disease or prospect of cure is concerned. They will believe you in regard to any other matter, but *your views* of their case will very soon be so “*absurd* for a reasonable person” that they can’t believe you.

3d. There is a loss of memory, or, as I have thought, an inability to receive and retain any impressions contrary to those which originate in their own minds; nor can the most shrewd physician state any proposition so clearly and forcibly that the patient will believe it till his *next visit*. This I have tried repeatedly. In fact they seem to lose *confidence* in every thing, except the certainty of dying very soon. Hysteria never leads to suicide. They invest death with too many solemnities, and feel too sure of it to hasten that event.

4th. The mind seems affected with a mental *incubus* from which the unfortunate sufferer cannot rally nor shake off. They also have a perverted idea about the actions of medicines. They seem to think that medicines should cure as quick as gunpowder will explode when a coal of fire is applied, and that a doctor who knows any thing can give medicines in the morning that will cure by *two o’clock!* Others have no faith that any human skill can avert the “impending crisis” in their case. One peculiar feature is, these patients are sure to get worse *after* having been bet-

ter! and the regular rotation of better and worse is a "fixed fact."

5th. Another peculiarity is that *no medicine, no matter how inert, will exactly agree with them.* No one point of which I have spoken is so uniformly true as this. Every change of feeling or *new* sensation, however slight, such patients *always* accuse the medicine of producing. The whole mind and nervous system is inclined to the *opposite* of whatever may be said or done for them.

I have said enough upon the nervous and mental character of hysteria to detect it in any case without the aid of other peculiarities. The physical symptoms are not reliable, because in a genuine case they will assimilate to any disease the patient *expects* to have.

There are all grades of severity, from mere occasional faintness to complete spasms, and total loss of consciousness; and, as remarked in the beginning, I do not intend to give more than general or characteristic features of the disease. A fluttering sensation of the heart, a certain numbness and prickling sensation of the extremities, occasional blue or livid color in the fingers, sometimes reaching to the elbows, and dizziness, are marked peculiarities.

In the spasmodic variety, called Hysterical Fits, the symptoms last described are followed by various convulsive efforts, or cramping, with a peculiar contortion of the *neck* and body, which no one can mistake who has once witnessed it. The spasm differs from epilepsy in this, that it takes a hysterical patient a long time to get "fairly a-going." It is this fact, perhaps, more than any other,

that has left the impression with spectators that the thing was not genuine. But it is, and this is the *distinguishing* feature in such cases.

There is a strange blending of tears and smiles, of spasms and relaxation. I have often seen this "fourfold state" passed through in an hour's time.

I have said that hysteria was an unpopular disease, but, nevertheless, it is a *real* affection—one in which the patients suffer as much as though their full view of the case were a positive reality. I believe their mental sufferings are greater than they would be to die, because they realize more intensely their condition.

No one should be mortified or delicate in acknowledging they have hysteria. Nor ought a physician to hesitate a moment in declaring its nature. I know a lady who began to recover from the day that she was fully convinced and willing to acknowledge the character of the disease. When the patient is convinced and plainly told that the case *is* hysteria, the cure is more than half performed. There is some reason for comparing it to an *incubus*. The moment a person having that affection can impress upon his mind that it *is* an incubus, all the impending troubles are past. This is a well-known fact. But hysterical patients will not believe they have such a disease, but insist upon its being something else, and that of a most obstinate and *fatal* character. To overcome this morbid action of the nervous system—to break the spell of gloomy apprehensions, is the first point to attain, just as in the case of incubus spoken of. But the doctor who *first* undertakes this precarious task must not expect to have any

thing further to do with the case, nor perhaps the second, nor *fifth!* But the sooner the patient is made acquainted with the true nature of the case in a *proper* and philosophical manner, the sooner will be the *recovery*. When this point is fairly gained *medicine will have its proper effect*, and will not *disagree* nor produce such unusual results. It is thought by the unmedical that hysteria cannot prove fatal. That is a very great error. Congestion of the brain may occur, or spasms of the heart or lungs. The patient should, under all circumstances, receive all the attention, kindness, sympathy, as well as prompt medical aid, to relieve all present symptoms, as though it were epilepsy or apoplexy. Remember, the sick don't have their choice in diseases any more than we could *choose* our dreams or relations!

It would not be arrogance in me to say that my treatment in all these nervous diseases has been especially successful. I have ever felt a particular interest in these cases because of their frequent neglect and unphilosophical treatment, both as to the body and mind.

The question has been raised whether *males* are subject to hysteria? On this point I can not enlarge but will only say, that a *kindred* affection (if it is not proper to apply the same name), in all the essential elements of the disease, have frequently been observed in males. Spasms of a like prolonged and writhing nature have been present. All the *mental* peculiarities of hysteria I have often witnessed in males. In all these cases there was a more marked derangement of the stomach and liver, however, than in the opposite sex.

TREATMENT.—No definite course can be given; all these cases must be treated on general principles by attending to all the great functions of the system, regulating the stomach, liver and bowels, and joining with this medicine to increase the red globules of the blood and to give *tone* and energy to the nervous and muscular systems. Medicines of that class are Nos. 10, 28, 14 and 31. With the last two, 36 or 29 should generally be given night and morning. Nos. 3, 13, 11 may be given in case the patient can take medicines prepared in spirits. As a common rule they cannot. When that is the case give either of the following: 41, 35 and 34. If there are nervous chills give No. 17.

DISEASES OF THE BLOOD.

SCROFULA.

SCROFULA, like tubercular consumption, is generally hereditary, but may be produced by external causes. The same condition of the blood and humors of the system which induces *tubercles* in the lungs in one case, in another produces a slow inflammation in the superficial glands about the neck and arm-pits, which will end in ulceration, and might properly be called *tubercles* in the glands of these parts. The same morbid changes occur as in consumptive cases in regard to the red globules and derangements of

the general health, but emaciation is not so rapid. This may be explained by the fact that in scrofula the *matter is discharged from the system*, whereas in lung diseases much of it is *absorbed and mixed with the blood*. But as it is no part of the design of this book to trace minutely the *cause* and investigate the pathology of any disease, but to deal only with the symptoms and *remedies*, I shall now refer to the general external characteristics of scrofula.

The true scrofulous constitution is marked by light hair, large blue eyes, a fair or florid complexion, and a nervous lymphatic temperament. But to this general rule there are exceptions; for I have seen scrofula in patients having most of the opposite conditions. Both sexes and all ages are alike subject to it, the earlier period of life being the most favorable to its development.

The glands usually first affected are those situated about the *neck*, from the ear to the collar-bone, under the lower jaw and arm-pits. These become swollen; after a time the glands become livid and soft, indicating that suppuration has occurred. The matter discharged has a peculiar, curd-like appearance. These ulcers are not very painful, but are very slow to heal, and are liable to gather again.

Scrofulous ulcers may form upon any part of the body, but generally in the glands of the neck. In the earlier stages of the disease the general health does not seem to be materially impaired. When ulceration, however, has continued for a considerable time, the patient becomes pale, languid, debilitated, with all of those usual external signs indicating a *serious constitutional* disease. Always

sooner or later a *cough* is developed, and the patient sinks gradually with pulmonary consumption.

Scrofula has a special tendency to locate upon the *bones*, the larger *joints*, and their investing membranes. But few patients escape these local affections of the osseous or bony system. The inflammation in these is characterized by an indolent progress and livid appearance.

The eyes, ears and nose are often affected by this disease. Indeed, no part of the body has any immunity from its attacks.

There are two conditions which not only call it forth in those who are predisposed to it, but which produce scrofula. These are a low, damp climate, or living in cold, damp rooms poorly ventilated, as in basement rooms in cities, or in crowded apartments where the air is tainted with innumerable impurities. The second condition is a scanty, unwholesome diet which of itself must impoverish and deprave the blood. *Filth* and a scanty or unwholesome food is the natural stimulus of the scrofulous diathesis.

No patient can recover while remaining in such situations, or subject to such food and other circumstances. A *dry*, invigorating mountain atmosphere, strict cleanliness, and a sufficiency of wholesome food are essential conditions for recovery.

TREATMENT.—In prescribing, a due regard must be had to the *several stages* distinguishing its progress. Early in the disease, while the glands are yet inflamed and *before* suppuration takes place, the treatment may consist of the

use of 32, 21, 10, 7, 9, so changed and varied as to meet present indications. After these or any one of them have been used for several weeks, then the ointment in formula No. 26 may be applied to such of the swollen glands as are not changed in *color*, for if matter has formed it should be immediately discharged. I think great injury has been done in the treatment of scrofulous swellings by the too early use of ointments to *scatter* or absorb them without having previously given proper *internal* remedies. If the glands are very much enlarged and inflamed, it is the best plan to poultice them—produce suppuration and discharge the matter. I have seen consumption of the lungs speedily supervene upon the dispersion of these tumors. An external discharge can in no case do harm, but driving the very seeds or elements of the disease back into the circulation must be productive of great injury. It transfers it in the majority of cases directly to the lungs. The patient had far better suffer the disfiguration of a *scar* upon the neck than *risk* tubercles in the lungs.

In the advanced stage, when the powers of the system are debilitated, the patient very pale or emaciated—when there is evident constitutional disturbance—a more tonic and invigorating course is necessary. At this period some of the following numbers will be indicated: 3, 13, 11 or 31, occasionally alternating with 32 or 27.

The ulcers should be cleansed with a soothing tepid wash. A decoction of bitter-sweet or of common yellow dock is excellent for this purpose, as well as to heal them. After they are cleansed apply a plaster of No. 33, in the Appendix.

The faithful use of these remedies, and observance of these plain directions, will cure four-fifths of scrofulous patients. My treatment has been fully *tested* in all stages and grades of scrofulous affections, and I can confidently say that it is more certain, safe and available than any yet proposed for the cure of this justly dreaded malady.

DISEASES OF THE SKIN.

MEDICAL writers have classified and described over *sixty* varieties of disease of the skin. As a work of science that is well enough, but for practical purposes it is as useless as would be the minute description of every spot and shade of color on a butterfly's wing. The cabalistic nomenclature and nosology of the voluminous old authors are instructive only as a monument or record of misspent labor. These confused genera divided into endless species and varieties afford no practical rules for a corresponding difference in the treatment. I shall only speak of a few of the more common diseases of the surface and call them by such names as they are generally known by.

SCALY DISEASE.

A scaly eruption upon the skin may be produced by several distinct causes, but the eruption itself being so nearly alike that it is difficult to determine the true cause

except by the history of the case. Nor is that particularly necessary, as in the majority of old affections of this class the treatment is quite similar.

When the scales are quite large, ulcerating underneath, leaving a red base and thickening of the integument, and appearing mostly on the hands and face, it is a form of Leprosy. These cases are not frequent, yet I have seen many during my *itinerant* practice.

Other forms of this scaly condition of the skin have a syphilitic origin, which during their progress assume many forms and peculiarities not important to describe. There is also a scorbutic, cachectic state which produces a rough, bran-like skin, and which at points where there is much irritation, may degenerate into indolent, unhealthy ulcers, difficult to heal.

Another form of skin disease is the PUSTULAR, which begins as a small pustule wherein a yellowish glutinous matter readily forms. This rapidly spreads until large pustules or clusters of these pustules are united, and a large continuous scab forms over them. This species is most frequently observed upon the scalp and face. The incrustated scab often becomes *dark*, and is not easily detached. During this stage a whitish, thick matter oozes out from the margins of the scabs.

In the above varieties of disease of the skin a protracted course of *internal* treatment is of the greatest importance. Remedies to act upon the blood and humors of the system, and such as will act as alteratives directly upon the skin, are indicated.

TREATMENT.—First correct all functional derangements of the stomach and liver by the numbers elsewhere described for that purpose. Then use the following numbers, changing and alternating to meet the symptoms of each case: Nos. 32, 21, 27, 22 and 13, which are all efficient compounds, to correct the blood and change the condition of the skin. While using the above a tepid bath of castile-soap and water may be used from four to six times a week, or any of the baths or washes mentioned in the formulas given in the Appendix. The sulphur baths especially are of great efficiency in these affections when *properly* and *perseveringly* used. By a bath is meant simply a wash to be applied to the body by means of a soft sponge or small towel, just as you would wash the hands or face. These baths not only remove the acrid secretions from the skin but produce an alterative effect upon the *skin*, thereby materially assisting the action of internal remedies.

Where patches of ulceration exist, if they are inflamed and irritable, 33 or 49 may be used, or any ointment given in the Appendix for that purpose. In that variety when the scab is black, as before stated, No. 49 is almost a specific.

SALT RHEUM OR TETTER.

The peculiarities of this species of tetter are well understood, at least sufficiently so for the patient or any one to

recognize wherever it may appear. It is quite difficult to cure, radically, but the treatment here pointed out will always speedily heal the sores and restore the skin to a soft pliable condition. Yet a little redness is quite liable to remain where the disease has existed.

TREATMENT.—To treat Salt Rheum with the hope of a permanent cure, internal remedies, such as are described as blood alteratives, must be perseveringly used. Of this class 32, 21, 22 and 27 are the most efficient, especially 32 and 21. •

While the above are being used, the following ointments are to be locally applied: 33 or 49, or such numbers as are given in the Appendix for this purpose.

For further particulars of treatment, refer to Nos. 32, 37, 49 and 33, in Part II.

CHRONIC AGUE—ENLARGED SPLEEN.

IN malarious localities ague and fever often assume a very obstinate type. The usual remedies appear to lose their curative powers over the disease. The type of chronic ague is various; in some cases the chills recur every *other* day, in others every *third*, seventh, fourteenth, and even the twenty-first—perhaps not always on the days mentioned in the longer periods, but *near* them. These agues are always attended with more or less derangement of the stomach, liver, bowels, and often a

troublesome cough is developed. I have generally found that this disease is kept up by some *local* affection, such as chronic inflammation of the spleen and liver, with an enlargement of one or both of those organs, but especially the spleen. This view fully explains the cause of the continuance of this disease, as also the reason why the usual anti-periodic remedies fail to cure. The truth is the chill and fever are not the real symptoms to be treated; that would be like covering up a fire when it ought to be extinguished. Every remedy will fail in curing chronic ague with such complications until the *local* symptoms spoken of are removed. Quinine and all the other anti-periodic medicines will fail in such cases, although those remedies are good and effectual when properly used. To merely stop the *chills* is no cure, any more than opium is for a cough—it only quiets for the time and *appears* to be beneficial. As soon as its anodyne effect is gone the cough returns. So precisely is it in ague when quinine is alone used, and no medicine given to remove chronic inflammation and obstruction in the liver and spleen.

TREATMENT.—Begin by giving 10, 7, then 27, 3, and such other numbers as are required to correct all deficiencies and to regulate all the functions of the system.

CHRONIC DIARRHŒA.

Chronic diarrhœa is produced by one of the following causes: 1st. A debilitated condition of the digestive or-

gans which permits the food to pass into the bowels in an undigested state, thereby inducing irritation of the mucous coat of the intestine; or 2d, the bowels may become weak and irritated from the use of hard water or improper food. 3d, Chronic diarrhœa may result from a change in the natural qualities of the bile. This may be secreted in too large a quantity, or in vitiated quality, and from its acrid character irritates the bowels as in the instance of undigested food. Water greatly impregnated with mineral substances, as in the case of *river* water like that of the Mississippi, is especially liable to produce diarrhœa; and when it is produced by this cause it is a disease very difficult to cure. In such cases there is, perhaps, a lodgment of these mineral substances in the mucous coat of the bowels, which act as local irritants.

But in all cases of chronic diarrhœa induced by vitiated bile, by indigestion, or debility of the bowels, my mode of treatment will effect a speedy cure.

Occasional diarrhœa is of frequent occurrence, and as it is readily removed by ordinary treatment, it does not come within the scope of this work.

What is diarrhœa? I ask this more to attract the patient's attention and closer observation. Some I find call merely a thin discharge from the bowels, *once* a day, a diarrhœa. That is not properly so called. The true characteristics of diarrhœa are *frequent*, painful, unnatural evacuations. *Thin* stools merely, unless they are of an unhealthy appearance, are not a diarrhœa requiring treatment, only when some epidemic "Lowel complaint" is prevalent.

TREATMENT.—Chronic diarrhœa must be treated strictly in reference to the exciting cause; and I can only refer to the general principles to be observed in prescribing. To correct the liver and stomach, use Nos. 10, 14, 31, 3 or 11. To give tone to the bowels, and as a gentle astringent, Nos. 35, 34, 6, will generally answer every purpose.

CONSTIPATION OF THE BOWELS.

Costiveness has been quite fully spoken of under No. 12, in Part II., to which the reader is specially referred.

A confined state of the bowels is productive of many injurious effects upon the general health. It will if long continued *produce* other diseases, such as derangement of the stomach, plethora of the liver, and humors, and piles. Besides these the effects of costiveness upon the nervous system are especially injurious. It induces despondency, melancholy, and a state of mind which can only see the *dark* side of every thing. The mind becomes confused, the memory weakened, and there are very many other effects which it is not necessary to detail.

Aside, therefore, from the pernicious influence of constipation upon the general health, the mind and nervous system are greatly affected and impaired by it. An eminent Scotch doctor used to say, that two things were necessary to keep the body and *soul* in health, and these were, to “fear God and keep the *bowels* open.” This

homely phrase has much truth to commend its observance.

TREATMENT.—When the costiveness depends upon a deficient secretion of bile, Nos. 10 and 7 should be used until this state of the liver is removed. When it depends upon a want of tone in the muscular coat of the bowels use 28 and 41. In some cases there seems to be a degree of plethora or weakness, induced by long continued overdistension. In these cases a physic of 44 pills are necessary, preparatory to the treatment. This is to be followed by the use of 12 and 7, and either of the following as tonics and regulators: 13, 3 or 11. This treatment will permanently cure costiveness, when proper attention is given to the subject by the patient. A regular habit of going to stool, a proper amount of pleasing exercise and a vegetable diet, are great helps in restoring this function.

The practice of rubbing the bowels with the bare hand, or with a coarse towel at night and morning, cannot be too highly recommended; and the same remark applies to the stomach in dyspepsia. Rubbing the stomach briskly until the skin is deeply reddened will often relieve that peculiarly distressing feeling after eating, which a dyspeptic alone understands.

HEMORRHOIDS OR PILES.

Under No. 33 I have given the local treatment of the above affection, and the reader is desired to refer to that article for further remarks.

Piles as is well known are of two varieties, the external and internal. The former are often called "blind piles," because they do not protrude as do the others. This form of the disease is extremely troublesome. During the natural contraction of the bowels and abdominal muscles to expel the fæces, these tumors, situated along the rectum, are pressed down in such a manner as to obstruct the passage of the stools. And even when the bowels are evacuated there still remains a feeling of dissatisfaction, as if they had not been fully evacuated. There is a degree of continued effort and involuntary straining without any other result than to weaken the bowels and muscles of the abdomen. This is followed by a sense of weakness in the back or across the hips, attended with pain.

External piles consist of an enlargement of the hemorrhoidal veins situated about the anus. These tumors are of various sizes, from that of a pea to a walnut. They often become inflamed and extremely painful at stool. If they are large they are often pressed out during the passage of the fæces, and do not recede, but must be replaced by the hand. In some cases there is much relaxation and the tumors come down at every stool, yet do not become sore or inflamed. Any form of piles is liable to hemorrhage; hence, when that occurs they are called "bleeding piles." The internal variety are quite liable to bleed, often to such an extent as to produce great prostration.

TREATMENT.—This will consist of regulating the bowels, removing chronic inflammation, and giving tone to the

parts. For these purposes Nos. 10, 7, 32, 11 may be used, while 33 is applied to the tumors. In the bleeding variety, after the use of some of the above numbers, according to the case, 35 may be used with general success.

When the tumors become large and protrude as above described, a ligature must be applied to remove them. This is a radical cure, and is safe. This must be done by the local surgeon.

I have given several very useful formulas in the Appendix as local applications, any of which may be used if 33 and the numbers fail which I have referred to.

SICK HEADACHE.

Sick headache is of so frequent occurrence that the symptoms are generally well understood, therefore little need be said by me in regard to them. No affection not specially affecting the general health is so troublesome or causes more intense suffering while it lasts. It is impossible to correctly describe the intensity of the pain and distress which the patient suffers. Those only who have had the disease are able to understand the phrase "nauseous distress." It is usually preceded by a costive state of the bowels or acidity of the stomach; any derangement of the stomach may produce it. Fatigue or excitement, over-exertion of either body or mind, excess of heat or cold, and going without regular meals, especially a

slight cold affecting the *head*, are quite sure to be followed by sick headache.

The pain usually settles in the forehead or temples, and seems to increase till it reaches the highest point of endurance, then to gradually subside. Free vomiting is followed by speedy relief, but perfect *rest* and *sleep* are essential to full relief.

There are certain symptoms attending this disease which seem to indicate the proper means of cure at the time or when the *premonitory* symptoms appear. When the affection is about to subside the patient feels a peculiar motion in the bowels, as though physic had been taken, or a sort of a passing down of the *contents* of the stomach and upper bowels as though an evacuation was about to occur. This is always followed by a mitigation of the pain in the head and nausea, particularly if the bowels do move, which is often the case.

In some cases I have noticed an unusual flow of *urine*, even a large quantity passed in a few hours, which is generally pale. Whenever the urine is thus increased, the same moderation in all the symptoms takes place as when the bowels begin to act. No patient who has had sick headache can fail to have noticed these phenomena.

The use to be made of these symptoms is this: that just as soon as the first symptoms of sick headache are felt, a *quick* physic or *diuretic* should be given in order to hasten the natural termination of the disease.

Sick headache seems to be produced by a regurgitation of bile into the stomach; for in health there is no bile in

the stomach, and its presence there is extremely nauseating.

TREATMENT.—In order to prevent the recurrence of this disease, a thorough course of treatment for the liver and stomach must be had. It is more properly a liver, stomach and bowel difficulty than of the *head*. As was stated, there is an increased flow of bile, derangement of the stomach and costiveness present, the present relief of which is followed by cessation of the pain in the head and other symptoms.

During the attack the most rigid abstinence should be observed; take no food whatever, but drink freely of hot, *weak* tea. Take a dose of No. 40, then *heat* the feet well by the fire, and lie down in a quiet, dark room, and get to sleep as soon as possible.

Treatment during the intervals should consist of such remedies as 10, 7, 28, 13 or 3. If dyspeptic symptoms are prominent, in addition to the above, 14, 11 and 35 may be used according to the indications.

DISEASES OF THE EAR.

DEAFNESS.

ALL diseases of the ear, either external or internal, are liable to result in deafness, complete or partial. The causes of deafness may be enumerated as follows:

1st. Acute inflammation of the internal ear, or inflammation in any of the structures immediately connected with it, as in scarlet fever when the tonsils and the glands of the neck become swollen and remain enlarged. Also in measles and whooping-cough, or common "cold in the head," as it is frequently called. In all inflammatory conditions there is either ulceration by which the tympanum is destroyed, the eustachian tube permanently closed, or there may be only a chronic thickening of the membranes and an alteration in its structure, so as to render the auditory nerve which is distributed upon its surface, insensible to the vibrations of air.

2d. There is an opposite condition wherein deafness occurs gradually without any noticeable change *in* the membrane, except a peculiar *dryness*, the "ear-wax" becoming glutinous, adhering to all the parts and completely closing up the eustachian tube (that is, the little tube which passes through into the back part of the nose and communicates with the throat), like a hard ball. If the secretion of wax is obstructed, or viscid and glutinous, deafness will follow.

3d. Deafness may also be produced by over-stimulation of the auditory nerve, as in the case of sudden loud noises, as firing of cannons; or even by continued loud and discordant sounds, as with steam boiler or engine makers. The effect of these loud noises upon the ear is like too intense light upon the eye, destroying the sensibility of the optic nerve by over-stimulation.

Deafness occurring from the first *class* of causes is generally incurable, especially if the tympanum be ulcerated

to any great extent. The other varieties can often be cured, or at least materially helped.

TREATMENT.—Perhaps no disease has been more uniformly unsuccessfully treated than deafness. Yet the very best talent in the medical profession has been devoted to its investigation; for next to sight it is the most cherished and important of the five senses.

The principal reason of the failures in curing deafness has been the difficulty of applying suitable remedies to the diseased part. Such is the delicate nature of the mysterious structure of this organ that the use of such remedies as would heal ulceration, or restore the natural secretions in other members, have, when applied to this organ, often been found injurious or ineffectual. Oils and washes, as generally applied, cannot be made to penetrate to the diseased part. To obviate all these difficulties, I have invented a very convenient and effectual instrument, and combined the appropriate remedies in such a manner that they can be carried into the most minute labyrinths of the ear in a state of vapor. This mode of treatment is not only reasonable, but it is found to be the most successful of any yet proposed. I offer it to the public with the full belief that in all curable cases it will prove a valuable improvement in acoustic remedies.

The acoustic vapor is described and directions given under No. 50, in Part II.

HABITS OF INVALIDS.

CERTAIN things, aside from mere food, are necessary for the development of the body and its preservation in health. These consist of *air, solar light, heat and muscular exercise*. Atmospheric air, in a pure, natural state, is necessary for health, although *life* may exist for a length of time, even when very bad air is respired. By pure air is meant out-door air, that which is inhaled while the body is exercised in the free sunshine of heaven. The air in tight rooms and crowded apartments is decidedly unhealthy, as every one may readily be convinced by the lassitude and depression experienced in such places.

HEAT.

One fact I wish distinctly noticed: persons in poor health of every grade are more sensitive to cold—or rather this feeling of chilliness is within themselves—there is a deficient supply of animal heat; and as they remain much “in-doors,” are not aware of the high temperature in which they habitually live. I have often entered apartments of the sick which were really suffocating, ranging from 90 to 100 degrees, and that in *cold weather!* That in-door temperature should be higher in winter than out-

side atmosphere is evident, but most persons, even in winter, keep their rooms above summer heat. Heating rooms above 60 or 70 degrees rarifies or dispels the oxygen and renders it insufficient to support life. In the life principle it bears the proportion of water-gruel to new milk. The invalid may *feel* cold, but that sensation cannot be *cured* by heating the room, for that only increases the difficulty, by depriving the lungs of oxygen. Those who live indoors acquire the power of *enduring* the heat, just as a resident in the tropics does, and will complain of the cold until they are "baked alive." The heat of the *body* in such cases is kept down by hot air, and animal heat not increased by it. In the cold weather the heat is kept *up* by an abundance of oxygen in the highly-condensed atmosphere which induces an appetite for fatty and other highly-carbonized food. Nature's furnace for warming the body is in the body, not in the hot-air furnaces, tight stoves, and air-tight rooms! "But what shall I do," says the invalid, "to keep me warm?" *Save* the heat of the body—prevent it from too rapid evaporation by *dress*, not by "heating," or "burning" the life principle out of the air you breathe. If your system does not furnish animal heat sufficient, if the powers of nutrition are too much enfeebled to do this, then make warm clothes do it. Clothes are only another name for food—their use is to protect the too great evaporation of heat in cold or variable weather. The natural heat of the body varies only one or two degrees at the equator or the poles, yet how great is the difference in the atmosphere! In warm climates the extra heat of the body is evaporated by free

perspiration and thin clothing, or none at all; in extremely cold latitudes it is generated by a greater amount of fatty food, and preserved by furs, or thick clothing. In this way the atmosphere is not disturbed or impoverished.

SOLAR LIGHT

Is as essential to health as proper food for clothing. The effects of solar light, in its influence upon the human system, are manifestly important, although we are unable to demonstrate them. But this fact is well ascertained, that the blood and nutritive functions are decidedly impaired by its exclusion; and the uniformly pale, unhealthy look of persons excluded from solar light, is evidence that it is necessary. Both the animal and vegetable kingdoms furnish further conclusive evidence of this fact.

Naturalists tell us, that, in the course of healthy development a tadpole becomes a frog, and experiment proves that without *light* a tadpole *never* can become a frog. If light be essential to the development of the *form* and *growth* of the body, may we not infer that it has an important influence upon the maintenance of a healthy existence? Children that are thus excluded from the sun, never become healthy, and remain in the *tadpole state*! Those who live in cellars become meagre, rickety, and deformed in body, have a ghost-like pallor of complexion, and are early victims of disease. The free sunlight is as essential to the various changes constantly required in the system, as it is for daguerreotyping or the ripening of

fruit. The *tenderness* and *whiteness* of celery depend upon its being grown in the *dark*. A rose deprived of the rays of the sun grows pale, wilts, decays and dies. Analogous changes are observed in animals, and the human species are no exception to the general rule. The sun's rays are a powerful stimulant, aside from their chemical action upon the blood and secretions; and children must have it or become rickety, puny, and find early graves; the adult needs it to *preserve* the body in health. These subjects might be very profitably extended; but as I have frequently in the course of this work abridged or withheld much important matter, the economy of space must be observed here.

AMUSEMENTS WITH EXERCISE.

These have been amply discussed in lectures and health journals; information upon this point is abundant, so indeed is it in reference to the subjects of *air*, *heat*, and *light*; yet the wide discrepancy between the theory and practice of most persons, is a sufficient reason for introducing them here, however briefly it may be done.

The physiological effects of muscular exercise upon the living tissues are numerous, and absolutely essential to the maintenance of health. The alternate contraction and relaxation of the muscles play a highly important part in keeping up a free healthy circulation of the blood and fluids, also favoring the excretions, inducing perspiration, accelerating the motion of the bowels, and forcing open

the lungs, or forcing into them a plentiful supply of pure, fresh air.

In taking exercise one rule is imperative, that is, *diversion, amusement*, or call it what you will, must accompany it. The mind must be pleasingly occupied at such times. I care not for what the "stricter sect" may say of the "sin" of mirth, it is a natural gift—it is a *faculty*, and must, like every other faculty, be exercised. To the gloomy and desponding, and those even who are reasonably depressed in feelings, from a knowledge of their condition, mirth is a medicine. Miserable counselors are they for the sick who come with solemn faces. Despondency is a part of the disease, or the *mental* part—administer then the proper antidote. Some cannot bear large doses at first, but amuse them—take their *thoughts away from themselves*, that the nerves may be relieved, and gain strength by a *change* of subject. The invalid cannot *make* mirth; he "does not feel like it;" then help him, as you would a feeble person to walk. Their minds and sensibilities are morbidly acute—mirthfulness is often repugnant to them, as is medicine when one is very sick. I know from experience that invalids are often not aware of the amount of time they spend in *thinking* of their case, and in watching their symptoms, nor appreciate its bad effect, and the *load* of anxiety the mind is groaning beneath. When did you have a hearty laugh? Last week, last month, or last year? I remember when for two years I saw nothing, nor could find any thing which prompted the compliment of scarcely a moderate smile. When friends tried to interest me or divert my mind, I really thought it trifling

with solemn realities, still had I been better informed I could have "taken the medicine in confidence." In these suggestions I do not allude to those who are fatally diseased, but such as are able to *take exercise*.

FRIENDS OF INVALIDS.

As a physician, it is my duty to caution the "well," who may exercise the delicate office of friend and associate of invalids, to avoid as conscientiously as they would the "unpardonable sin," speaking lightly of the value of human existence, or the great event of death. This I have seen done, under the false impression of lessening the patient's sensibilities upon that subject. But it is inhuman, rough, and unphilosophical to do so. Neither can you divert or benefit an individual by speaking lightly of his malady or sufferings, nor is it at all amusing or a proper way of interesting the mind, by dictating thus: "Why, you should be cheerful; not gloomy, sad and cast down, and always looking on the dark side of things," etc. Now, my hearty, fresh-faced friend, these are words of torture, not of hope or comfort. You might with just as much propriety tell the emaciated patient, scarcely convalescent from a fever, to get up and walk, to *get* strength, in the room of taking him kindly by the shoulders and assisting him in taking a few steps, to exercise his muscles. *You* must cheer your feeble friend; he can no more cheer himself than you can lift yourself. He has unconsciously lost both the power and will to thus exercise the mind. To tell him to use this is imposing an impossibility. But you who are fat, well, and good-natured, should allure the

mind, which has long been in darkness, from the thick fog of melancholy to the light of hope — then you do the work of a friend and benefactor. I sincerely believe sensitive patients have often been hurried to the grave, and others driven there, by improper influences — by a disregard of the feelings, acute sensibilities, and peculiar “notions” of those whose minds and nervous systems are really as weak, or weaker, than their bodies. It may have been, too, *well* intended—done through ignorance or a false philosophy, nevertheless it has been fatal in its results.

Those who would successfully “minister to a mind diseased” must know the secret springs of human feelings, the natural preponderance of hope or despondency, must be naturally kind, generous and agreeable themselves, which, under the guidance of good common sense, will enable them so to manage their afflicted fellow-beings as to avert a fatal malady; if not, they may at least lengthen the journey, remove many of the thorns by the wayside, or smooth that path which is rough and gloomy, till the last kind office is done, which in turn must be done for all.

SUMMARY OF DIRECTIONS.

It is absolutely necessary that you read the more full directions given with each number in the book, where they are described, before preparing or using your medicines. This brief summary is merely to aid you in remembering them.

No. 1. Inhaling fluid—inhalé 15 to 30 drops.

No. 3. Put the powder into half a pint of diluted alcohol, which is water and alcohol equal parts. Let it stand one week. *Dose*—A teaspoonful three times a day.

No. 4. Put the powder into one pint of cod-liver oil. *Dose*—A table-spoonful three times a day.

No. 5. Dissolve two ounces of loaf-sugar in one gill of boiling water, then add the contents of the vial, and shake well. *Dose*—Half to a teaspoonful three times a day.

No. 7. *Dose*, one pill at night.

No. 8. *Dose*, from 20 to 30 drops, three times a day.

No. 9. *Dose*, from 10 to 12 drops, three times a day, in water.

No. 10. Put the contents of the box No. 10 into a half pint of hot water, and stir constantly until it is all dissolved, and then add one pound of white sugar, and raise to the boiling point. Sufficient water should be added so that it will measure just a pint, when prepared. *Dose*—From one-half to a table-spoonful, three times a day, *before* meals; to be taken in a little cold water.

No. 11. Prepare like No. 3, and dose the same.

No. 12. *Dose*, one pill at bedtime, as needed.

No. 13. Prepare like No. 3—dose the same.

No. 14. *Dose*, teaspoonful three times a day.

No. 15. Dissolve in one pint of water — inject once or twice a day.

No. 16. Dissolve in one gill of water and vinegar. *Dose*—Table-spoonful as required.

- No. 17. Dose, one to two pills three times a day.
- No. 18. Spread plaster, place it on the pain, renew it daily.
- No. 20. Dose, two pills three times a day.
- No. 21. Prepare like No. 10—dose the same.
- No. 22. Put the powder into one pint of diluted alcohol, let stand eight days. *Dose*—Teaspoonful three times daily.
- No. 23. Dissolve in one quart of rain-water. Wash the body every eight hours.
- No. 24. Prepare like No. 10—dose the same.
- No. 25. Dissolve in half pint of water—gargle twice a day.
- No. 26. Refer to page 133.
- No. 27. Dose, 10 to 16 drops, three times a day.
- No. 28. Add to this four fluid ounces of diluted alcohol—which is water and alcohol, equal parts—let stand one week, shaking often, then strain it. *Dose*—A teaspoonful three times a day, in water.
- No. 29. Dose, one pill twice a day.
- No. 30. Prepare like No. 10—dose the same.
- No. 31. Dose same as No. 14.
- No. 32 and 32 Compound are prepared like No. 10, and dose the same.
- No. 33. Apply a little to the inflamed *piles* every night.
- No. 34. Dose, *one* pill twice a day—for “water-brash,” etc.
- No. 35. Dose, from ten to twelve drops, in a wine-glassful of sweetened water, three times a day.
- No. 36. Dose, one pill night and morning.
- No. 37. Put it into one pint of rain-water. Wet the pimples once a day. *Never to be used internally.*
- No. 38. Put in one pint of water. *Dose*—A table-spoonful three times a day, in water-gruel.
- No. 39. Refer to page 149.
- No. 40. Put into half pint of brandy. *Dose*—Teaspoonful, as required.
- No. 41. Dose, one pill *only*, night and morning.
- No. 42. Refer to page 152.
- No. 43. Dissolve in one pint of syrup. *Dose*—Table-spoonful in water-gruel, three times a day.

- No. 44. Dose, one to three pills, as a physic.
 No. 45. Dose, *one* pill only, at bedtime. See page 156.
 No. 46. Dose, from 20 to 30 drops, three times a day.
 No. 47. Apply the ointment daily.
 No. 48. Refer to page 159.
 No. 49. Apply the ointment at night.
 No. 50. See directions on page 161.
 No. 51. Drop into the ear from two to four drops at night.
 No. 52. Smoke a thimbleful or more once or twice a day.

DOMESTIC MEASURE FOR LIQUIDS.

The following are those generally employed, and are sufficiently correct for all ordinary purposes :

A common tumbler	contains	eight fluid ounces.
Breakfast cup	“	“
Wineglass	“	two “
Table-spoon	“	half a fluid ounce.
Dessert-spoon	“	two fluid drachms.
Teaspoon	“	one fluid drachm.

The utility of these measures will be readily seen. Thirty-two table-spoonfuls make sixteen ounces, one pint apothecaries' measure ; sixteen spoonfuls eight ounces, or half a pint ; eight make four ounces, or one gill.

The so-called pint bottle does not contain a pint, but from two to three ounces less. Particular attention must be paid to these measures, both in preparing and taking medicines in the fluid form.

TO CORRESPONDENTS.

ANY person who may desire to consult the author of this work for any disease herein described, can do so at any time by letter. The following questions, intelligently answered, will afford sufficient infor-

mation of the patient's condition for me to prescribe and send medicine for the treatment of any case.

QUESTIONS TO BE ANSWERED.

- 1st. Is the taste in the mouth salt, fresh, sour, or bitter?
- 2d. Is the tongue coated? If so, what is the color?
- 3d. What is the condition of the appetite?
- 4th. Do you have pain in the stomach after meals? or an increase of pain when the stomach is empty?
- 5th. Have you acidity of the stomach? or cructations of "wind?" or spitting up of food? or watery stomach?
- 6th. Is the stomach bloated or tender, externally?
- 7th. Does the stomach feel full and uncomfortable after taking but a small quantity of food?
- 8th. Have you constipation of the bowels? and what is the color of the discharges?
- 9th. What is the color of the urine? Is it diminished or increased in quantity?
- 10th. Is there sediment in the urine? If so, what is its color?
- 11th. What is the complexion?
- 12th. Is it changed from natural?
- 13th. Is the skin dry and rough?
- 14th. Have you pain or tenderness in the right or left side, under the short-ribs; or the same across the small of the back, in the region of the kidneys?
- 15th. Have you a sensation of heaviness in any part of the head, a hot or cold sensation on the top of the head, or do you often feel dizzy and "light-headed?" Do you have frequent headache? if so, in what part?
- 16th. Do you sleep unnaturally sound, and wake unrefreshed? or, is your sleep disturbed and partial?
- 17th. Are your feelings variable—sometimes elated with hope, and suddenly depressed and discouraged about your case?
- 18th. Can you endure reading, study, or mental exercise of any kind? or, are your stomach symptoms increased by such efforts? State the condition of your mind and feelings generally.

19th. What kind of food causes distress in the stomach, or seems to disagree with you?

20th. Have you a sensation of numbness, coldness, or prickling, in the hands and feet?

21st. After meals, have you throbbing in the temples, a beating in the stomach, with flushed countenance and increased thirst?

22d. Is the breath fetid and bad?

23d. Have you sore throat?

24th. What is your age and sex? Are you married or single?

25 h. Males should state any symptoms of disease they may have pertaining to the sexual organs.

26th. Females should state the symptoms pertaining to any diseases they may have peculiar to their sex.

QUESTIONS TO THOSE HAVING DISEASE OF THE RESPIRATORY
ORGANS.

Such as desire to consult me for diseases of the lungs and throat, will answer the following questions, and add such other information as they may think important to a correct understanding of their case.

1st. How long since your health began to fail *before* you had a cough?

2d. How long have you had a cough?

3d. Do you cough hard and frequently?

4th. Are you hoarse, or is the voice changed?

5th. Have you much pain in the chest? and if so, at what point?

6th. Have you sore throat, or soreness in swallowing?

7th. Is the matter you raise thick and yellow? or white and frothy? or *tenacious*, somewhat like the white of an egg?

8th. Have you chills and night-sweats?

9th. Are your feet swollen?

10th. What is the condition of your bowels?

11th. Is consumption hereditary?

12th. Have you had hemorrhage of the lungs?

13th. Are you emaciated? Give a general description of your case.

QUESTIONS TO THOSE DESIRING TREATMENT FOR DEAFNESS.

- 1st. Is the deafness partial or complete?
- 2d. Are both ears affected?
- 3d. How long has the ear or hearing been affected?
- 4th. Is there any discharge from the ear? If so, give its character.
- 5th. State the cause of the disease, if it is known.
- 6th. State your age and sex.

 QUESTIONS TO THOSE DESIRING TREATMENT FOR CATARRH OF THE HEAD.

- 1st. How long have you had catarrh?
- 2d. Is the discharge from the nose constant? what is the color? and has it a fetid smell?
- 3d. Is the throat diseased, or is the catarrh confined to the head and nose? Give all the particulars of your case.

In writing, first state the number of the question, then answer it in a direct manner.

Any person desiring to consult me can do so by letter, enclosing a postage stamp, and writing their name, post-office, county and State, plainly. In the answer, my opinion of the case and terms of treatment will be given.

Address

E. W. TUCKER,

Sandusky City, Ohio.

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