

added something which gives a greenish color closely resembling purulent gonorrhoeal discharges, profuse, bland, thick and purulent reminding one of pulsatilla. Where we have a history of inherited sycosis, it would seem as though we might find in natrum sulphuricum a remedy that would go much deeper than pulsatilla, hepar sulphuricum or sulphur and clear up conditions that otherwise might baffle all our efforts.

With this much for a foundation, let us look at the mental and nervous symptoms which, please bear in mind, appear among the very earliest in the provings.

One of the most interesting phases of the mental state is its changeability. At one time they may seem depressed and tearful; the next time this may have changed to irritability, with disinclination to speak, or be spoken to. This picture shows the patient on the borderland of insanity and where will this be more frequently found than in your records of suppressed gonorrhoea or inherited sycosis?

In the nervous sphere, most of the symptoms are but slight modifications of the symptoms found under the other natrum salts. This will help to remind you that the remedy will be found in that group of remedies.

In conclusion, we would suggest that you take natrum carbonicum as your foundation, make a list of all the peculiar symptoms found in this remedy; in parallel columns record all symptoms found in each of the other natrum salts that correspond. By so doing you will get a picture that will go with you throughout life. The differentiation between these salts will be an easy matter after you have the foundation.

TWO CLINICAL CASES.

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Pseudo Heart Block. A man from Michigan was sent to me for diagnosis and treatment for a supposed condition of heart block. He had been told by several specialists that his case was hopeless; digitalis had "been tried" and because it failed the unfavorable prognosis had been given. The patient, approaching his fiftieth year, was recognized at first sight as a neurasthenic; he was an active sales agent of a very large business and lived the strenuous life so common to such business

men; he had been troubled with exhaustion and shortness of breath upon over exertion; his physician, knowing only one remedy for all cardiac complications, prescribed digitalis; his symptoms were exaggerated and he was sent to the specialist who told him he was incurable but continued the digitalis from the force of habit.

My examination revealed an arrhythmic heart beat averaging, at times, only thirty-eight or forty per minute. Under continued rest this rate would increase to fifty or sixty beats per minute while under violent exercise it was increased to one hundred or more. The auricular and ventricular beats were the same. Under no conditions was there any increase of auricular action and this condition could not occur in real heart block. The fact was that whatever impulses the auricular node developed were conveyed to the ventricle, but the auricular nerve mechanism was not doing its proper work at times. The man was a neurasthenic, his nervous system was exhausted and depressed by his strenuous life and the continuous and excessive use of tobacco, coffee and whiskey and, in short, his nerve innervations, needed for cardiac contractions, were below the requirements. His systolic blood pressure was below one hundred and the status was similar to the bradycardia following a depleting disease. It is a great mistake to pronounce a heart block when the pulse is slow. The shortness of breath was due solely to the impairment of lung circulation during exercise. When the tract of His is impaired the auricle is excited under vigorous exercise as all of the impulses do not get through to the ventricle; the real block is a rare disease and is related to some destructive phase of the auriculo-ventricular bundle. In this case there was no luetic history and the Wassermann was negative.

After a week's study of the case I detected a slight mitral insufficiency. Adonis vernalis, tincture, was prescribed and a month later the patient wrote that he felt perfectly well and that his pulse averaged seventy-two. Another case illustrating the danger of a hasty diagnosis and the uncalled for use of digitalis is thus recorded.

Leucopenia and the "Flu." The unsatisfactory treatment of many cases in the recent epidemic may properly be blamed to the damnable use of coal-tar derivatives and the stereotyped employment of opiates to relieve the cough. Another cause was

our failure to recognize the leucopenia and to increase the resisting power of the patient and the physician who did not put his patient to bed and administer mild, indicated remedies while consistently seeking to support the patient's strength made a great mistake. The trend toward a disseminated pneumonia with lung necrosis, following an early pulmonary edema, was evidence of a cardiac impairment which too frequently was ignored. Patients died without reason and we have learned a serious lesson at great cost in human lives.

Let me illustrate by one patient. A strong and well built woman of middle age was sent to our hospital with the initial attack of influenza; soon her temperature ran very high, both lower lobes of the lungs were rapidly involved and she developed a marked pneumonia with a delirium demanding complete restraint. The leukocyte count was under four thousand and her blood pressure was only 100; involuntaries were constant, bloody sputum was excessive and in every way she seemed doomed. The usual remedies were used for the lung condition and for the temperature; in addition, nuclein solution—10 to 30 drops—were given hypodermatically three times daily and strychnia sulphate—1/30 gr.—was likewise administered with equal or greater frequency. It was necessary to give rather large doses of bromides and hydrobromate of hyosine to quiet the nervous system and to induce sleep but in a few days the white count increased, the blood pressure improved and the heart attained a better force. Then, with the aid of our indicated remedies, the delirium passed and the patient made a slow recovery, being able to leave the hospital at the end of a month.

I quote this case briefly to demonstrate three points: first, the use of strychnia and nuclein to increase the blood pressure and the leukocyte count, which method I found advantageous in many severe cases during the epidemic; second, the absolute necessity of overcoming a pneumonia delirium by any remedy or measure which will induce sleep and rest; third, the beneficent effect of our homeopathic remedies compared to the danger in using aspirin and opiates; fourth, it is my belief that many of our cases were fatal because we did not recognize early the inevitable hypostasis due to a weak heart.