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VOL. I.

BATAVIA, ILL., NOVEMBER, 1908.

NO. 3

THE HOMEOPATH AND DIPHTHERIA.

DR. GLEN I. BIDWELL, '05.

Among all the cases that the young homeopath is called to treat there are none which will require more courage to enable him to be true to his precepts than the treatment of diphtheria. There are no cases where so many homeopaths are false to their colors as in diphtheria. Men who use the single remedy, who would raise their hands in holy horror at combination tablets, etc., go to anti-toxin at the first appearance of diphtheria. In making these statements I speak from an experience in a field where for my associates I have probably more pure homeopaths than can be found in any other city outside of Chicago, and among these men I know of only three who do not treat their cases with anti-toxin.

When the laity are all educated to the popular belief that anti-toxin must be used in order to save cases of diphtheria and are almost ready to begin malpractice suits if you do not concede to their demands, it takes some back-bone to stand for your rights and to be loyal to your teachings.

You who are studying under such favorable conditions as you have in Hering Medical College, may smile when you read this, but remember when the time comes for you to go forth to establish a practice the surroundings will not be so favorable. In place of encouragement you will receive harsh criticisms. When things look the darkest and most discouraging remember that one never lost anything by being true to one's beliefs and the ranks of those who are true to Homeopathy are not nearly so crowded as those of the false, and give much better chances for advancement.

Now just a brief word of what the homeopathic treatment consists. Does it mean the hurried use of anti-toxin? No! Does it mean the spraying of the throat with antiseptics? No! It means the use of the single homeopathic remedy administered according to the law of cure as laid down by Hahnemann in the "Organon," and that alone. I have never been able to find any paragraph in the Organon in which Hahnemann says use the indicated remedy for colds, fevers, rheumatism, etc., but when you have a case of diphtheria use something else, in fact anything that your patient or his friends may suggest.

Of course the users of anti-toxin make their claims for its administra-

tion on the results they obtain. I will give you a few cases, their treatment and results to substantiate my claim and plea for the use of our remedies in these cases.

It has been my misfortune during the past two years to have a number of diphtheria cases under my care and none of them have had anything but the single remedy administered in the potency.

In an epidemic among our nurses two years ago we had eleven cases. All of these, with the exception of one, were under my care from the beginning and went on to an uneventful recovery in the homeopathic similimum, the longest case being of eighteen days duration. The other case, which had anti-toxin as soon as the diagnosis was made, did not recover for six weeks and it was almost impossible to get the indicated remedy to act. This patient did not have any more virulent infection than the others, and her physical condition before the attack was better than the average nurse in our school; so we cannot attribute her prolonged illness to lowered vitality or to a more virulent case of the disease.

Now for a few cases, the remedies used, the symptoms on which they were prescribed:

CASE I.—Nurse, age 23, good robust girl. Had never been sick enough to have doctor since childhood. Taken during afternoon with chills followed by rise of temperature and great thirst. When seen the following morning temperature was 102 3-5. The pulse rapid. Patient complained of severe frontal headache and backache. Throat swollen and painful. Large amount of thick viscid saliva being secreted, the breath fetid and very offensive. Tongue showed imprints of teeth. The swallowing was extremely painful. Deposit was beginning to form on right tonsil. Mercsol. 1m was given and culture sent to health office. Report next morning showed Klebs-Loeffler bacillus to be present. The patient's condition was more comfortable generally, but glands of neck had become involved and the membrane was extending to the uvula and posterior nares. The mucus from mouth excoriated the chin; she craved cold water, but all swallowing was extremely painful. On these symptoms a dose of merc. iod. flav. was given and from this time the case made an uninterrupted recovery, and in 12 days the culture came back negative.

CASE II.—The deposit first showed itself on left tonsil, thence extended to right and the fauces, the neck was stiff and sensitive to external pressure, so much so that he could not bear to have night shirt buttoned at the neck. Lach. 1m was given. For some days only slight change was noticed, then it seemed as if membrane was extending to larynx. The pulse was weak, slow and small, the cough croupy, with sensation of suffocating on awakening. The membrane was profuse, thick and white with purplish appearance to it. The family wanted counsel. The consulting physician advised anti-toxin at once. I told him I had never lost a case and while the patient's condition was desperate I was positive my remedies would do more than anything else. He agreed to wait until evening and if there was no change he should advise the family to have

anti-toxin given. After going over the case carefully lachesis seemed to stand out clearer than ever and a dose of the 2 c. m. was given. In less than an hour a change for the better began and the case went on to recovery, and after 17 days the culture was negative.

The hardest cases we have to treat homeopathically are those of young children where we have to depend entirely on the objective symptoms. Even here, however, while more difficult to find the remedy, when the right one is found it never fails to give the desired results. A case to illustrate is one which came under my care this past spring. Boy, age 22 months. I was called at 11 p. m. to attend him in convulsions. At this time Bell. was given and the convulsions subsided. The following day there seemed to be a cerebral congestion as the breathing was stertorous and child lay in stupor from which it was almost impossible to awaken him. Apis was given and relieved. Next day the mother called my attention to the enlarged sub-maxillary glands, the first indication that there was trouble in the throat. Upon examination the tonsils were found to be covered with a pearly white membrane. The baby would awaken frightened and cross, there was a desire for warm drinks, the breathing was rapid and a little snoring and a wing like motion of alae nasi. On these symptoms Lyc. was given and some improvement seen. During the next two days the membrane extended to the nasal cavity, the discharge was bloody and acrid. The child picked the nose continually. There was a dry, hoarse cough which was so painful he fairly cringed under it, and a rash appeared on the upper part of body resembling the eruption of scarlatina. The time of aggravation seemed to be from 3 p. m. Arum triphillum 1m was given and case was discharged in 15 days.

These are only three of the 28 cases which have been under my care the past two years. The present record for the homeopathic treatment of diphtheria in my hands has been 100 per cent. recoveries, with no post-diphtheritic paralysis, no need for the use of sprays, stimulants, opiates or what not, as the remedy has been sufficient to produce the cure. Now results are what we are looking for, and what better results can the users of anti-toxin show than these? Would these results ever lead anybody to give up Homeopathy and use anti-toxin?

Of course the remedy cannot be found without work. You cannot prescribe homeopathically as easily as you could send out and get a tube of anti-toxin, but with good, intelligent work I believe we can get better results from the remedy and at the same time be true to the colors under which we are sailing.

Doctor: "You are the father of triplets!"

Fond Father: "Say, this is not fair, doctor, I demand a recount."—
Daily News.

HOW I BECAME A BELIEVER IN HIGH POTENCIES.

MIGUEL A. VALIENTE, '11.

It has been a matter of special attention and great interest to me, since I began to study Homeopathy, the only true science of healing, to search and investigate as far as my knowledge allows, upon the dynamic action of high potencies, which is of great importance to any physician who wishes to practice pure Homeopathy.

Although I have had fair opportunities to convince myself of the efficacy and splendid results obtained from high potencies, not only in long lasting diseases, but in acute trouble as well, by reason of so many cases which I have seen cured with c. m. and d. m. m. potencies, nevertheless I am sorry to say, I was doubtful about their results and I desired to find an opportunity in which I could satisfy myself of their efficaciousness.

It was not long before I was convinced of the truth. One evening I came home with a terrible headache, which obliged me to go to bed immediately. A doctor, who is well known as a good prescriber by reason of his vast knowledge in homeopathic materia medica was called to prescribe for me. After he had taken all the important symptoms, that is those characteristic, which would enable him to differentiate my headache from another which would necessarily call for another remedy, he studied the case thoroughly and the symptoms taken formed a picture similar to that of bryonia headache. Therefore bryonia one millionth was prescribed.

The peculiar symptoms were as follows: Headache in the morning soon after rising, gradually increasing; tearing pains in the forehead as if brain would burst through; < from the least motion of the head. The only manner in which I could obtain any relief was by lying down in bed and by pressing the forehead with both hands.

I should say that before the doctor was called to prescribe I was advised to take bryonia as it was clearly indicated. Having in my possession a number of low potencies, bryonia 3x being among them, I decided to take one teaspoonful of the above mentioned remedy every fifteen minutes for one and half hours. The remedy being indicated, I naturally obtained some relief from the potency, but the pain was so severe that I could not continue to await its slow reaction. Therefore, I decided to consult the doctor, who prescribed bryonia in a higher potency, in order to prove to me at this moment of suffering whether the results, which many physicians said they had obtained from high potencies, were as great as their teachings. I was, however, incredulous to the effect of high potency even up to the instant that I perceived a change in the character of the pain and its rapid decrease. I thought that this relief would be temporary and that the pain would subsequently return.

But that idea disappeared as soon as I noticed that relief was being obtained more and more as time advanced.

This practical experience shows to those who do not believe in the

quickness and efficacy of high potencies that in taking low potencies to cure any sickness the patient travels in a carriage drawn by a mule to the land of health, while by taking high potencies he is taken to that land by an automobile in the quickest and most reliable manner.

WHY DO SO MANY HOMEOPATHS FAIL?

By GERTRUDE DOBSON, '09.

"Will you tell me why so many Homeopaths fail? They either soon become mongrels or else give up the practice of medicine altogether." The speaker was one of a group of medical students. Instantly another of the group replied: "I may be wrong in my opinion, but I'll tell you what I think is the reason. Homeopathy deals with the vital force, it is a dynamic system, and in order to get the best results from it, a person must always be at his best. If a physician lowers himself mentally, morally or physically, he lowers his work. The result is either a whole or a partial failure, and he soon grows discouraged and either abandons medicine altogether, or else takes up with a system which does not require so high a standard."

The answer, coming as it did from a young man who had been making his own way in the world long enough to get a good many clear ideas on life in general, made at least one listener do a little thinking on the subject.

Is the statement true? Are we going to succeed in Homeopathy only so far as we put into our work our very best selves? Are we going to fail in many a case simply because we allowed ourselves to sink below our ideas? We may laugh at the idea, and yet it may be worthy of our consideration. We are all firm believers in potentization—even to the potentizing of such elusive things as the wind, the sun's rays, and the X-Ray. A whiff of effluvia poisons our systems, and the result is disease. This disease is cured by a potency so small that the amount of drug it contains is as small as was the whiff that caused the trouble.

The theory advanced by our student friend goes just one step beyond potentization as we now accept it. In handling our remedies, we are cautioned against holding one open bottle over another, to keep them away from strong odors, and many other seemingly harmless acts. If these remedies are so susceptible to their surroundings, I can see no reason why they may not be affected by the personalities of those handling them—in other words, we potentize those personalities.

If we could take from ourselves potentized truth, charity, ambition, and unselfishness, of sure antidotes to slander, malice or suspicion; there are few of us who would not gladly furnish them gratis to those who in our opinion, were in special need of them. But we cannot do this yet; the millenium can not be hastened with such rapid strides. We can only potentize the virtues by exemplifying them in our lives, just as sure a way no doubt, but so much harder, and the sooner we accept the theory of potentizing our personalities, the sooner we will become better men and women as well as better homeopaths.

OUR NEED.

CHAS. A. GARDNER, '10.

We often read in our homeopathic journals and hear in our medical societies a plea for better Homeopathy. May it not be that instead of better Homeopathy we need better homeopaths? What can be better than the true, tried and proven principles laid down by the illustrious founder of Homeopathy? The pure teachings of Hahnemann have always been the single guide of our greatest and most successful homeopaths; and the failures have been in proportion to the deviation from his wonderful principles as taught in the *Organon*. Can we improve on the infallible laws of Hahnemann?

What the homeopathic profession needs today is not better Homeopathy. Homeopathy is a positive quantity of the superlative degree. We need better homeopaths; men and women of courage and conviction who have followed the teachings of Hahnemann and know them to be the only safe and positive way in the surging sea of modern therapeutics; men and women who can stand up under the fire of criticism and popular opinion and prescribe the single similar remedy in the smallest dose that will cure and then wait for the inevitable cure.

There are too many so called homeopaths who advocate broadness in medicine, liberty of action, the use of anything known to the medical world, and many things unknown. Are these broader than the man who excludes all doubtful and harmful therapeutics and follows the law? Is the man broader who chooses from eight or nine remedies said by the leaders of the regular school to be all that is of value in medicine: or the man who chooses the similar remedy from over a thousand proven remedies with definite indications?

The broadest medical man is certainly the rare, true follower of Hahnemann, who stands on his principles undaunted by opposition: and by the application of his true system of medicine goes steadily onward with the cure of the sick.

Let us then resolve to be better homeopaths. If we have not followed the teachings of Hahnemann let us get back to his teaching in the *Organon* forsake our weak mongrelism and blossom out true homeopaths, to shine forever in the annals of medicine.

CURE BY PYROGEN.

By EMIL T. TRAFELET.

Nine years previous to the date of writing, Mrs. S., aged 33 years, gave birth to a child, the only attendant being a midwife. Ever since said confinement the lady had been ill.

At each menstrual period pain was intense, the flow scanty and the mental symptoms very peculiar. At such times she imagined that a child was crying pitifully and that she saw blood flowing from wounds in its face. Also that she saw horses running away, etc.

Several hours after the commencement of the flow, blood boils appeared upon the body, remaining several days and then vanishing, leaving blue spots or marks as though there had been some mechanical injury.

For years the patient had been constipated, the only relief obtained being from cathartics. She also complained of hearing the heart beat whenever in a reclining position.

Two doses of Pyrogen c. m. given two weeks apart completely cured the case.

HAHNEMANNIAN TREATMENT OF TOOTHACHE.

By FRANK A. ROGERS, '11.

Although this appears to be a rather simple subject to discuss from a medical standpoint, nevertheless it requires as much differentiation between remedies as does any disease. At the outset, let it be thoroughly understood that we cannot prescribe for the toothache alone, but that we must take into consideration every little morbid derangement which the patient presents. Therefore, do not assume to deal only with toothache, but fix firmly in your minds the one great idea of individualization.

Of the remedies most often indicated in this abnormality the following are found to be of the most benefit: Acon. Ant. Crud. Ars. Bry. Caust. Cham. Cinch. Coff. Hepar Ign. Kreos. Lach. Mag. Carb. Merc. Puls. Rhus Tox. Sepia. Staph. and Sulphur.

In Aconite we have tooth ache occurring even in sound teeth, < by dry cold winds, taking cold in raw air and during pregnancy; complaints accompanied by great restlessness and feeling as if the teeth would fall out.

The toothache of Antimonium Crudum occurs from hollow or decayed teeth and is < at night, after eating, from cold air, cold drinks, cold bathing and warmth of bed. It is < however out of doors.

Complaints of the teeth accompanied with burning pain, < by cold, after midnight or from 12 to 2 A. M. or P. M., and corresponding relief from any kind of heat require a dose of Arsenicum to effect a cure. The gums may be swollen and sensitive to touch.

Bryonia is indicated when we have the patient complaining of tearing or stitching pain < by warmth, by brushing the teeth and relief from cold water or lying on the painful side, the tooth is usually of a rheumatic origin and the teeth may show no signs of decay. More than one tooth may be involved.

Throbbing toothache after taking cold, with no fever, and a painful looseness and elongation of the teeth, with extreme pain in sound teeth on drawing in cold air, finds relief in Causticum.

If a person has toothache on taking anything warm into the mouth, and the teeth feel too long, accompanied by swelling and tenderness of the gums, with extreme sensitiveness to pain and irritability and peevishness of mind, give some Chamomilla. It will effect a very prompt cure.

Cinchona is usually indicated when with the toothache there is a distention of the veins in the forehead and hand. The pain is < by the least contact, tea and open air. On the other hand it is relieved by pressing the teeth hard together. It becomes very useful while nursing the infant and during sweat, ringing in the ears with hardness of hearing may accompany the above complaints.

Neuralgic toothache > by holding cold water in the mouth is promptly relieved by Coffea, providing the following symptoms are also present: the pain is intense and accompanied by weeping, great anguish and tossing about. This remedy is in striking comparison to Chamomilla which also has the extreme sensitiveness to pain. Coffea, however is > by taking cold drinks, while Chamomilla is not relieved.

Hepar is another useful remedy in this complaint. There is a throbbing pain as if the blood were entering the teeth, and the pain is < in a warm room, after eating and at night. The teeth are extremely sensitive to touch as well as the gums and mouth, which bleed easily

Ignatia is of immense value when the toothache is brought on in the intervals between meals. It is < after drinking coffee, smoking tobacco, in the evening, after lying down, and in the morning on awakening. The jaws feel as if crushed, and when the patient is talking or chewing he bites his cheek or tongue.

When the patient has toothache with decayed teeth from which there is a bad odor give Kreosotum. The following symptoms, however, must be present: Dark specks on the teeth, which decay as soon as these specks appear. The gums are bluish or red, soft, spongy, ulcerated or inflamed and bleed easily, a watery, sticky, transparent fluid may ooze from the gums.

The toothache of Lachesis is caused from eating something warm, from drinking warm or cold things, and is relieved by external warmth and by cleaning the teeth. The gums are swollen, spongy and bleed easily. Hemorrhage from the gums is also present. This kind of toothache occurs during the period of menstruation, the pains being tearing and pulsating and shooting up into the ears.

The Magnesium Carbonate toothache resembles at first sight that of Mercury. The decayed teeth are < at night, and the patient is compelled to get out of bed and walk the floor, and is < by quietness.

Mercury on the other hand is > by quietness. The gums are swollen and the teeth, which are of a black or dirty gray color, feel as if loose. The gums are particularly sensitive to touch, and have a bright red margin. All complaints are aggravated by damp, wet weather, and by the warmth of the bed.

The Pulsatilla patient presents the following symptoms: the pains, which are drawing and tearing, are characterized by their rapid shifting from one part to another. These pains are accompanied with a constant chill, and < in warm, close room or by warm things, and corresponding relief from holding cold water in the mouth.

Here is a picture of the Rhus Tox toothache. The pains are jumping and shooting as if the teeth would be torn out, and there is present a stiffness in the jaws. A gnawing sensation exists in hollow teeth, and also a felling as if the teeth were too long, and loose, and seem to be asleep. All pains are < at night, from cold and vexation, and > by external heat.

Sepia is < by taking anything warm or cold into the mouth. There is a drawing pain in the upper molars and a paroxysmal, beating, throbbing toothache may also be present. The teeth decay rapidly, and the gums are swollen, dark red and bleed from the slightest touch.

In order to prescribe Staphisagria we must have the following symptoms: the toothache usually occurs during the menses, in sound as well as decayed teeth. The teeth turn black or show dark streaks and are < from drawing in cold air or after cold drinks and eating. They are very painful to touch.

Finally, we come to the great remedy Sulphur. The toothache comes on in the open air, from the least draught, at night, in bed, from washing the teeth with cold water, and with congestion to the head or stitches in the ears. The teeth are very sensitive and there is also a pulsating and boring pain, < by heat, accompanying this sensitiveness. Whenever the patient drinks, violent stitches pass through the teeth. The gums bleed and recede from the teeth and they may also swell.

In conclusion, I wish to say that if you know these few symptoms and these remedies, you will have no difficulty whatever in prescribing for this complaint. At the same time you will save many a person from the pain and agony of the dentist's forceps, and thus do justice to the best and only scientific system of medicine, Homeopathy.

WHEN TO GIVE AND STOP THE REMEDY.*

By H. A. CAMERON, M. D., Waterbury, Conn.

The important work of taking the case and recording it in the proper form on paper, of working out the symptoms from the repertory and consulting the *Materia Medica*, has been done, and we believe we have the simillimum for the patient's condition. The next point is: When shall we give the remedy? Following the cook-book's advice, we have caught our hare; shall we now proceed to cook it? Ordinarily we would give the remedy at once, and this should be the rule. There are a few exceptions, however, to this rule, when it is better to wait for a certain time, *e. g.*, in intermittent fevers. Hahnemann says: "In these cases the medicine is generally most efficacious when it is administered a short time after the termination of the paroxysm when the patient has partially recovered from it." The object in thus delaying its administration is to give the remedy a chance of uninterrupted action, and also to avoid the homeopathic aggravation which would possibly follow and coincide with the paroxysm if the remedy were given at the beginning of or during the

*Read before the American Institute of Homeopathy.

attack. For the same reason in other recurrent or periodic affections (for example, dysmenorrhœa, asthma, etc.), we should give the remedy by which we hope to cure the patient not during, but at the end of an attack. The administration of *sac. lac.* will usually satisfy the patient's and our own craving for doing something in the paroxysm, unless the sufferings are intense, in which case a palliative remedy should be given, to the choice of which palliative we would be guided by the acute symptoms that call loudest for relief, such as *acon.*, *bell.*, *nux* and *bry.*, whose effects are transient and will not interfere with the deeper acting chronic remedies, like sulphur, calcarea and lycopodium.

The manner of administration has the next claim to our attention, and I am sure I voice the sentiments of the best prescribers when I say that the single dose is the ideal we should aim at. It was Hahnemann's method, and it has been the method adopted by the masters since his day. Even in the most acute condition the single dose has proved effective when the remedy was clearly indicated. But from this highest ideal we have sometimes to make a departure, and to safeguard the departure this conservative rule has been formulated, viz: in certain cases to give the remedy until improvement is noted and then to stop and give no more medicine as long as improvement continues. This is surely latitude enough for even the most routine prescriber. As surely as this rule is transgressed the case will be marred. In acute cases characterized by high fever, intense pain, or rapid progress, the very intensity of the condition seems to consume the beneficent action of the remedy, and while one dose may and very often does cure, it has been found desirable or necessary and not detrimental to the patient to repeat the remedy at intervals until its influence is noted. This may mean giving the medicine every four hours, or even as often as every half-hour, according to the intensity of the pain or the serious character of the case. Neuralgia, rheumatic and typhoid fever, biliary and nephritic colic, and cholera, are instances where repetition is sometimes necessary, but even in these the golden rule is to hold the hand as soon as improvement is manifest.

But it is in the chronic case that the single dose can be best demonstrated. There is no necessity for hurry, and the prescriber can afford to be deliberate. The remedy being decided upon, one dose of a deep acting remedy should be given and allowed uninterrupted action; when the amelioration follows, the rule, "hands off," should be obeyed as long as improvement continues. There is really no limit to the so-called duration of action of a remedy, and hence the necessity for patient observation of the case and hesitancy in interposing another dose. The first indication of a return of the symptoms should not tempt us into a hasty repetition, for it has been often noted that this aggravation is only temporary and is followed by a long period of improvement. Hahnemann, Hering and Guernsey have given us in their works on materia medica the duration of action of most of our remedies, and from their observations we will get an idea of what we may expect in this direction. From forty to ninety days

is the time credited to the chronic remedies, but even longer reactions have followed the administration of a single dose. When the case comes to a stand-still, and the patient does not improve but rather goes back, then another dose of the same potency may be given and watched as before. We will probably not see as long an action follow this second dose, and we will therefore be forced to repeat sooner, say in two months or six weeks. Subsequent exhibitions of the same potency will produce a shorter effect, and we will have to go to a higher potency to get the same sharp and prolonged effect that we did when we first gave the remedy. When this higher potency has been given until it, in turn, has been exhausted, we will be driven to those potencies still higher, until we reach the highest made, by which time we will probably have extracted all the benefit that that remedy is capable of and need the assistance of another. The safe rule is, that when once a remedy has proven to be homeopathic to a case never leave it as long as improvement follows its exhibition. I have seen cases where this following up of a series of potencies has been repeated with a long history of continued improvement. Such cases are rare, however, and usually another cognate remedy is called for before the highest potency is exhausted.

Very different, however, is the experience in the incurable case. While the general rule of giving the remedy until improvement is manifest, and withholding it as long as improvement continues, applies here also, we will find that the well-selected remedy is capable of effecting only a short-lasting improvement, and we will have to repeat often until we are giving the remedy perhaps continuously. When no improvement follows this close repetition an intercurrent remedy will then be in order after which the first remedy may take hold and benefit.

The selection of the suitable potency is often a matter of instinct. Most men have a predilection for a certain range of potencies. With some the thirtieth is the routine choice, others select the two-hundredths; others still, Fincke's series of thousands. Hahnemann recommended the thirtieth, and it is low enough to begin any case with. Boenninghausen advised the use of the two-hundredths, and Jenichen's potencies, which run up as high as the six-thousandth. We have the widest range, therefore to select from. If the case is a chronic one, and we want to get out of a remedy all that is possible, we can begin as low as the thirtieth potency, and at wide intervals repeat that dilution until it ceases to help. The two-hundredths, five-hundredths and one-thousandths naturally follow, but after that we must take bigger strides to get results, and so we will give the ten-thousandths, fifty-thousandths, hundred-thousandths and millionths.

In an acute case the first choice may be very high, and provided it is a clear case for the remedy the response will be as sharp from a hundredth-thousandth as anyone could desire. I have often seen a very high potency act when a lower one failed, and seldom the reverse. The rule which seems to work best is to go higher when a potency does not produce the

desired effect, and the rare exception to this rule is exactly the reverse.

Homeopathic palliation is the last item on our program, and I wish to speak a few words in its behalf. We cannot claim that homeopathic palliation in an incurable condition is always the pleasantest method; indeed, it is often a painful process and requires courage and patience on the part both of the patient and the physician. But looking at a case from the standpoint of its whole course, and not merely at the sufferings of the present moment, we claim for the homeopathic palliation that it is more fair to the patient, as it prolongs life, which, despite the sufferings, is always the aim of the true physician: it preserves to the patient a clear mind: it allows of the normal activity of organs not affected by the disease and, if I may be allowed to commit an intentional bull, it gives the "incurable" his only chance of recovery. He may suffer, for the homeopathic palliative will not benumb or stupefy, but he will suffer in any case. Drugs administered for their physiological effect are like the old-time Danegelt. The demand is ever far more, and the time will come when the drug will be a more serious matter than the disease. If we stick to the homeopathic palliative we will in the aggregate give more comfort to the patient, and keep him from that condition which is often more painful and pitiful than disease euphoniously styled a "habit."—*North American Journal of Homeopathy, Oct. '08.*

THE SOCIAL EVIL.*

BY H. A. WHITMARSH, A. M., M. D., Providence, R. I.

This is a matter one does not like to talk about; would fain pass by; gladly deny if possible its need of special thought. Instinctively we get as far-away from it as possible, and perhaps are impatient when compelled to think about it. The victims of social vice we are ever ready to help; their master, this same vice, we are but just beginning to combat as we ought. "Preventive medicine, for the driving out of vice must be the objective point. At this suggestion you hear the world laugh, for social vice was twin-born with civilization itself.

HISTORY.

The history of prostitution has required a large volume for its writing. Strange to say the prostitute is a creature of civilization. The ancient prostitute was a *slave*. The mediæval prostitute was an *alien*. The modern prostitute is a *citizen*.

As a slave, an involuntary subject of her master, her moral status was not considered dishonorable. Often she was of exquisite personal charm and physical beauty. She furnished, indeed, the model for the Aphrodite of Praxiteles. She had a place in the sacred festivals and marched in the sacred processions. Her influence in the state, so far from being

†Prepared by request and read before the Methodist Ministers' Association of Providence and vicinity, May 4, 1908.

always evil, was at least in some instances wielded for good. Yet no less did she in the end contribute her full share in the fall of empire. In brief, vice was not looked upon as evil if open and properly labeled. In peoples less civilized this did not always obtain. From Tacitus we learn that in some German tribes unchaste women were punished with death. Persecution, however, practically ceased in the tenth century.

Again the mediæval conception of prostitution was most naive. It was thought to conserve the purity of the family. It was made a source of revenue, not only to the state, but even to the church.

Today, though socially an outcast, the prostitute still abides. The belief that prostitution is a necessary evil, needing, of course, proper control, is by no means obsolete. Whatever the statutes may be, in practice the law does little unless the stage of public nuisance is reached. Indecency has to be curbed because public sentiment compels it. When the public really wants social purity will vice flourish as it does today? Public sentiment once enlightened by such data as follows in these pages, facts too little appreciated even by the medical profession itself, till recently at least, much less by the laity; public sentiment, I say, thus enlightened, recovering from the first shock, would gird itself to banish that whose life and progress mean proportionate and inevitable death to the race.

ETIOLOGY.

Social vice thrives because it is a natural one, growing out of the make-up of man himself. The one race which has limited itself to the single wife is the white race. The primitive man is by nature polygamous. There is, I fear, a dormant propensity toward polygamy even in man redeemed. A potent factor is this sexual hyper-activity in man. The sexual instinct is the impelling force in our nature. Stranger still it is the basis of love; of man's pure love for woman; and maintained in the high plane intended by its Author the sexual function is among the noblest belonging to man. "And they twain shall be one flesh." It means fatherhood and motherhood, even life to the race. Perverted and abused it means disease and death to the race. Happiness, physical and moral, is most complete in the married state. "No man or woman has ever been physically or morally benefited by illicit indulgence."

Misconception on this point, wrong teaching and ignorance, have done much to spread the evil. Tell the average young man that his sexual impulse demands satisfaction, and that unsatisfied his vital force will wane; how long think you will he keep the commandment?

Again there are too many unmarried men. For economic or other reasons men cannot or will not marry. Celibacy is an unnatural condition. Or, when men mate they will not follow the laws of natural selection. Selfish seeking for personal gain, in the line of wealth, social position, or other advantage, helps to a misfit. True companionship, the essential family tie, has been missed, and a score or two of years will

hardly fail to offer temptation to seek some supposed "affinity," so-called.

Further, the sexual life unnaturally lived by many married couples helps to vitiate that which might otherwise prove wholly satisfying, Unwillingness to bear children and the evasion and resort to various preventive measures work mischief, even to the undermining of health and the dissatisfaction of one party or both. The selfish and unreasonable demands of the husband are often in evidence.

Far more compelling causes to prostitution, however, are to be found in loose morals incident to overcrowding in tenement life. Ten or fifteen persons constantly living in one room will not conduce to modesty, either in thought or deed. One precinct in New York, one square mile had in it not only 60 brothels, but also 46 centers of prostitution in tenement houses.

The trend of migration to large cities, the entrance of women into industrial life, child labor and too early marriages are contributing factors to the degradation of the race. Lillian Brandt (Family Desertion) says 30 per cent of women and 10 per cent of men marry before 20 years of age. Lastly, divorce is not always resultant, but is also causative. Divorce courts have been called the "Market places and incubators of private immorality." "Of 8,000 marriages about 500 end in divorce. It is but a step from the boudoir of the divorcee to the house of prostitution; too often just around the corner."

PREVALENCE OF PROSTITUTION AND VENEREAL DISEASE.

You note the coupling of these two terms? In theory they belong together, in practice they are as a matter of fact inseparable. "Prostitution is a degenerate form of sexual life, degrading its participants and spreading venereal disease, a menace to progress and civilization if its consequences are not stopped."—(Sturgis.) New York has 50,000 public prostitutes, Chicago more, Paris 100,000. One-half are under 20 years of age. Few are married previous to the life. The average life of the public woman is from four to six years. One in four has syphilis. New York in 1905 had 225,000 cases of syphilis, and 800,000 cases of gonorrhoea. Fifty thousand new cases of syphilis are reported annually.—(Sturgis.) Fifty per cent of all men in this country have some venereal disease before 30 years of age. Fournier says that one-seventh of the population of Paris is syphilitic. China and Japan are overrun with it. There are 2,000,000 cases in the United States. "All prostitutes are diseased sooner or later. This is meant to include both the public and the clandestine prostitute as well."—(Wilson). Seventy per cent. of syphilis in married women is from marital infidelity. Next to the sexual act, kissing is the most ready method of giving this dread disease. Drinking cups contribute their share.—(Morrow). Among the rural population of Russia it is estimated that 80 per cent. of syphilis is due to accidental contact, the wholesale kissing of images being largely responsible. Pathetic, indeed, is it that the exercise of religious faith itself can thus

unwittingly despoil the human body which God has conspicuously honored as the temple of His own indwelling.—(Committee of Fifteen). Can we, in the light of these facts, tolerate for a moment in our Communion Service any but the individual communion cup?

The laymen is in general fairly well informed as to the seriousness of syphilitic disease. But he will be greatly surprised when told that gonorrhoea has made manifold greater inroads upon society. Most physicians have heard the young man say: 'A dose is no worse than a bad cold.' He knows nothing, hence fears nothing. The medical profession itself has only in recent years appreciated the frequency and seriousness of complications arising from gonorrhoea. First, the disease itself, excepting perhaps measles, is the most prevalent of all diseases. I fear that Ruggles' statement that "Three-quarters of the adult male population acquire it," is in some quarters too near the real truth.—(German Statistics, 1894). Twenty years ago a noted nerve specialist in Vienna said to a visiting American physician: "When my son is 18 years old I shall select a suitable mistress for him." In Berlin widows were found doing the same service for their sons. They evidently regarded prostitution as a necessity and planning to avoid disease ignored the social evil. Today, however, in Continental Europe, the attitude of the profession toward vice is notably changing. The "Französische Krankheit," as the Germans take pleasure in calling it, has become a menace of too serious proportions. Of involuntary sterile marriages, i. e., of those wishing and unable to have children 9-10 are due to gonorrhoea. And this is by no means always the fault of the wife. Wilson thinks that 42 per cent. of men with gonorrhoea are sterile. Czerny, putting it differently, says that "50 per cent. of all sterility is due to the husband's gonorrhoea." "Syphilis curses the child; gonorrhoea prevents its existence by rendering the male sterile." Eighty per cent. of deaths from inflammatory diseases of the pelvis are caused by it. One-half of all operations for diseases of women are made necessary by it. Price, of Philadelphia, listed 1,000 abdominal operations in which 95 per cent. were for conditions due to gonorrhoea.—(N. Y. Med. Journal, January 26, 1907). Finally 20 to 30 per cent. of all cases of blindness are caused by it.

REMEDIES.

So much for statistics, which will help to some adequate understanding of the seriousness of the conditions to be remedied. Now what has been done? What can be done? What can the state do with social vice? What can state boards of health and the medical profession do with the venereal disease? And better than all, what can an enlightened public sentiment do for both in man's effort to raise his fellow-man?

As a direct product of this evil our race is saddled with two dire diseases, both of which would cease could our wish be realized. "Voluntary purity of one generation would forever break the link between the

past and the future." As physicians we cannot cope with the disease successfully because patients will not continue treatment long enough for a complete cure, and will not deny themselves a sufficient time to avoid spreading the trouble. We have restrained almost completely infectious diseases transmitted by flies and mosquitoes, but, strange to say, have not controlled those carried about by men. The reckless indifference of young men and women is simply criminal. If those infected could only be controlled; compelled to isolation by effective quarantine as other contagious diseases are, our task would be lighter. And yet isolation and successful quarantine for those diseased would require hospital facilities much greater than now exist; equipment and space too vast to be considered possible.

Medical inspection helps but little, as a certificate of health may be rendered worthless by the next indulgence, yes worse than worthless because of the false security held out by it. Regulation by the state does not regulate. Segregation or confinement to certain sections of a city creates a hotbed of vice, breeding all sorts of evil, and soon growing to be an intolerable menace to the community.

What the state has tried to do affords interesting history. Public sentiment is ready for improvement, even now, along certain lines.

As alcohol is responsible for the downfall of so many the state could insist upon a stricter supervision of the sale of intoxicants to minors. It could suppress more generally the disorderly brothels. It could enforce a proper supervision for institutions for infants. It could compel custodial care for those knowingly spreading venereal diseases. It should drive the men as well as the women from the streets and brothels. It could require the reporting of venereal disease as in contagious diseases generally. It could require a physician's certificate in securing a marriage license. It should at all events leave nothing undone that will help to protect the innocent. Finally it could help to a better education of the young in sexual hygiene.

The trend has been to regard social vice as a sin rather than as a crime against the state, and we think wisely so. The difficulties have been real.

1. Registration brands those who might otherwise reform.
2. State recognition implies necessity of indulgence.
3. Health certificates creating the impression that prostitution is safe as regards contracting venereal disease increases patronage.

Regarding the effectiveness of sanitary control Neisser says: "It is my conviction, based upon studies continued, I am almost sorry to say, through years, that one cannot prove by statistics the effect of regulation of prostitution upon the spread of venereal disease."

And Fournier: "It's a long time that I have studied statistics. Well, I do not believe that there are any that are of value."

I have assumed that a consideration of the magnitude of the evil would not be amiss. Assumed also that a free discussion is an essential

preliminary to any well-considered action, especially when such action proposes to deal with what is confessedly the most difficult of all the problems of social hygiene.

It has been said that "woman holds the key" to the situation, and that she, by demanding social purity on the part of man, could thus solve the problem. We wish she would. Not the dictum of woman's clubs that "mankind" shall be pure, but that we shall be pure because she is pure. Unfortunately, the statement of Mrs. Poyser about women is too true; viz. that "God Almighty made 'em to match the men." Moreover, is it manly in man to depend on his sister to cure conditions due to his own selfishness?

Valuable suggestions and recommendations have been made by those who have studied the problems. Legislation can help in various directions to lessen prostitution. It can drive it from the houses of the poor; prevent tenement overcrowding; furnish elevating amusements; improve wage earning; regulate child labor; guard young girls landing at our docks; improve systems of moral education.

Sanitary law could aim to provide hospital extension for venereal diseases; confine in asylums minors who are diseased; report as contagious cases all thus diseased. Success thus far obtained, however, affords little cause for congratulation.

The conviction has been steadily growing that the time is ripe for action, and that such action should be a crusade of education, a crusade against ignorance.

Keep the children pure! Begin with the boy and the girl! How early? Before any companion is likely to begin. In what way? Not by placing literature in their hands for independent reading, because wrong use could easily be made of it. Lectures would be somewhat better. Personal work, however, on the part of parents, will best accomplish the end in view. We are sorry for children whose parents are either in purity or moral courage, unequal to the task, or whose modesty is false enough to entertain erroneous views on these vital matters. It is of highest importance that children learn of sexual matters from pure sources. It is a moral perversion, and only through sin and abuse of divine privilege, that the sexual act has become associated with evil.

The neglect of parents to determine for their children the right point of view, is responsible for much of the immorality in this line and the early ruin of the innocent. "If someone had only told me" is the cry still heard, and to be heard 'till we realize that children are manly and womanly, and rightly educated and trained can use aright any knowledge conscientiously imparted with a noble end in view.

Who are the leaders among men? Who are the leaders among boys? Those who know more than their fellows, or who for the time seem to know more. One bad boy, ahead of his companions in these matters of mystery viciously taught, can make mischief with the whole company; an exercise of power for evil, possible perhaps, but far less probable,

with boys possessed of superior knowledge gained from pure sources and having the right perspective and relations.

The desire to eat of the forbidden tree of knowledge of good and evil did not end with the proprietors of Eden. To "be as gods" appeals to the latest generation just as strongly as to the first. And the children will learn matters classed as evil which might equally well be classed as good, because they are in themselves neither good nor evil, but savor of either according to the point of view, or the use made of them. The writer believes that children should early learn about our sexual natures from the scientific side, the natural side, and from sources morally pure. Anatomy and physiology in some degree and the reproductive processes, in vegetable and animal life could be safely taught, and should be taught at a much earlier age than has generally been thought expedient.

The changed attitude of the medical profession in Continental Europe, the rise in our larger cities of societies for social and moral prophylaxis, attest the seriousness of the situation. New York, Chicago and Philadelphia have such societies organized by leading citizens, professional and philanthropic, alive to the issue at stake, and working to mitigate, and so far as possible, eliminate this great evil.

It is fitting that we should join hands, not in a hysterical spasm to decry social vice and frown on the men who habitually go wrong, and still less on those who weakly yield to exceptional temptation; but in a sane, consistent, and lasting crusade, to educate and guide the younger generation in the observance of hygienic law which, by the way, is closely allied to moral law.

There is an innocence pathetic and criminal too, on the part of those responsible for it, that has been the ruin of many a young girl and boy.

Mere instruction, however, will not suffice. And knowledge of evil consequences and dangers of disease will not always deter men from wrong doing. Even medical students, supposedly well aware of the risks they run, will get to drinking and throw caution to the winds.

It must be moral teaching, a part of the family training, that is to halt the procession of victims to social vice. And philanthropy must do what it can to fill the gap in homes where purity is wanting in the parents, or where for one reason and another parents fail to do what intelligent fathers and mothers can best do.

Now, it is by no means wise to teach children more than they need to know from time to time. Certainly common sense will find great opportunity for exercise here. Much wisdom will be needed. It is not always expedient to make known how widespread an evil may be, nor, indeed at too early an age even to suggest that there is an evil. I am only urging that the laws and principles of our sexual being come first to our children from a natural and pure source, and early enough to forestall their introduction from any other source.

Boys in their teens should also know something of the extent of evil as it exists today and be taught to avoid some of the snares and pitfalls.

'Schools and colleges, Y. M. C. A.'s, and young men's clubs, could profit from systematic teaching, or occasional talks on moral and social hygiene.

Young men should know that prostitution and venereal disease are practically inseparable. That even the private prostitute is no safe exception to the rule. The serious far-reaching effects of venereal disease should be impressed. Further, it is important they should know that sexual indulgence is never essential to health. Vigor of mind and body depend not in the slightest on its exercise. And sexual power does not cease from lack of exercise; while excess means loss of power and premature old age.

Clergymen are asking: "What can we as ministers do to lessen this evil?"

First of all you can stand on safe ground yourselves and so far from the line that you drop no fruit on the Devil's territory. Then, watchful of conditions, you can know something of the extent of evil, and knowing the strength of the enemy, estimate the equipment needed to meet him. Study the work in other cities and copy such methods as prove successful. Be ready to encourage legislation aimed to lessen the contributory causes already mentioned in these pages. In other words, be citizens as well as ministers, your brother's keeper in the broadest possible sense. At the proper time and place help to organize that which may seem best adapted to the needs of your own community.

I have quoted statistics of Paris and New York and Chicago, not because more agreeable to do so, but because they had statistics available for the occasion. No mistake will be made, however, if we assume that our city is just as critically ill, and needing treatment just as heroic I could readily furnish from my own observation and experience enough to convince the most skeptical that the picture in general is not overdrawn. I have purposely refrained. How many of our churches have boys' clubs or young men's leagues? I believe this feature of church work is sadly wanting in some quarters. Neither the doctor nor the minister is quite the oracle he used to be when general intelligence was less than in our day. Men came to church in olden time to learn, as well as to perform an act of piety. It is essential that we be men among men; know how to live among men; yes, be "all things to all men."

We cannot love men unless we know them. Kindness to, and a broad sympathy with, the boys and young men are essential to the strength and even the permanence of any church. The shepherd's *voice* is of comfort only as his manifest *care* is known.

Possibly from these hints the minister may, in certain branches of church work, find opportunity to bring youth some lessons in practical moralities. The cure of social evil has to do with both soul and body. It is a common ground where we can, yea, must, both prescribe and preach; and the presentation of the simple truths of moral hygiene will prove the chief means in helping social purity. It is wellnigh useless to attempt

to deal directly with prostitution. As well try to "mop the floor with the faucet still running." "Ephraim is joined to his idols, let him alone."

But there is a positive duty which the medical profession at least owes to the community; which the State owes to the innocent and ignorant; which all enlightened men bearing the name of brethren owe their fellows. We believe that outside the simple preaching of the gospel, and the time honored work of the church, there is no field more pressing at the present time. We look on the clergy as the best read, most enlightened, most sympathetic and philanthropic among the lists of men, the class of all most interested in their fellow men. Hence, it is natural to find any vital question such as this meeting with a sympathetic response. I can barely mention the work of the American Society of Social and Moral Prophylaxis.

Circular No. 4 on Community Protection, issued by the Chicago Society of Social Hygiene, summarizes as follows:

1. "The common weal demands and the Commonwealth provides protection for wife and child against death and mutilation by the husband's violence; it should demand and provide protection against the far more frequent death and mutilation through the husband's venereal disease.

2. "Such protection would be in most cases secured through the mere enlightenment of unmarried men with facts familiar to all physicians.

3. "Such enlightenment, though plainly the function of the State, has been as yet undertaken by only a few of our States because people do not yet appreciate the necessity for such action."

It suggests: "(a) that every male applicant for a marriage license should furnish proof of freedom from venereal disease; (b) that every venereal patient should receive from the physician, druggist, or 'patent' medicine vendor whose aid he seeks, a printed card of needful information—to be supplied or approved by the State authorities—as a part of the treatment; (c) that a circular of information on sexual hygiene and venereal diseases be furnished to each student by every educational institution for young men; (d) that fathers should recall the sexual temptations and mistakes of their own youth; should realize that their boys will acquire knowledge of sexual matters either in the street or at home; and that the father, rather than an older playmate or a prostitute, should be the son's confidant and counselor in this matter of vital importance.

"Any success that may attend this effort must tend, (1) to diminish the sum total of human suffering, (2) to shield the otherwise helpless victims of ignorant contamination, of all social grades; (3) to enhance respect for the rights of others—the foundation of the State—and incidentally, by reducing the number of unfortunates who are burdens upon the State through the venereal diseases of their parents, to diminish

this already serious drain upon the public purse; (4) to strengthen the self respect and self control of manly young men in sexual matters, by showing them that morals, while taught by all worthy religions, are not the outgrowth of any religious creed. but that morals are the wisdom born of human suffering, the message of kindly warning from experience to the inexperienced,"—*New England Medical Gazette*, Oct, 1908.

THE PUPIL OF THE EYE IN HEALTH AND DISEASE.*

BY F. A. SEEMAN, M. D., Sioux City, Iowa.

Responsive to various influences which cause contractions and relaxations of the muscular and elastic tissues and blood vessels of the iris, the pupil serves to regulate the amount of light entering the eye and to correct some of the spherical aberrations of the refracting media. In health, when the lids are open, both pupils undergo frequent and equal variations in size, contracting when a bright light falls upon the eyes and when the eyes converge or accommodate for near objects; dilating when the light is feeble or the eyes are shaded and when the accommodation is relaxed and vision is directed to some distant object. They also dilate when the skin is pinched or when the cutaneous or other sensory nerves are stimulated, and in some psychical and emotional states, during muscular exertion and as the result of fatigue.

In deep sleep the pupils contract, because all stimulations are then reduced to a minimum. Robey says the pinhole pupils of sleeping infants dilate instantly on waking, a point of diagnostic value. If a child's pupils do not dilate on waking, drug influence or intra-cranial mischief may be suspected. Both pupils contract and dilate together even when only one eye is stimulated. The movements of the iris are involuntary, but being co-ordinated with changes of accommodation they are brought indirectly under the influence of the will.

The pupils are very small in newly born infants; larger in children and young adults and smaller again in old age; larger in myopes, dark irides and in women; smaller in men, hyperopes and light irides. Some of the movements of the iris are reflex, some are associated and some are consensual. The contraction to the direct stimulation of light is reflex, as is also the dilatation which occurs on stimulation of the cutaneous nerves. The contraction which occurs during convergence and accommodation is associated, while the harmonious and equal action of both pupils when only one eye is stimulated is consensual.

The contracting mechanism of the iris is innervated by the third nerve and the dilating mechanism by the cervical sympathetic. If the third nerve be destroyed by disease or accident the pupil will dilate and if the sympathetic is cut it will contract.

The size of the pupil may be conveniently measured by means of a gauge consisting of a series of dots or apertures ranging in size from .5

*Read before the Hahnemann Medical Association of Iowa.

to 7 or 8 mm. In testing the reaction of the pupil the uncovered eye should be fixed on a distant object, taking the measurements, then cover the eye for a few moments and take measurements upon reopening.

In health the pupil quickly dilates and contracts and even in disease, so long as there is quantitative perception of light there is, as a rule, pupillary reaction. Sometimes reflex action is retained in an eye which is totally blind; the presence or absence of reflex contraction on stimulation of a blind eye depends upon the seat of the lesion. If the lesion be above the corpora quadrigemina, pupillary reflex may persist without quantitative perception of light. The movements of the iris may be hampered or altogether prevented by the presence of senecchia, by persistent pupillary membrane, by plus or minus tension, by disease or dislocation of the iris or by the action of certain medicaments applied to the eye or internally administered.

Disorders of the pupil manifest themselves by alterations which occur symptomatically in some general disease and especially in diseases of the nervous system. It cannot always be determined whether an alteration is due to spasm of one mechanism or paralysis of its antagonist. In intrathoracic tumors and other diseases pressing upon the sympathetic nerves there usually is dilatation of one or both pupils in the early stages from irritation and contraction in later stages due to paralysis and destruction.

One of the pathognomonic signs in tabes dorsalis is the reflex iridoplegia or Argyll-Robertson condition of the pupil which is present in 90 per cent of all cases. This consists in abolition of the pupillary reflex to light, while until late in the disease associated contractions to accommodation are retained. It is usually accompanied by double myosis which in turn is associated with loss of reflex dilatation on stimulation of the cutaneous nerves, a symptom less important diagnostically than the first named.

In uræmic, eclamptic and epileptic convulsions the pupils are wide open and fixed, by which these diseases may be distinguished from the seizures of uncomplicated hysteria. Unequal pupils are more or less common in eyes that differ greatly in their refraction, in dental disorders, in inflammation of the cervical glands, apoplexy, alcoholism; general paralysis of the insane and disseminated sclerosis; plainly manifest pupillary inequality in the absence of special defect or ocular diseases is always pathologic.

Hippus consists of constant, minute, irregular fluctuations in the size of the pupil and has been noted in paresis of the third nerve, also in nystagmus, epilepsy, the later stages of progressive paralysis, multiple sclerosis, neurasthenia and the onset of acute meningitis. In the administration of ether the action of the pupil is of little importance; but on the other hand, in chloroform anesthesia the pupil should be closely watched. If chloroform is pushed to the danger line its paralyzing effect reaches the medulla, respiration is arrested and the heart ceases to beat; occurrences announced without any premonitory symptoms other than the sudden dilatation of the pupil, which is always a strong and unmistakable reminder that the effects of the anesthetic have been carried beyond the limits of safety.—*Iowa Homeopathic Journal*, October, 1908.

Editorial.

SUBSCRIPTIONS.

At this season most people choose their magazines for the coming year. All true homeopaths, and particularly all alumni of Hering Medical College, will be glad to have the HERING QUARTERLY, not only for the privilege of reading it, but also to use as a means of propaganda.

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DEARTH OF MEDICAL STUDENTS.

The great financial panic has made its impression on the medical colleges, as well as the business world. All the colleges this year have fewer freshman students than for many years past. This is due primarily to the panic, but secondarily, it is due to the fact so broadly stated by the allopathic journals, that the medical profession is overcrowded and that the young practitioner will have great difficulty for several years to make his living.

It is an established fact that in Chicago the average income of allopathic physicians is less than \$100 per month. It is an equally well established fact that few if any homeopaths have so small an income after the first year.

Is this due to the better business ability of the homeopath? Not at all. It is due the better results which Homeopathy produces, in the hands of the man of equal average intelligence as the allopath.

The homeopath guides his patient to rapid and permanent cure, by a definite law in therapeutics, while the equally intelligent allopath is afloat and drifting in the sea of therapeutic empiricism; or if he is quite up-to-date, it is therapeutic nihilism.

There are countless places, both city and country, calling for good homeopaths. The problem facing the young graduate is not "where can I settle and make a living?" but "of all the opportunities offered, which do I prefer?"

The Council of Medical Education of the American Institute of Homeopathy are issuing a series of pamphlets on "Why students of medicine should select the homeopathic school." The profession should see that young men and women get these pamphlets. Such reading will decide prospective students to enter Hering College next fall. Now is the time for work.

ARE THERE TWO KINDS OF HOMEOPATHS?

In reviewing Boenninghausen's "Lesser Writings," *The New England Medical Gazette* for October, says:—To those who believe that Homeopathy never grows old, and that, accordingly, medical articles written years ago still maintain all their original value, this book will come as a welcome guest. To what is probably the greater number of homeopaths, it will appear as a publication largely of historic interest * * * Depending upon which section of Homeopathy the possessor of the book may belong to, so it will be highly valued as a guide left by a master, or be considered as an interesting bit of history."

According to the constitution of the INTERNATIONAL HAHNEMANNIAN ASSOCIATION, "The totality of the symptoms forms the only basis for the selection of the remedy, and the best results are attained by the use of the minimum dose of the single remedy in a potentiated form.

"The alternating or combining of remedies in a prescription is non-homeopathic."

"Hahnemann's 'Organon of the Healing Art' is the true guide in therapeutics."

No one will for one moment doubt that the International Hahnemannian Association stands for Homeopathy. The above quotations give their definition of the correct and only mode of practice in Homeopathy. Inasmuch as "the Organon," the true guide in therapeutics was written more than one hundred years ago, it would seem that the real true homeopaths do believe that "Homeopathy never grows old" and "that medical articles written years ago maintain all their original value." The law of "similia, similibus, curantur," while discovered only about one hundred years ago, is in reality as old as nature, yet it is as potent today as a million years ago. Age does modify theories, and personalities, but truth and natural law are immutable.

The symptoms established by proving remedies on healthy people are just as true to-day as when the first proving was made. The philosophy of the single remedy is an eternal truth.

It would seem, therefore, that "probably the greater number of homeopaths" who regard the earlier writings as merely "of historic interest," are really not homeopaths at all. To what class do they belong? Echo, answers: "Echoes." By their very rejection of the law and principles of Homeopathy they stand, self-rejected from the list of practicing homeopaths.

In publishing such sentiments *The New England Medical Gazette* classifies itself and appears rather as a blind leader of the blind. This is the teaching that leads graduates to inquire for "instruction in Hahnemannian therapeutics," and "not mongrel treatment."

It is time for doctors to be honest with themselves, and with their patients. Let them ally themselves with the ranks of homeopaths, or else come out honestly and join the A. M. A. which will receive them with open arms. This sort of practice tends to lower the standard of

life and ethics in the profession that should have the highest standards known upon earth.

Incidentally, it reflects upon the system of Homeopathy and tends to bring it into ill repute in the public mind. The practice of pure Homeopathy requires hard work and deep study both with repertory and materia medica, but the results justify the effort. The alternating or combination of remedies is easy, and therefore "the greater number of homeopaths" adopt those methods. The easy way has always had the majority in all the callings of life. Only the workers are willing to accept the work and sacrifice necessary for the following of the highest Truth.

BOOK REVIEWS.

BOENNINGHAUSEN'S THERAPEUTIC POCKET-BOOK arranged for rapid office work and ready reference in obtaining the similimum; so as to avoid the time required in writing the symptoms and remedies of each patient, by H. C. Allen, M. D., Editor Medical Advance; Author of Therapeutics of Fevers; Therapeutics of Tuberculosis; Key-notes of Leading Remedies, etc. Packed in a substantial box, price \$15.00. Published by the author, 5142 Washington Ave., Chicago. 1908.

This work must really be seen to be appreciated. It represents many years of careful study and research and close observation, not only in the art of prescribing, but in clinical work, and in the published work of other doctors.

Dr. Allen has covered in this repertory upwards of two hundred and Seventy-five remedies, and gives the relative value of each remedy in over 2,500 different symptoms.

This vast store of knowledge is so arranged that one can readily compare the values of all the remedies under any given symptom or set of symptoms.

The method is so simple that a complex case can be worked out in a few minutes, which with other forms of repertory would require several hours of hard work.

Inasmuch as Dr. Allen is one of the best and most careful prescribers in the whole field of Homeopathy, and has put his great knowledge into this form, to work out a case by this repertory is almost equivalent to having a consultation with the doctor himself, especially if the symptoms are well taken.

Among the chief points of excellence of this monumental work are its simplicity of arrangement, the fact that it gives the most accurate information in the shortest possible times, and with the least amount of labor. If the anamnesis is well taken this repertory will reveal the similimum every time.

THE CHRONIC MIASMS: SYCOSIS. By J. Henry Allen, M. D. author of "Diseases and Therapeutics of the Skin," and "Psora and Pseudo-Psora." Professor of Dermatology, Hering Medical College. 423 pages. Cloth \$3.00. Published by the author, 4712 Greenwood Ave., Chicago. 1908.

Probably no disease frequently met with is more abused or less understood or more neglected than gonorrhœa. Therefore a monograph dealing with the disease in its acute and chronic forms, with the sequelae occurring in the victim, and of the horrible and frequently fatal hereditary conditions in the off-spring of gonorrhœal patients, is most welcome.

In "The Chronic Diseases," Hahnemann made some allusion to this subject, but gonorrhœa at that time was not sufficiently differentiated from chancroid and syphilis to render that work exhaustive. Dr. J. H. Allen gives in his volume on "Sycosis" a complete and perfect diagnosis and his treatment is the only homeopathic one possible. He shows that by injections gonorrhœa is merely suppressed, not cured. The editor recently saw a patient in the Post-Graduate Hospital who had an effusion into the knee joint. On aspiration the fluid was found to contain gonococci, although the patient had had the disease 27 years ago, and it was promptly "cured" by injections, and no gleet followed. This case does not prove the proposition, but it is one point toward it. It is also well known among homeopaths that the indicated remedy will frequently bring back the discharge in cases previously "cured" by injections. The author states, in fact, that unless the discharge can be brought back, the sequelae are rarely cured.

Among the sequelae directly traceable to gonorrhœal origin, Dr. J. H. Allen classes appendicitis. With this clew probably many cases of that disease can be cured, which otherwise would be operated.

Included in the book are highly valuable chapters giving the therapeutics of gonorrhœa, materia medica of the urinary tract and sexual sphere, therapeutics of dysmenorrhœa and of leucorrhœa.

When we consider that upwards of 75 per cent of all men have gonorrhœa, about 90 per cent of gynecological operations and 30 per cent of all the blindness of the world are the direct consequences of gonorrhœal infection it behooves us to make a most careful study of this work.

It is to be hoped that the author will prepare an exhaustive index for future editions.

A Tender Reminder.

Woman (to her neighbor)—What makes you cry so bitterly, my dear friend?

Neighbor—I always weep when I hear music. My late husband used to blow the whistle at the factory.—*Meggenderfer Blaetter.*

PERSONALS.

Dr. O. T. Axtell, Osttersund, Sweden, is spending a few weeks vacation in England.

Dr. H. W. Schwartz, Sendai, Japan, spent some time at a mountain resort—Karinzawa—3,500 feet above sea level, with a smoking volcano ten miles to the west. Nearly 1,000 Americans and Europeans from the Philippines, Japan, China and Korea spent July and August there. Many of the summer visitors were delighted to know that a homeopathic physician could be found at a resort in Japan.

Madame Curie, the joint discoverer, with her husband, the late Prof. Curie, of radium, has been appointed Chief Professor in Physics in the Faculty of Science, at the Paris University, a well deserved compliment and a position that has been equally well earned.

Dr. Sara de Monco, of Bogota, Colombia, S. A., is doing a fine practice in her native city. Pure Homeopathy is the most effective practice every time and everywhere, even under the equator. It only needs to be well applied.

Dr. H. C. Mukerje, proprietor of the Charitable Homeopathic Dispensary, Gorakhpur, India, proposes to establish a fund in India, with which to send a student every year to Hering College, for the study of pure Homeopathy. He also has three medals of merit to award to the deserving students of Hering Medical College. Dr. Mukerje is doing a grand work in India.

r. Eloise O. Rieberg is passing the winter in Salt Lake City, and in the spring perhaps will visit Hayvii, New Zealand and Japan before her return to Chicago.

Dr. Charles A. Peterson, (Hering '05) Richmond, Indiana, had the highest percentage, standing first, when he passed the Indiana State Board, two years ago; and now,

Dr. Elbert E. Freeman (Hering, '08), has secured a position on the Honor Roll among those who recently took the semi-annual examination at Indianapolis, standing No. 5 on the list, of 53 applicants.

Dr. Elizabeth S. King, (Hering, '95), paid us a visit recently, and returns to her field of practice in Nome, Alaska, where she says the similar dynamic remedy makes rapid cures in desperate cases of pneumonia. The similar remedy does equally good work in the tropics, in India, Ceylon, South America, on the isthmus, and near the arctic circle, where the graduates of Hering College are carrying the banner of similia.

Dr. P. E. Krichbaum, (Hering, '96), is president and treasurer of the International Hahnemannian Association, the first man in the history of the association to hold two of its principle offices.

Dr. J. M. Keese, (Hering, '97), of Syracuse, N. Y., was recently elect-

ed president of the Central New York Homeopathic Medical Society, the oldest Hahnemannian organization in the world. This is a well-deserved compliment to a young man who has stood by his colors through good and ill report.

Future Precautions.

Burr-r-r! Boom!

"Hallo! What?" exclaimed Dawson, waking up from his "gas."
"Of course! Is it out?"

"It'll never trouble you any more," reassured the dentist. "Now rinse the mouth and you'll feel as fit as a fiddle."

Dawson rinsed.

"How much?" he asked, rising.

"Two guineas, please."

"Two guineas," roared Dawson.

"Yes, sir," said the dentist. "It was an unusually hard job getting that tooth out, and required twice the ordinary amount of gas."

"Humph!" growled Dawson, as he stumped up. "Here's your money; but I tell you right now, the next time I take gas from you, you've got to put a meter on me."—*Chicago Daily Socialist.*

Freak Prescriptions.

Here are some that were copied from the original:

"I have an acute pain in my child's diagram; please give my son something to release it."

"Dear Docther, ples gif bearer five sense worth of Aundie Toxyn. for gargle baby's throat and obleage."

"My little baby has eat up its father's parish plaster. Send an anecdote quick as possible by the enclosed girl."

"This child is my little girl. I send you five cents to buy two sitless powders for a grown-up adult who is sick."—*Home Herald.*

Her Little Way of Putting It.

Scribb and his wife were going to the theater.

"Will you please go upstairs and get my goats off the dressing table?" said Mrs. Scribbs.

"Your goats?" queried the puzzled Scribbs. "What new-fangled idea have you women got now?"

"I'll show you!" snapped the wife.

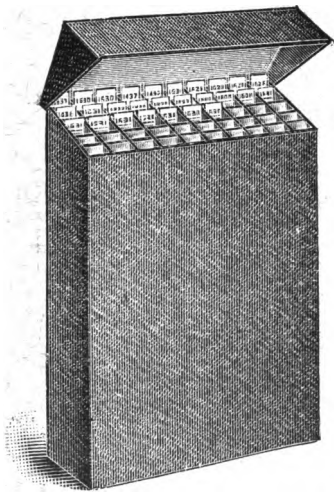
Then she sailed away and soon returned putting on her gloves.

"Are those what you mean? Why, I call those kids."

"I used to," replied Mrs. Scribbs, "but they are getting so old I am ashamed to call them by that name any longer."

He took the hint."—*Chicago Daily Socialist.*

BÖNNINGHAUSEN'S REPERTORY.



A New Edition Brought Up-to-date and Arranged for Rapid and Practical Work.

BY H. C. ALLEN, M. D.

Only those who use the single remedy will need it. But to the physician who studies and honestly applies it, the expense will be repaid every month in time saved; and a satisfaction obtained in curing the sick that only the correctly applied similitum can give.

Of all the Repertories which have been made none compares as a practical every day working index of the *Materia Medica*, in both acute and chronic diseases, with the original *Therapeutic Pocket Book*. Its method of applying Rule in §153 of the *Organon* has made it invaluable. The value of a symptom

is given in different type, so that the verified symptoms, the characteristics are readily seen. Notwithstanding its brevity and condensed arrangement hundreds of homeopathic physicians are unable to use it. But the same may be said of other Repertories many times its size. *Jahr's Symptomen Codex*; *Allen's Index*; *The Cypher Repertory*; *Kent's*, *Hughes'*, *Clarke's*, besides innumerable smaller works, are little used.

Dr. William Jefferson Guernsey arranged this scheme for using Bönninghausen so as to avoid the writing of the remedies in every case, and the consequent cancellation necessary. This is by having all the remedies printed on separate slips, to which is attached the individual value of each remedy in that symptom. Each symptom is numbered and the same number and symptom is on each slip. This enables the physician to select the required symptom and compare values very rapidly. We have used Guernsey's work since 1886 and have found it the greatest time saver for finding the similitum and the most correct and ready reference to the remedy, in our experience.

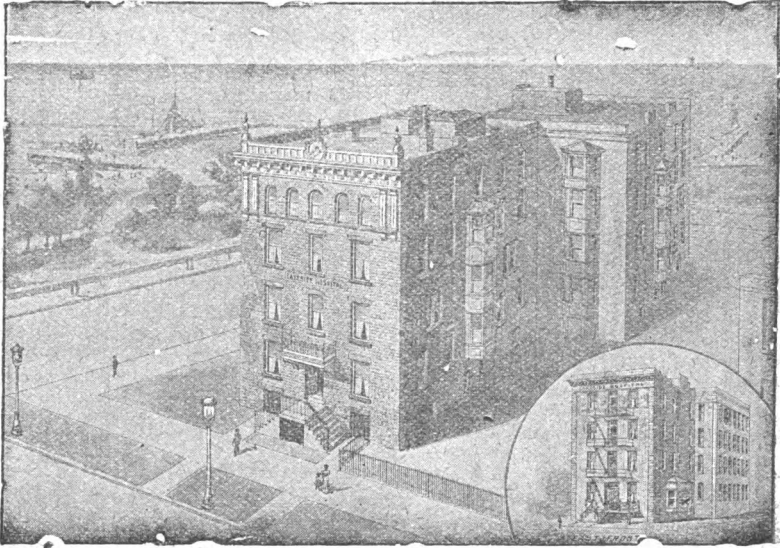
The weak point in the old work has been that it only contains the 126 remedies of the original *Pocket-Book*. Such remedies as *Act. Apis*, *Bapt.*, *Lil.*, *Pod.*, *Psor.*, *Tub.*, and in fact all the remedies that have been added to the *Materia Medica* in the past 40 years, with their increased values since made by repeated clinical verifications, are wanting.

We are aware that it is a delicate task to assume the responsibility of placing a clinical value on a symptom, but the additions made by *Hering*, *Lippe*, *Guernsey*, *Farrington*, *Raue*, *Dunham*, *Bayard*, *Wells*, *Fincke*, *Wesselhoeft*, *Bell*, *Biegler* and others too numerous to mention, should in justice be recorded, and some one must assume the task.

This work is now completed, ready for delivery. It will cost \$15 and only 500 have been printed. Each set of slips (with the *Index*) will be arranged in a box, with compartments of fifty or a hundred in each. The work has been made as complete as possible. All subscriptions may be addressed to the author, 5142 Washington Ave., Chicago.

LAKE SIDE HOSPITAL

47 LAKE AVENUE, CHICAGO.



The Lakeside Hospital is pleasantly situated and has abundant of accommodations. It has the means necessary for making a searching examination of patients and accurate diagnosis of medical and surgical diseases. These means include well equipped chemical, pathological, bacteriological and X-Ray laboratories.

Devices for bathing and other accessories are at the disposal of the physician, while for the treatment of chronic diseases we are inaugurating a system comprising electric light baths, medicated and electric baths, showers, calisthenics and massage, rest-cure and diet kitchens with proper supervision of the quality and manner of preparing foods to suit the individual case.

A hospital, in short, where all means for accurate diagnosis and scientific treatment are afforded for the alleviation and cure of disease.

LAURA F. WHITE,
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THE PRINCIPLES OF DIAGNOSIS

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"Dr. Bartlett's work cannot fail to become the standard text-book on diagnosis in both America and Great Britain."—*London Homeopathic Review*.

"Here is a chance for our friends of the old school to show their fairness by admitting it as a text-book in their own colleges, for we venture the statement that if they will examine this book as we have done they will find it the best work in the English language on the subject."—*Medical Century*.

"If a book is to be judged by its helpfulness we predict for this a position on a shelf quite handy for ready reference, and it will retain that position for many years to come."—*Medical Advance*.

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The above comments are from representatives of every branch of recognized medicine and everyone highly endorses the book.

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Hering Medical-College embraces in its curriculum all the branches taught in other Medical Colleges and in addition, is the only college in the world teaching : : : :

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its principles, philosophy, practice and materia medica : : : : :
Clinical Facilities here are unequalled in America : : : : :

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Hering Medical College.

TO THE HOMEOPATHIC PROFESSION.

HAHNEMANN says: "The physician's high and *only* mission is to cure the sick." His highest ambition should be to perfect the Science of Therapeutics by which this end may be most surely attained. Anatomy, Bacteriology, Chemistry, Histology, Physiology and Pathology, are much more thoroughly taught than they were twenty-five years ago; why not teach a better Homeopathy and keep it abreast with all scientific progress? Why not make it in fact, as in name, the Science of Therapeutics?

Why not teach the student how to select the single remedy and how to use it when selected, in both acute and chronic diseases; so that he need not alternate or use combination tablets? If he is taught how to find the remedy he will never resort to polypharmacy; he can do much better with his own science.

Why not teach him how to cure appendicitis without surgery; diphtheria without anti-toxin; ague without quinine; gonorrhoea and syphilis without constitutional sequelae; and consumption without change of climate? Homeopathy, correctly applied, will not only do all this in all curable cases, but it will greatly reduce the present mortality rates in all diseases.

Why not teach the student how to eradicate the so-called inheritances of tuberculosis, cancer, gout, etc., etc., and thus improve the health and increase the longevity of the race? Why not teach true prophylaxis for all diseases, acute, epidemic and hereditary?

Hering Medical College will teach your students how to do this work and enable them to successfully take up the burden when you lay it down.

The best there is in Homeopathy is none too good for your students; they should begin where you leave off, not where you began.

Address

HERING MEDICAL COLLEGE,

Cor. Wood and York Sts., Chicago, Ill.

DIDN'T KNOW

That Coffee Contained a Drug.

There are still some well-informed persons who do not know that coffee contains a drug—caffeine.

This drug is what causes the coffee habit and the many ailments that frequently develop from its habitual use.

"I was drinking coffee twice a day but did not know that it was hurting me," writes a Neb. lady. "I don't think I had ever heard or read that coffee was harmful.

"Sometimes I couldn't lie down, had to sleep in a sitting posture as the heart action was so slow. The doctor did not ask me if I drank coffee and the medicine I took did not seem to help me.

"Finally I got so bad I could not drink half a cup, as the dull, heavy pain around my heart would be worse. I stopped it for awhile and felt some better, but was soon drinking it again, and felt the same distress as before.

"Then I decided that coffee caused my trouble, also my husband's, for he complained of severe heartburn every morning after breakfast.

"My daughter had used Postum on a visit and asked why we did not try it. We did, following directions about making it, and for four years we have used it and prefer it to coffee.

"My old trouble has entirely left me and my husband has no more heartburn. I can say from experience now that Postum is the most wholesome of drinks, anyone can drink it three times a day without harm, but with decided benefit."

Name given by Postum Co., Battle Creek, Mich. Read "The Road to Wellville," in pkgs.

Ever read the above letter! A new one appears from time to time. They are genuine, true, and full of human interest.

ASTONISHED THE DOCTORS.

Old Lady got well with change of food

A great scientist has said we can put off "old age" if we can only nourish the body properly.

To do this the right kind of food, of course, is necessary. The body manufactures poison in the stomach and intestines from certain kinds of food stuffs and unless sufficient of the right kind is used, the injurious elements overcome the good.

"My grandmother, 71 years old," writes a N. Y. lady, "had been an invalid for 18 years from what was called consumption of the stomach and bowels. The doctor had given her up to die.

"I saw so much about Grape-Nuts that I persuaded grandmother to try it. She could not keep anything on her stomach for more than a few minutes.

"She began Grape-Nuts with only a teaspoonful. As that did not distress her and as she could retain it, she took a little more until she could take all of 4 teaspoonfuls at a meal.

"Then she began to gain and grow strong and her trouble in the stomach was gone entirely." She got to enjoy good health for one so old and we know Grape-Nuts saved her life.

"The doctor was astonished that instead of dying she got well, and without a drop of medicine after she began the Grape-Nuts." "There's a Reason."

Name given by Postum Co., Battle Creek, Mich. Read "The Road to Wellville," in pkgs.

Ever read the above letter! A new one appears from time to time. They are genuine, true, and full of human interest.