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A  
TREATISE  
ON  
CHOLERA ASIATICA.

J. N. MAJUMDAR, M. D.

Presented to Dr AN Mukherjee  
as a token of friendship  
received by the author.

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ON  
CHOLERA ASIATICA.

BY

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TO  
MY FATHER

*A faithful and conscientious believer in Homeopathy,  
My preceptor and my guide in my professional attainments,*

AND TO

MY MOTHER

*So kind and affectionate to her children,*

THIS BOOK

*Is gratefully and lovingly dedicated.*

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## PREFACE.

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It had been my intention originally to write a book on the Therapeutics of Cholera, on the line of Allen's Fever or Bell's Diarrhœa ; so that I had made the therapeutic part of it rather elaborate. When the book was still in the press, I found that there were many salient features in the etiology, pathology, diagnosis and treatment of the disease that were well worth recapitulating. Now that I have completed the work, I shall feel gratified if I find that the book has become useful to practitioners as well as to students of Homeopathy.

In conclusion I beg to express my appreciation of the kindly suggestions rendered by a number of colleagues, especially Drs. P. C. Majumdar, D. N. Roy, G. L. Gupta, S. Goswami and N. M. Choudhuri. Valuable assistance has also been rendered by Babu Sarat Chandra Pal, Babu Nundo Lall Chatterji and his worthy son Babu Phani Bhusan Chatterji, M. A.

203-1 *Cornwallis Street,*  
*Calcutta, May 1, 1911.*

} JITENDRA NATH MAJUMDAR.

A  
TREATISE  
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Definition—It is a specific infectious disease generally found to prevail in epidemics, but also occurring endemically in different parts of India, particularly in Calcutta and other places on the river Ganges. It is said to be caused by the comma bacillus of Koch. There can be little doubt that this disease is caused by a profound specific poison which acts with great virulence and rapidity, so much so that it has been known to prove fatal in a few hours. Musser has said that cholera is caused by the cholericine poison. True Asiatic cholera has been called by various names such as Epidemic, Asiatic, Asphyctic, Algid or Malignant cholera, but it is generally and very truly known by the popular name Cholera Asiatica.

History—India is generally known to be the true home of cholera. That cholera existed in Bengal particularly in the neighbourhoods of Calcutta from a very remote period there is not a shadow of doubt. In ancient Sanskrit literature the elaborate description that is given of the disease *Bisuchica* (बिभूचिका) is nothing more nor less than that of cholera.

All the modern writers of the disease agree in the view that this disease originally started from the east and thence spread everywhere along the lines of travel by sea and land over the whole world. It is positively known that

cholera existed in the delta of the Ganges as early as the year 1609. That it prevailed in a great epidemic form throughout India in the year 1817 is a historic fact. Some people believe that cholera broke out in the military camps during the time of Warren Hastings. It is generally believed that it first made its appearance in Jessore whence it came to Calcutta and spread all over the country. It has also been known to have broken out in an epidemic form in China and other places in the far east. In 1821 it appeared in Muskut and other Arabian cities. In 1823 it extended into Asia Minor and Russian Asia and continued to advance steadily though slowly westwards, while at the same time fresh epidemics were appearing at intervals in India. It ravaged the northern and central parts of Europe and spread onwards to England appearing in Sunderland in October 1831 and in London in January 1832. (*Encyclopædia Britannica*). In America it seems to have made its first invasion in the year 1832 in which year it was brought in emigrant ships from Great Britain to Quebec. It travelled along the lines of traffic up the great Lakes and finally reached as far west as the military posts of the upper Mississippi. In the same year it entered the United States by way of New York. There were recurrences of the disease in 1835-36. In 1848 it entered the country through New Orleans and spread widely up the Mississippi valley and across the continent to California. In 1854 it was introduced by emigrant ships into New York and prevailed widely throughout the country. In 1866-67 there were less severe epidemics. Although occasional cases have been brought by ships to America, to the various quarantine stations, the disease has not gained a foothold there since 1873.

That the disease existed in India from a very remote time is evident from the following :—

বিসৃচিকানিদানম্ ।

সৃচীতিরিব গাত্রাণি তুদন্ সস্থিষ্ঠতেহনিলঃ ।  
 বস্ত্রাজীর্ণেন সা বৈদৈষ্ঠিকিসৃচীতি নিগদ্যতে ॥  
 নং তাং পরিমিতাহারা লভস্বে বিদিতাগমাঃ ।  
 মূঢ়াস্তামজিতাশ্বানো লভস্বেহশনলোনুপাঃ ॥  
 মুচ্ছাতিসারৌ বমথুঃ পিপাসা  
 শূলো ভ্রমোবেষ্টনহৃন্তদাহাঃ ।  
 বৈবর্ণ্যকম্পৌ হৃদয়ে ক্লেশচ  
 ভবন্তি তস্তাং শিরসশ্চ ভেদঃ ॥

ইতি মুশ্রুতঃ । নিদানেহপি অয়ং পাঠঃ ।

ভত্র বিসৃচিকামূর্ধ্বক্ষাধশ্চ প্রবৃত্তামদোবাং বধোক্করুপাং বিদ্যাৎ । বথা—  
 তত্র বাতঃ শূলানাহাঙ্গমর্দমুখশোষমূচ্ছাভ্রস্নাশ্লিষ্টৈবষমাশিরাকুঞ্চনসংস্তুপ্তনানি  
 কয়োতি । পিত্তং পুনর্জ্বাতিসারাস্তর্দাহতৃকামদপ্রলপনানি । শ্লেষ্মাতু হৃদ্য-  
 রোচয়াপরিপাকশীতজ্বরালস্তগাত্রগৌরবাণি ॥

ইতি চরকঃ ।

বিবিধৈর্কেদনোভেদৈর্কীবা দিতৃশকোপতঃ ।  
 সৃচীতিরিব গাত্রাণি বিদ্যা তীতি বিসৃচিকা ॥  
 তত্র শূলভ্রমানাহকম্পস্তদয়োহনিলাং ।  
 পিত্তাজ্জ্বাতিসারাস্তর্দাহতৃট্ প্রলয়াদয়ঃ ।  
 ককাচ্ছদ্বাপ গুরুতা বাক্দ্দগ্ধীবনাদয়ঃ ॥

ইতি বাগ্ভটঃ ।

On account of indigestion the gases become perverted in the system, the patient becomes exhausted suffering from fearful agony as if ten thousands of needles were pricking all over the body. This is why it has been called "বিসৃচিকা" । Moderate eaters and people who live a pure hygienic life seldom get the disease, while foolish and greedy people are frequently afflicted by it. Its principal symptoms are :—



Faintness, frequent evacuations both upwards and downwards, excessive thirst, violent colic, delirium, burning, cyanosis, tremors and convulsions, heart cramps, and violent pains in the head.

That disease is called cholera where there are frequent purging and vomiting along with the symptoms enumerated above. Such are the sayings of Shusruta and Charaka, the ancient medical works of India.

From the history of the disease, as we have been studying it, it is perfectly clear that cholera has invaded almost every part of the globe some time or other. Yet there are some isolated places that have escaped its invasion some how or other. Patric Manson in his "Tropical diseases" says,—in the case of isolated countries the absence of active and frequent intercourse with the outer world favours immunity even during approximately pandemic extensions. Thus, though near the home of cholera, the Andaman Islands had never been visited by the disease. Similarly Australia and New-zealand appear to have enjoyed practical exemption. The same can be advanced of the Pacific Islands, the Cape of Good Hope, the west coast of Africa, Orkney and Shetland, Iceland, the Faroe Islands and many of the islands of the Atlantic.

**Etiology** :—While it is absolutely necessary that we should go into the details of the various causal factors of the disease, I cannot help quoting a few lines from that excellent work of Dr Bartlet, which put the whole thing in a nutshell. "The etiology of Cholera Asiatica may be summed up in a few words. Infection by the comma bacillus of Koch. This infection is carried almost entirely by drinking water. In other words cholera is a water-borne disease ; some cases are undoubtedly carried by house flies. Epidemic seems to be favoured by high temperature, as the disease

occurs with special frequency in low-lands and in hot countries."

The discovery of the comma bacillus by Koch in 1884 has shed a new light on the etiology of the morbid agent. It has been found by frequent and repeated experimentations that this bacillus occurs in true cholera and in no other disease. Its form is like that of a bent rod and sometimes occurs in the form of an S. It grows in a great variety of media and has distinct characteristics. Koch found it in tanks in India and also in the water of Hamburg during the epidemic of 1892. It is a very peculiar fact that while these bacilli are found in large numbers in the stools and the ejecta of cholera patients, they have sometimes been found in the fæces of healthy persons. It is also noteworthy that while large numbers are found in the characteristic rice water evacuations, they are rarely seen in the vomit of the patients. After all *the individual susceptibility of the patient counts for much* as we frequently see that people who are constantly watching cholera patients never get the disease. We seldom hear of physicians or nurses being attacked by it. One thing seems to be clear to us and that is, people are seldom attacked with the disease unless some of the poison gets into our system through our food stuffs.

There have been several cases of "Laboratory Cholera" in which students have been accidentally infected while working at the cultures.

I remember distinctly that Professor Jordan would frequently warn us to be careful while we were engaged in laboratory work in the Biological department of the University of Chicago. Milk, flesh bread, butter, meat and raw vegetables should be taken with care while an epidemic is raging, for they have frequently been the carrier of the disease. Infection by flies should also be borne in mind.

Woodhead justly remarks that now however through the laborious and brilliant researches instituted by Pettenkofer at the head of one school and by Koch in a very different one, much of this air of mystery has been dispelled. The history of the spread of the disease from its home in lower Bengal in the delta of the Ganges was for a long time considered most erratic and inexplicable.

It is very true that the nature and cause of a true cholera epidemic was long shrouded in mystery, and various theories were advanced which were all more or less conjectural. It is a question of great importance, and is one that has received the attention of nearly all the authors on cholera, whether cholera is a disease that can appear by itself *de novo*, or whether it always originates in India and thence spreads into different countries. Dr. Macnamara tried to show in a most exhaustive manner that all epidemics originated in their true home and thence attacked various portions of the globe.

The researches of Koch in Great Britain and Germany and some other workers in France make it almost conclusive that cholera is a parasitic disease, that it travels along the ordinary lines of commerce by railways, caravans and ships from the regions in which it is endemic to those centres of trades and religion which by their imperfect sanitary arrangements, by the want of cleanliness of their inhabitants, by meteorological conditions and on account of bad water-supply are ready for its reception and propagation\*. The study of these facts makes one think that perhaps after all Macnamara was right in his assertions.

But instances are on record where it has been absolutely impossible to trace the course of the disease from any

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\* Woodhead.

particular spot. There have been sporadic cases in places in Europe where it was absolutely impossible to trace the cause from its true home. At the mouth of the Yang-Tsze as instanced by Macleod, cholera breaks out regularly at certain seasons of the year, and it is very difficult to trace its origin although there is a possibility that it may be imported from India from which place it has weekly communication by steamer service.

As early as 1848 such eminent authorities as Virchow, Pouchet, Brittan and Swaine found numbers of vibriones in the cholera discharges but they were unable to prove that these play any specific *role* in the causation of the disease. Philippe Pacini, Klob, Boehm, Hallier, Hayem, Raynaud are some of the others who carried on experiments along this line but most of their experiments were futile.

The blood-poisoning theory of G. Johnson, the drinking water theory of Drs. Bayer and J. Snow, the fungus theory of Drs. W. Budd, Farr and others, Dr. Bryden's theory, the vibrionic theory of Macnamara were also equally futile.

While admitting that Koch's comma bacilli play a most important part in the causative factors of the disease, yet we must remember that there are various objections to Pettenkofer's ground water theory and to Koch's theory also that are well worth our careful consideration.

Dr. Cunningham of the Calcutta Medical College and many others hold that the comma bacillus is not the sole cause of cholera, although it may be one of the most frequent causes. It has also been found by experimentation that cholera cultures have been swallowed with impunity and cholera bacilli have been found in healthy stools of persons during an epidemic of cholera, these persons never being attacked by the disease at any time. And we should always do well to remember that "as in other diseases,

individual peculiarities count for much" (Osler). The comma bacillus, which is now regarded as belonging to the spirilla, usually occurs as a slightly curved rod, measuring from 1 to 2 micro-millimetre in length with an average length of about 1.5 *m.*; it is 5 to 6 *m.* in thickness, the average thickness being about one-third to one-fourth of the length. It is therefore from one-half to one-third the length of the tubercle bacillus but somewhat thicker. In place of occurring as single rods these organisms may be grouped in chains, or in larger numbers, in which case the curve may be continuous, so giving rise to the formation either of half circles or of S-shaped curves. In cultures in meat broth the bacilli may be so grouped that they form long chains or spiral threads, each of which may be made up of 10, 20, or even 30 short turns.—Woodhead.

As there are many people who still believe that bacteriologists are mere visionaries, it is just as well to narrate a few of the most convincing proofs of theories advanced.

"An Italian emigrant steamer touching at New York, had on board a child suffering from a suspicious form of diarrhoea though it could not be said that all the symptoms of Asiatic Cholera were present. In order to determine the true nature of the disease—whether it was cholera or not—gelatine plate cultivations of the dejecta were made by a doctor in port, and the vessel was detained four days; during that period true Koch's comma bacillus was developed and it was subsequently proved that it was a true case of Asiatic Cholera as a series of other cases occurred in which unmistakable symptoms of Asiatic Cholera were developed.

Here is another case to the point. At a time when there was no general cholera epidemic,—Gonsonheim and Finthen in Germany were suddenly ravaged by a most deadly form

of diarrhoea which in many features resembled true Asiatic Cholera. The recorders made plate cultivations from the dejecta of some of the patients and found Koch's Comma Bacillus and thus the matter was put beyond doubt.

In view of these facts the immense importance of bacteriological methods, as permitting rapid and definite recognition of the disease, with the possibility of taking precautionary measures as early as possible, and so preventing a wide dissemination of the disease germs, can scarcely be insisted upon too strongly."—Woodhead.

Now in the growth and the mode of propagation of the bacilli there are certain features that are worth recording.

The comma bacilli grow very nicely on several kinds of media at a temperature of 30°-40°C., although it has been known to grow at 20°C. Pure cultivations may be made in test tubes containing gelatine, agar-agar, potatoes or broth in or on which the growth and special character of the bacillus may be watched and noted. On blood serum and milk these organisms grow most luxuriantly. Dr. Simpson in the Indian Medical Gazette records a naturally prepared experiment which shows at a glance what an important part these milk cultivations may play in the spread of cholera. On board the ship *Ardenclutha*, in port in Calcutta, ten men partook of the milk supplied by a native milk-seller who came to the ship daily. Of these ten men four died of cholera and five suffered from exceedingly severe diarrhoea, the tenth who escaped had taken only a small quantity of the milk. After careful examination it was found that the milk had been diluted with 25 per cent of water that was taken from a district in which there was cholera raging at the time. On further investigation it was found that several of the milkman's neighbours were suffering from

the disease at the same time with the men on board the Ardenclutha and that the dejecta from the first case had been received into a tank near the milkman's house.

It is a very peculiar feature with the comma bacilli that they abhor sour things. Acids are to them a deadly poison. Distilled water or even ordinary water is not sufficient for the growth and development of the cholera bacilli. There must be a variety of solid particles, such as pieces of mud &c., in suspension in the water.

Klein and Bochfontaine who did not believe in the comma bacilli, tried to prove that it was not the cause of the disease, by drinking a quantity of fluid that contained cholera material and also by swallowing cholera dejecta. While again a case is reported from the Hygienic Institute in Berlin, which is said to be positive evidence that cholera is produced by taking the comma bacilli. A doctor who had been engaged in work in the cholera course was attacked by the disease after 8 days' work. He developed all the symptoms of cholera, namely:—purging, vomiting, rice water stools, great weakness, unquenchable thirst, diminished secretion of water and cramps.

These descriptions of cases naturally led to various experiments in which Thiersch, Burdon Sanderson and others took part.

Koch himself also carried on various experiments, but the results thereof do not seem to us to be very satisfactory.

We will now look through Pettenkofer's contentions before we pass on to the more general considerations of the malady.

"He holds that the increase of cholera is due entirely to the increase of the 'drying Zone' near the surface of the soil—*i. e.* the lowering of the level of this 'ground water' and

that the rise and fall in the level of this ground water is the principal factor in the production of conditions necessary for the outbreak of epidemics of various kinds."—Woodhead.

Whatever may be said with regard to the ground water theory of Pettenkofer, it is a well-established fact that cholera is propagated by a hot damp climate. The following observations of Macleod and Koch will show clearly that it is so.

"Cholera makes its appearance in Shanghai every summer with startling regularity. Before the end of July it is hardly met with ; by the end of August it is well marked, in September it is in full swing, not quite so virulent in October, and in the beginning of November an occasional case may be heard of, after which it disappears entirely till the next summer. For twenty years this has gone on with unfailling regularity under the observation of medical men now resident and for how long previously no one can estimate. He then goes on to describe the weather in June as damp and hot, in September as hot, damp and muggy, in October as cool and wet during the first part and as frosty, towards the end, at Christmas there is usually ice, there may be snow." He then says, "So far as temperature of the air is concerned, we enjoy tropical heat for nearly a couple of months before the disease breaks out ; it is most virulent in the hot, damp September, and does not disappear until after the hoar-frosty mornings are experienced ( the end of October )."

Dealing with the same subject Koch has stated that in no part of the world, of which the climate, the geology, and the epidemiology are known, does cholera occur all the year round except in the province of Bengal, and he says : "All authors are agreed, that the delta of the Ganges is the true home of cholera, and I have come to the conclusion that



this is the case, and that there are no other places of origin of cholera in India—for the only district in India, where cholera prevails continually year after year in a uniform manner, is the delta of the Ganges. In all other places it shows marked variations, or it may even disappear altogether for a shorter or a longer time. In certain places, for example in Bombay, it never entirely disappears, but it is highly probable, that on account of the unusually active trade with the rest of India it is constantly being imported there afresh."

He then describes this tract as a perfectly flat country only slightly raised above the sea level,—which, during rainy seasons, is almost entirely under water in the lower part of the delta, where the "Ganges and the Brahmaputra break up into a net-work of water courses, in which the sea water, mixing itself with the river water, flows hither and thither with the tide, and at flood time places large tracts of the Sunderbunds under water. A luxuriant vegetation and an abundant animal life have developed in this uninhabited region, which is inaccessible to man not only on account of the floods and the numerous tigers, but is avoided principally on account of the pernicious fever which attacks every body who remains there even for quite a short time. One can easily imagine how dense the vegetable and animal matter is which is given up to decomposition in the marshy districts of the Sunderbunds, and that here an opportunity is afforded for the development of micro-organisms, such as exist in scarcely any other place on the globe. Peculiarly favourable for this are the regions between the inhabited parts of the delta, where the excrements of an unusually thickly populated country are washed away by the current, and flowing here and there, are mixed with the brackish water of the Sunderbunds, already teeming with decaying

matter. Under these peculiar conditions quite a distinct fauna and flora of micro-organisms must be developed there, to which in all probability the cholera bacillus belongs ; for everything points to the cholera having its origin in this district. All the greater epidemics have begun with an increase of cholera in the southern portion of Bengal. Jessore, from which the first intimation of the epidemic of 1817 came, lies on the borders of the Sunderbunds ; and Calcutta which is now the fixed home of cholera is connected with the neighbouring Sunderbunds by a marshy and sparsely inhabited tract of land. Now the comma bacillus finds in this district, contiguous to its presumptive home, the most favorable conditions imaginable to implant itself and to spread from one individual to another."

That the outbreak of cholera is more or less dependent on the water supply of the place is evident from the fact that mortality from the disease has not been reduced at all, until a new water supply was obtained when the mortality fell to about one-third. It also appeared that better sanitary and drainage system had little or no effect on it. Although Koch proves this thing by statistics, he says, he is not a supporter of the exclusive drinking water theory and he considers that the ways in which cholera can spread itself are extremely varied and that almost every place has its own peculiarities which have to be thoroughly investigated and the regulations which are to serve for the prevention of infection in the place in question must be drawn up accordingly. Now in summing up the bacillus theory of the disease we must admit that the comma bacillus is one of the principal factors in the causation of the disease, even though we do not admit that it is the essential factor as it is nearly admitted by all the modern bacteriologists of the present time.

It has been held that one attack of cholera generally protects a person from further attacks at least for a certain length of time, although I regret to have to state that our experience has been somewhat to the contrary, being personally aware of two or three cases where they were attacked by cholera twice over.

On the strength of this, Gamelia has tried to discover a preventive inoculation and has carried on a series of experiments along this line.

Woodhead justly remarks that with all the modern improvements that have been made in the drainage system and water supply of lower Bengal, cholera has only diminished about 60 per cent., so that there still remain certain factors that favour the spread of cholera and every now and then such a spread or outbreak may take place with extreme rapidity and may invade a very wide area.

Cleanliness however both general and personal may be regarded as the most essential factor in the prophylaxis of cholera.

**Morbid Anatomy**—Death comes about so quickly in this disease that characteristic anatomical changes are very seldom observed but a post mortem diagnosis can be made by bacteriological methods, as the specific micro-organisms are quite distinct and separate. The blood in these cases generally becomes quite dark and thick and the amount of water and salts are considerably reduced. An examination of the stomach reveals nothing unusual. The intestines are generally filled with the rice water serum. The mucosa is found swollen, pale and anæmic. The bacilli are generally found in the intestine and also in the mucous membrane. The heart becomes flabby, the spleen is small and the liver and the kidneys show cloudy swelling. The lungs are generally collapsed. The body has the collapsed appearance but I

I have never seen a post mortem rise of temperature that has been described by so many authors.

**Symptoms**—The symptoms of the disease are varied and variable and although different authors have described the different stages of the disease as distinct and separate, we generally find them all mixed up together, as for instance we will find the patient in a complete collapse condition while yet the initial diarrhœa is quite predominant. Sometimes we find reaction partially established when new distressing symptoms appear. But as a rule we may divide cholera into the following stages:—

1. The initial diarrhœa.
2. The stage of collapse.
3. The stage of reaction.
4. Complications and Sequelæ.

In most cases the onset is quite sudden. The patient gets up in the morning apparently healthy and all of a sudden he begins to have frequent loose evacuations. The first two or three stools are generally yellow and contain fœcal matter, after which the patient begins to have the characteristic rice water evacuations. The urine also stops after the first two or three motions. Then again there are cases that are ushered in by a few preliminary symptoms such as general malaise, colicky pains in the abdomen, indigestion and diarrhœa. In some cases there is a marked rise of temperature, but as a rule this is an afebrile disease.

Along with the increase of the diarrhœa the collapse symptoms set in. In some cases there is great pain with abdominal tenderness. The patient gets exhausted very quickly, sometimes so much so that he faints after a stool. Thirst is excessive in many cases while in some it is wanting. Along with the exhaustion the cramps of the extremities

set in. In unfavorable cases these cramps are more or less general. Heart cramp is a bad symptom. The face becomes shrunken and hollow, the fingers and the toes become pinched, the skin becomes greyish, the lips become blue. In very bad cases the tongue even becomes cyanosed. The skin is shrivelled and there is generally a cold clammy sweat.

The external temperature is generally subnormal, while the internal temperature is frequently 103° and 104°. The pulse becomes feeble and gradually disappears.

In some cases the disease sets in with such severity that the patient dies after one or two stools, in fact before purging begins. This is generally called cholera sicca.

Our friend Dr. Roy has drawn our attention to the copious sweating that is frequently observed in cholera patients. He is of opinion that this copious discharge ( which is like sweat in appearance and which he calls an exudation of serum, a fluid constituent of the blood ) is nothing but the transudation of serum of blood through the sudoriferous glands and pores of the skin and not by the natural activity or even overactivity of these glands *which cease to work* like the kidneys, liver or the salivary glands.

Whatever may be the intrinsic value of the theory advanced by Dr. Ray, it must be said in his favor that the copious sweating mentioned of in his book, is frequently met with in practice and it is undoubtedly true that this sweating has a most debilitating effect on the vitality of the patient. In this connection, however, I am afraid I cannot agree with him when he says the sweat glands cease to work and hence we will quote what Prof. Osler says about the matter. "There is almost complete arrest of secretion particularly of the saliva and the urine. On the other hand *the sweat*

*glands increase in activity* and in nursing women it has been noted that the lacteal flow is unaffected.

Now we will mention a few words with regard to the stage of reaction. The first symptom that we generally observe is an improvement in the condition of the pulse. The imperceptible pulse makes its appearance once again and kindles hope in our bosom. But it will never do for us to be very sanguine as there is no disease so treacherous as cholera. My father Dr. P. C. Majumdar very truly observes that we are never sure of our case until we have allowed the patient an ordinary meal and to attend to his duties. There are good many unfavourable symptoms that may develop during the course of reaction.

As a rule, however, the collapse condition disappears, the skin becomes warmer, the abdominal tenderness disappears, the stools become more consistent and the urinary secretion is re-established.

Sometimes the diarrhoea lingers and becomes an unfavourable symptom. Sometimes again the vomiting persists and becomes a very distressing symptom. An obstinate hiccough is also frequently observed. But the most difficult picture obtains when the case assumes a typhoid form. The cholera patients generally sleep a great deal during the course of convalescence, and, as a rule, we allow the patient to do so as it is very refreshing. But we must always watch and see that this is natural sleep and, I am afraid, none but an experienced eye can detect it from the beginning, and it is very essential that it should be detected at the beginning, as the patient might very soon pass into the comatose condition which is a very grave complication.

Now there are some peculiar features in connection with the character and inconsistency of the cholera stools that must be considered here. The cholera evacuations are generally

described as rice-water stool. Some time ago I had a conversation with one of the leading physicians of this city, a gentleman who has a vast experience in the treatment of this disease who gave me to understand that rice water stool means a clear transparent liquid substance that we find on the top of a vessel containing rice and water after we have allowed the rice to settle to the bottom. Dr. Osler however defines it as follows:—

The fæces are at first yellowish in color, from the bile pigment, but soon they become grayish white and look like turbid whey or rice water; whence the term "rice water stools."

Dr. P. C. Majumdar describes it as thin water with which is mixed boiled and crushed rice. It is well known in this country as কুমড়া পচানির মত মল।

Its specific gravity is generally 1005 to 1010. It is alkaline and chemical examination reveals that it contains water, chloride of sodium and potash, albumen and other organic matters. At the bottom is noticed fibrin and mucus.

Microscopically it contains granules, leucocytes, nucleated cells, hyaline cells, epithilium, fungus, bacteria and phosphates; sometimes blood corpuscles are also present.

In the collapse stage along with the diminution of the natural body heat, certain peculiar phenomena are observed.

Dr. Goodeve said that the axillary temperature is generally 90 to 97, whereas in the mouth it is 98 to 99, but the internal temperature is generally found to be a great deal higher.

The circulation and the condition of the blood are found to be very much altered. The pulse is very feeble and sometimes entirely imperceptible. Circulation is not observed in the arteries, the heart becomes very weak and the heart beats are weak and inaudible. The venous blood

becomes dark and coagulated. Sometimes there is great respiratory difficulty, the patient gasps for breath, the breath becomes cold. Difficulty of breathing is generally a sign of bad omen unless it be due to spasm which can be relieved by the indicated remedies.

Loss of voice is another symptom that is generally observed in very bad cases. The whole nervous system becomes extremely weak and muscular power is sometimes diminished. Extreme restlessness, insomnia, throwing away of clothes and excessive burning are some of the other symptoms.

Some patients become very anxious and there is great fear of death while others are quite apathetic or indifferent. I am of opinion that the restless patient gets well more quickly than the drowsy and apathetic ones. Swinging of the head, ringing noise in the ear, specks before the eyes or blurred vision are some of the other symptoms.

Coma is a very bad complication in cholera. The functions of absorption and secretion are quite wanting in this disease. There is no saliva in the mouth and the urinary secretion is stopped.

Some doctors are of opinion that we cannot call it cholera unless the urinary secretion is completely wanting. But I am afraid that we cannot agree in this view and we have sometimes observed the urinary secretion to be quite unimpaired in some very bad cases. In cholera infantum the urinary secretion is quite as copious and free as the stools and cases assume a grave aspect in spite of it.

Cholera patients generally die from difficulty of breathing or from coma.

Complications—Now we will consider some of the complications and sequelæ. Fever generally is a good sign in cholera unless it is in the hemorrhagic variety where the stools



are generally bloody and passed in large quantities. We have observed that these hemorrhages generally occur as the result of excessive drink and debauchery. In the stage of reaction an unequal distribution of blood is a bad sign. If you find the head hot while the rest of the body is cold, or the trunk excessively hot while the extremities are cold and pinched, then you must look out for your patient. Hiccough is sometimes very distressing but can be checked in most instances.

A cold delirium is generally a grave symptom. If the patient begins to talk incoherently while yet the extremities are cold, it does not augur well for your patient. A delirious condition after the reaction is well established passes off easily, while a similar condition in the earlier stage of the disease is always to be dreaded.

Sometimes we have had occasion to observe another feature of the disease that is also very peculiar. Apparently when the patient is fairly on the way towards recovery and you are very sanguine about your patient, the whole aspect of the disease changes. The pulse that was becoming normal sinks once again, the extremities become cold, the patient tries to sit up in bed or jump out of the bed, he talks incoherently and there is slight difficulty of breathing. Sometimes we have tympanitis with it, and we think that the respiratory difficulty is due to that. But I want to impress this fact on the minds of all physicians having such a case in hand that we should always consider that we have a very difficult case to handle whenever there is any respiratory difficulty, no matter from what cause. The cholera poison has a very peculiar action on the heart muscle. How it works it is not very easy to explain, but the fact remains that the effects are frequently very disastrous. Some have tried to explain it by saying that the liquid constituents

of the blood become so thoroughly exhausted that frequently blood clots form in the heart itself or in the larger blood vessels and the heart's action fails suddenly by being clogged up. Dr. Salzer speaks highly of *Calcarea Ars.* in such condition where a thrombus or an embolus is likely to form. This is such an important matter that I will quote here in full what Dr. Salzar has to say with regard to it although I have not as yet come to therapeutics. He says—

"I would particularly draw your attention to the following statement of Dr. Macnamara which has but too frequently been verified in practice. Another complication incident to the stage of reaction, which seems to me more common amongst the natives of this country than among Europeans, is the formation of a clot in the right side of the heart usually extending into the pulmonary arteries. The patient seems to be doing well when suddenly difficulty of breathing comes on, followed by collapse and death. I have seen more instances of this kind during the present season (1869) than I remember on any former occasion, and they render one extremely cautious in giving a prognosis, even in cases which, to all appearance, are doing remarkably well. The nature of this unpleasant incident is such that we can hardly provide against it. Dr. Buchner states that *Calcarea Arsenicosa* prevents the formation of coagula. I cannot say by what mode of reasoning, or by what sort of clinical experience he arrived at that conclusion. I have however taken the hint and found that *Calcarea Arsenicosa* 6th to 12th is certainly an excellent restorative in the asthenic sequelæ of cholera." I think the busy practitioner will so frequently come across this sort of complication that I have felt justified in quoting the above in full and drawing the careful attention of the reader to the foregoing lines. Now as regards the value of *Calcarea Ars* in such conditions I can say that I have

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myself verified in several instances the value of the medicine but I shall have more to say when I come to take up the consideration of the drug in therapeutics. Cuprum Ars. is another drug that I will mention in this connection,

Since the advent of plague in this country some people have erroneously called this disease "an abdominal variety of plague", but we should however make no such mistake as we have seen this variety of cholera cases from the beginning of our practice. Moreover we find descriptions of the disease from the time of Dr. Macnamara and others. Dr. Salzer also verified it so early as 1869.

Another point that I consider worth mentioning is that these patients should have free ventilation in their places of abode. In treating several cases of late, I have noticed that those living in airy, well-ventilated places recover while those living in closed rooms with improper ventilation and in insanitary conditions die. In treating two cases of exactly similar nature I noticed this quite clearly. The cholera patient generally can stand a great deal of fresh air. I have seen even the night air is not injurious to them. Of course by this I do not mean that they should be left in the open air unprotected.

According to Dr. Goodeve fever is frequently a complication but not a bad one. The fever may be either remittent or intermittent. We frequently come across this complication in the stage of reaction and sometimes it assumes a grave aspect. The insanitary condition of living, and neglect of other hygienic rules have much to do with the fever's assuming a typhoid or remittent type. If the general condition of the health is good and if we live under proper sanitary rules, we are seldom attacked with the disease, and even if we are attacked we get over it quickly.

Sometimes the vomiting becomes excessive and the

gastric mucous membrane becoming inflamed the disease assumes a grave character. Hiccup at times becomes very obstinate and is frequently the result of excessive drugging. Loss of appetite, loud belching, diarrhoea &c are some of the other complications. Any inflammatory disease of the kidney, acute desquamative nephritis and uremia are grave complications. Sometimes these complications become chronic and consequently the patient suffers a long time. Suppression of urine is generally looked upon as the most serious complication. Uremia develops from this and death results the case having assumed a typhoid character. It is our firm conviction that the case seldom develops uremia if treated homeopathically from the beginning. Enteritis, dysentery, insomnia, restlessness, congestion of the lungs, and pleurisy are some of the other complications. Extreme prostration is sometimes met with after the disease. Skin diseases of various kinds are met with at the end of the disease. I have seen a slow fever followed by a measly rash develop in several cases after the cholera symptoms have all disappeared. To my mind this is generally not a very bad complication. But sometimes the patient lingers a long time in this way and becomes extremely prostrated. Various kinds of eruptions have been described by different authors viz :—Erythema, urticaria, measles &c &c.

Some of the other complications are :—urithritis, vulvitis, vaginitis, parotitis, ulceration of the cornea, gangrene of different parts of the body, bedsores, furuncles and abscesses of various kinds. I have myself met with several cases of ulceration of cornea. They generally linger a long time but ultimately get well under proper homeopathic treatment.

As I have already said before, cholera may be of different kinds. Sometimes after only one or two stools the patient

gets into the collapse stage. These cases are generally very serious but fortunately they are rare. Then again the patient may become pulseless and cold without even a single motion or vomiting. This has been termed, as I have already mentioned, Cholera Sicca or dry cholera. While a cholera epidemic is raging, we frequently come across many cases of a bad type of diarrhœa. These cases are generally painless and are termed choleric or choleraic diarrhœa. There are various other evacuations of the bowels that are generally of a milder type and that have been termed English cholera, bilious cholera, sporadic cholera, summer diarrhœa &c &c by different authors. In these cases, the stools are generally of a bilious or yellowish color, there is no pain with it, and the urinary secretion is never completely stopped. These cases generally result from indiscretion of diet &c.

Osler mentions of a special tendency to diphtheritic inflammation of the mucous membrane, particularly of the throat and genitals that I have never come across. Diphtheritic colitis has also been described.

**Diagnosis**—The symptoms of cholera are so clearcut and peculiar that little need be said as regards differential diagnosis. It may be mistaken with the different forms of diarrhœa &c that I have just mentioned, but they seldom assume the grave aspect of this disease.

Some cases of poisoning resemble cholera very much, such as poisoning by arsenic, corrosive sublimate, &c.

**Prognosis**—We need hardly say that the prognosis in cholera is always grave and we should always be guarded in giving our opinion. There is danger in every stage of the disease. The death rate is from 30 to 80 per cent according to the severity of the epidemic. Death occurs frequently in the first stage of the disease. Under proper homeopathic

treatment the death rate is a great deal less than under ordinary treatment. Intemperance, debility and old age are unfavourable conditions. Osler justly remarks :—"The more rapidly the collapse sets in, the greater is the danger and as Andral truly says of the malignant form, "It begins where other diseases end—death."

**Preventive measures**—As prevention is better than cure, it ought to be the aim of every physician to try to stamp out an epidemic right at the beginning and I think if the sanitary measures are all properly carried out, there is little or no likelihood of an epidemic spreading. Better prophylactic measures have had the effect of preventing the appearance of the disease in England and America since 1873. Strict adherence to simple diet during an epidemic should be enjoined. In India boiled rice with fresh fish broth ( মাছের ঝোল ) forms the best diet during an epidemic. The attendants of the patient should wash their hands and disinfect themselves properly before partaking of their meals. The clothes of the patient should never be allowed to be washed in the tanks that abound in this country. Care should be taken that none of the dejecta of the cholera patient should get into the tanks and wells which are frequently the main sources of the drinking water supply. Drinking water should be thoroughly boiled. Fresh vegetables, or uncooked substances should not be taken during an epidemic. Irregularities in diet should be avoided. Gastric disturbances should be checked at once and people suffering from acidity and indigestion should be particularly careful. People should never think of bathing after they have had one or two motions. We have an idea that this diarrhœa is frequently the result of the system getting overheated and hence the desire to bathe and to get a cooling drink. These cases generally prove fatal.

Lately many people have been inoculated with Haffkin's serum, which is considered to be a prophylactic. This is of doubtful value.

**Treatment.**—The medicinal treatment of this disease according to the law of similars has been so pre-eminently successful that now-a-days even lay people do not hesitate to take up the treatment of a case of cholera with the aid of some of those cheap cholera manuals that have infested the market and a small box of medicine.

But to me it seems a most hazardous thing to do. Cholera is a disease where the life of the patient is in danger from beginning to end ; therefore it needs the most careful and conscientious treatment. Dr. Mahendra Lall Sircar very truly observed "The indispensable requisites in the treatment of cholera, as indeed of every disease, are a knowledge of its pathology, or a right interpretation of its phenomena, in other words of the symptoms subjective and objective with reference to their seats in the organism ; a knowledge of its natural history or of its course when left to itself ; and finally a knowledge of the properties of drugs or of their physical and pathologic actions."

As in the treatment of every other disease, so also here, the law of similars can never advance a set of medicines that will always cover all cases of cholera at all times. With the daily increase of our therapeutic resources on the one hand and the different kinds of symptoms developed in diseases at different times, we will always have to recoup our knowledge so long as we exist in this universe. My aim here, therefore, however elaborate I may try to be, would be to show how we have treated cholera cases heretofore and how far we have been successful in treating this dreadful malady. As is very truly observed by one of our great men "there is no royal road to cure," so our treatment of any disease must include

a study of all the remedies incorporated in our *materia medica*. At best we should always remember that we treat the patient and not the disease.

Before taking up the study of the remedies individually I shall try and incorporate the treatment of cholera as narrated in the "Therapeutics of Cholera" by my father Dr. P. C. Majumdar stating here and there some of the valuable experiences of my late venerable grand-father Dr. Behari Lal Bhaduri. This latter gentleman along with the late Drs. Mahendra Lal Sircar and Leopold Salzer revolutionized the treatment of cholera in this country by introducing homeopathy. Ever since then homeopathy has become one of the principal systems of treatment in vogue in this city and in many parts of Bengal.

For convenience in describing the medicines in the treatment of cholera, it is usual with authors to divide the disease into various stages. It is not exactly that these stages appear one after the other in regular succession as described, but on the contrary we often find one stage merging into the other. It cannot be expected to see the actual disease developed as described in the books. All writers on cholera agree in recognizing the following stages of the disease. First, the premonitory stage ; second, the stage of evacuation or full development ; third, the collapse stage, and, fourth, the stage of reaction. We shall describe the treatment in this order, reviewing the complications and sequelæ of the disease at the end.

"The number of remedies in true cholera is not very large. Hahnemann first suggested Camphor, Veratrum alb. and Cuprum and this suggestion is so simply recorded that there is no difficulty in treating the disease.

In the first stage, it is difficult to recognize the true nature of the disease, so people pay very little attention to it ;



the physician is not generally called at this stage. But if there are malaise, great prostration, pains in various parts of the body, and other uneasy sensations, a few doses of Aconite will remove them. If there are digestive derangements—loathing of food, no appetite, thin, diarrhœic stools, *Nux vomica*, *Pulsatilla* and *Veratrum* may be useful. In premonitory diarrhœa I generally use either Camphor or *Veratrum* after each stool, and that is generally sufficient to prevent the further development of the disease.

In the stage of purging and vomiting, or, in other words, when the evacuations fully set in, the following medicines are to be considered :

<i>Veratrum alb.</i>	}	<i>Camphor.</i>
		<i>Cuprum met. or acct.</i>
		<i>Ricinus.</i>
		<i>Jatropha.</i>
		<i>Euphorbia.</i>
		<i>Croton tig.</i>
		<i>Antimonium tart.</i>
		<i>Elaterium.</i>

*Veratrum* may be considered as the type of a class of remedies which are more or less potent in checking an undue evacuation and bringing it into natural color and consistency. In fact, by the administration of one of these remedies according to indications, the further mischief may be averted.

*Veratrum album*.—As students of the old school, we are very familiar with the fact that *Veratrum* is a drastic purgative, so, according to the Homeopathic law of cure, it must be a medicine par excellence for choleraic evacuations—both purging and vomiting. From our repeated experience, we can give *Veratrum* the highest place in the developed stage of cholera. The late lamented Professor Farrington says :

'Veratrum seems to act prominently on the abdominal organs, acting probably through the splanchnic nerves. When these nerves are paralyzed, the blood vessels become overcharged with blood, and pour forth their serum. The prostration, the coldness, the terrible sinking sensation that belong to Veratrum, all start from these nerves.'

Indications for administering Veratrum : Vomiting and purging of large quantities of serous fluid—"rice water" evacuations as they are called ; colicky pains through the abdomen ; cramps in the extremities, especially in the calves of the legs ; great prostration ; cold sweat, especially on the forehead ; coldness and blueness of the face and hands ; great thirst for large quantities of cold water and acid drinks.

In times of cholera outbreaks it is wise to give Veratrum at the first appearance of diarrhoea, so that no further and serious development would take place. In such cases Veratrum has marvellous effects. We have many a time saved numbers of cases by the timely administration of this remedy. It is true that in Veratrum poisoning, the stools are not always choleraic in nature ; they are distinctly bilious, greenish, watery, with flakes, and there may not be total suppression of urine, but whatever may be the toxicological effect of Veratrum about the evacuations, our clinical experience is very wide as regards the curative results concerned. So we can confidently advise its use in all kinds of stools and vomiting.

In cholera, general depression of strength is very great, and here Veratrum is also one of our sheet anchors. Hahnemann gives the following symptoms of poisoning in his "Lesser Writings." Two children took White Hellebore by mistake. A few minutes after taking the drug they became quite cold, fell down, their eyes projecting like those of a

person in a state of suffocation ; the saliva ran continually from their mouths, and they seemed devoid of consciousness. I saw them half an hour after the accident, and when I arrived both seemed at the point of death ; distorted, projecting eyes ; disfigured, cold countenance ; relaxed muscles ; closed jaws ; imperceptible respiration."

As regards dose, I generally commence with the 12x and subsequently give 30x. Veratrum 3d or 6th centesimal trituration is sometimes useful.

Our next great anti-choleraic remedy is Camphor. It is used in the preliminary diarrhœic stage, as well as in the collapse stage. When the system is overwhelmed with the cholera poison, Camphor should be thought of. The body is icy cold, voice husky and prostration is intense. As soon as the patient is passing diarrhœic stools no time should be lost in administering the remedy. In this stage, if we give from one to five drops of Camphor after each stools, we are almost sure of checking the further progress of the disease. Hahnemann says : "In the first stage Camphor gives rapid relief, but the patient's friends must themselves employ it, as this stage soon ends either in death or in the second stage which is more difficult to be cured, and not with Camphor. In the first stage accordingly, the patient must get as often as possible ( at least every five minutes ) a drop of Spirit of Camphor ( made with one ounce of Camphor to twelve of alcohol ) on a lump of sugar or in a spoonful of water.

"The quicker all this is done at the onset of the first stage of the disease, the more rapidly and certainly will the patient recover, often in a couple of hours, warmth, strength, consciousness, rest and sleep return, and he is saved."

What Hahnemann said above has all been very well proved in our own practice in India. In my younger days when I was called in the very beginning of a cholera attack, I

was almost invariably successful with Camphor alone, but now-a-days I scarcely find a case of cholera where I get the opportunity of administering Camphor, as the stage is advanced and Camphor has no place.

Cuprum—It is really a very efficacious remedy in the developed stage of cholera. It generally checks purging and vomiting, and is pre-eminently useful in cutting short the distressing and painful cramps in the extremities and other parts of the body. Hahneemann placed great confidence in this remedy. He sometimes advised us to give Cuprum in alternation with Veratrum. Our late lamented Dr. Bhaduri, who had treated more cases of cholera than anybody in Calcutta, used to say that he could treat almost all his cases with Cuprum alone. He was very fond of Cuprum Arsenicum in the stage of collapse with purging, vomiting and cramps. Drs. Drysdale and Russel, of England, speak very highly of Cuprum, as does Mr. Proctor also. This latter gentleman treated ninety-eight fully developed cases of cholera with this drug, and was satisfied with it. He writes: "For the cramps it was unquestionably the best remedy, and I may say for vomiting also. In the collapse stage I gradually found myself trusting to Cuprum, and the impression is very strong in my mind that in collapse it is the most reliable of our remedies."

Indications for Cuprum: Purging and vomiting of rice-water fluid; colic of a paroxysmal nature; constant restlessness; cramps in the extremities, beginning in fingers and toes; great exhaustion; spasms in calves and abdomen; icy coldness of the hands and feet; quick, rattling and short breathing; almost imperceptible, weak and thready pulse; pale and sunken features; great thirst—the water runs down with a gurgling noise; relief of vomiting, after drinking; urine scanty or entirely suppressed.

I prefer the higher potencies, commencing with the 12x and going higher. I have seen a distinct aggravation from the 3d and 6th. Cuprum ars. is very useful in cholera. Dr. E. M. Hale first drew our attention to its use in cases of cholera. He says: "I first used it in some severe cases of cholera in the years 1867 and 1876. These cases were marked by the usual intestinal disorders, to which were added severe and painful cramps in the abdomen and extremities. The alternation of Arsenic and Cuprum did not prove as satisfactory as I expected, but the use of Cuprum ars. in the 6th trituration, in water for children and dry on the tongue in adults, generally acted promptly. I can recommend it in cholera infantum, spasmodic and neuralgic pains in the bowels, accompanied by screams and cramps in the fingers and toes, attended with great debility and threatened collapse. I have used it in several cases, and can bear testimony of its value in cases where indicated. Allied to Veratrum and Camphor are a number of medicines more or less applicable to check choleraic evacuations, and these are Ricinus, Jatropha, Euphorbium, Croton tig., Elaterium and Antimon. Tart. Among these we had very satisfactory results from Ricinus in the epidemic of 1883.

Ricinus is used in cases of diarrhœic cholera. I mean cases which assume the nature of true cholera from indigestion or simple diarrhœa. We had numbers of cases reported in the Indian Homeopathic Review of that year. In a large family in Calcutta there was an outbreak of cholera, and three persons died of it, notwithstanding Homeopathic treatment was resorted to from the beginning. I was called when a fourth case appeared, and at once gave Ricinus, which had marvellous effect in restoring the patient to health. There were four more cases in this family, and they were all saved by the timely administration of this

medicine. In this house I met a medical student who watched all the cases and was struck by the prompt action of my medicine. He was curious to know the name of the medicine. I told him it was Ricinus. He said Veratrum and Camphor and other medicines were given by the previous physicians to no effect. This time Ricinus was so efficacious that that student (studying in the old school) gave the authority of Dr. George Johnson as the promulgator of Castor oil treatment in cholera. Indications: Purging and vomiting of rice-water fluid; cramps in the extremities; there is seldom or no pains in the abdomen; extreme prostration; complete suppression of urine; scarcely perceptible pulse; very slight coldness of the extremities.

In Ricinus cases there is gradual sinking of the vital powers: in this respect it differs both from Camphor and Veratrum which have rapid sinking. The stools may be sometimes tinged with bile, or a little slimy and mixed with mucus and blood.

I generally use the 6th decimal potency after each stool.

*Jatropha cur.* produces depression of heart. Vomiting is more prominent than purging. Indications are whitish vomiting, like white of egg; stools watery and in gushes, gurgling and rumbling in the bowels, cramps in calves, pains and burning in stomach. There is coldness with slight perspiration and thready pulse. "Watery diarrhœa as if it spurted out from him." The alarming symptoms of cholera are not marked in this remedy, and the patient is devoid of any anxiety for his future. In fact he cares nothing for his disease and is cheerful.

*Euphorbia* is another remedy closely analogous in its action to *Jatropha*. Both these remedies, in fact, are medicines for choleraic diarrhœa rather than true Asiatic cholera. There is very little difference in their action. I use the 6th

decimal dilution, a dose repeated after each evacuation.

*Croton tigris* :—Though it is not a medicine for true cholera, it often cuts short the disease by its early administration, otherwise it would develop into a terrible disease; stools are yellow, watery, passed forcibly like shot; worse after food and drink; deathly nausea; vomiting after drinking and great prostration. Sixth decimal or 30th centesimal may be used.

*Antimonium*.—It is very closely related to *Veratrum alb.*, and I often use it when that remedy fails to act.

Indications: Very much like *Veratrum*. Purging of rice-water stool; Vomiting with great effort; cold, clammy perspiration; drowsiness with complete exhaustion; almost imperceptible pulse; heart's action failing; labored and difficult respiration; and complete collapse. When cholera breaks out during an epidemic of smallpox, it is better to make a choice of *Antim. tart.* at the very onset of the disease. We have several times witnessed the charming effect of the remedy in such cases.

*Iris versicolor* is very efficacious in checking cholera evacuations, but it is a remedy for what is called English cholera. I used it in cases where vomiting was a prominent and distressing symptom. Acidity, with burning sensation in the whole alimentary canal and bilious vomiting. In the case of a young gentleman in a suburban town of Calcutta, I got a charming effect from *Iris*. The attending physician tried all medicines to check purging and vomiting, without any effect. *Iris versicolor* was given and the patient was all right within a couple of hours. He had been suffering for two days before my arrival. These are the principal remedies in the developed stage of cholera. They are more or less potent in checking cholera evacuations.

But if the evacuations are not stopped, before it has done considerable damage to the system, the case goes on to the next stage—the collapse. In this stage the patient is on the point of death ; in fact, all the signs of death are visible on him. We must not lose heart on seeing these serious symptoms, as we can still do a good deal of good to save the patient. The following remedies are to be thought of in the collapse stage :

*Arsenicum album.*

*Aconite.*  
*Camphor.*  
*Veratrum alb.*  
*Carbo vegetabilis.*  
*Cuprum arsen.*  
*Hydrocyanic acid.*  
*Cobra.*  
*Secale.*  
*Antim. tart.*

Practically a great deal of difficulty would arise in treating this stage of cholera. We have so many remedies closely analogous to each other, that it seems almost impossible to select one. If we take pains however to record the symptoms very minutely, our difficulty would be much minimized and we may come to a definite and reliable selection.

*Arsenicum album.* is a very important medicine in the collapse stage of cholera. Its pathogenetic symptoms are so closely similar to Asiatic cholera, that an arsenical poisoning case may be easily mistaken for a cholera case. It has a vast range of action, and we have repeatedly verified its curative power in most serious cases of the disease. It is for this reason that I select it as a prototype of collapse remedies. Its symptoms are very marked and unmistakable.

Great irritability associated with profound exhaustion is the prominent characteristic of Arsenic cases. You will



see patients whose pulse vanishes, great weakness, even unable to utter a single word, great restlessness, anxious and irritable.

Indications for Arsenic : Great anxiety and restlessness ; fear of death ; great prostration of strength ; sunken eyes, distorted face, pointed nose ; cold and clammy perspiration ; burning of the whole body ; retching and vomiting ; unquenchable thirst, drinking frequently but small quantities at a time, and vomiting immediately after drinking ; violent burning of stomach and abdomen ; urine completely suppressed ; thin, watery stools.

When a patient gets an attack of cholera after eating too much fruit and drinking ice water, living in a damp place, exposed to the influence of putrefactive and offensive smells, Arsenic is the remedy.

I often use the 30th dilution in frequently repeated doses until favorable symptoms are observed. I have many a time saved very desperate cases of cholera by giving frequent doses of the 200th dilution when the 30th failed.

Arsenic has been frequently administered indiscriminately, without reference to its symptomatic indications. This is indeed a bad practice. It is, therefore, as Dr. Bell says, that Arsenic does more harm than good in the hands of ignorant persons.

Camphor has been used in the stage of collapse, but I have not found it very efficacious ; so generally do not resort to it in collapse. Indications : sudden and rapid prostration, coldness of surface ; cold sweat ; bluish countenance ; husky voice ; violent cramps and loss of consciousness. It should be cautiously given, and as soon as signs of improvement begin, or warmth returns, it must be stopped.

Aconite is pre-eminently the best remedy in the collapse

stage of cholera. Dr. Richard Hughes says that in time Aconite will be a valuable medicine in cholera. Dr. Hempel is the first physician who draws our attention to its use in cholera. Dr. Hughes wrote this long ago, and I believe the time is now come, and we have used Aconite very extensively and with good results.

Indications : Great anxiety and fear of death ; great coldness of the whole body ; cold perspiration ; great thirst ; restlessness ; labored breathing, with pains and oppression of chest ; hardly perceptible, or thready and quick pulse ; weak and slow beating of the heart. In cases of violent colicky pains in abdomen, it is one of our greatest helps. An elderly lady had an attack of cholera, with collapse, restlessness and unbearable pains in the epigastric region. Many Homeopathic remedies were tried without effect. I found her in great agony, gave her Aconite  $\text{ix}$  every half an hour, and after two doses she was relieved of her pains and reaction took place. In warm days with cool nights, and after exposure, I find Aconite very efficacious.

Carbo vegetabilis is one of our most reliable remedies in the collapse of cholera. I employed it in very many cases where death seemed inevitable, and with good results. When the reactive power of the system is gone, Carbo veg. is indicated. Indications : The patient lies as if dead ; no signs of irritability about him ; pulseless ; cold and clammy sweat ; leaden hue of the body ; husky voice ; difficult and labored respiration ; no thirst ; no purging and vomiting ; abdomen often distended ; difficulty of breathing and suppressed urine. Lower dilutions are of no use ; 30th and upwards are to be employed.

Hydrocyanic acid—It is a marvellous remedy, acting promptly, and sometimes snatching away the patient from the verge of death. On one occasion I had to attend a little

girl. When I arrived I saw her gasping her last breath. She could not swallow medicine or anything else. I poured a few drops of Hydrocyanic acid on a clean handkerchief and put it to her nostril, and to my utter surprise I found her breathing quietly in a few minutes and she made a perfect recovery. It is for this reason that our esteemed colleague, Dr. Mohendra Lal Sircar, speaks of it as follows: "If any remedy is entitled to be spoken of as a charm, it is Hydrocyanic acid. It would seem at times to restore animation to a corpse." Indications: Icy coldness of the body with pulselessness; breathing slow, deep and somewhat spasmodic in character, beating of the heart slow and weak, and stools generally suppressed.

Third or sixth decimal dilutions are generally used and sometimes frequently, almost every half an hour or so. It should be freshly prepared. Cyanides are often useful in trituration.

Cobra or Naja trip.—This is a medicine from the poison of a most venomous snake of India. The effect of this poison is very swift. Compare it to a sudden attack of Asiatic cholera. Dr. Salzer in his excellent book on cholera, speaks of it and other snake poisons in the following words: "We administer them when respiration quickens, becoming at the same time more and more superficial, while the heart's action is normal and still comparatively vigorous. This sort of respiration is a sure sign of impending paralysis of the respiratory centre, and coincides in so far exactly with what occurs under the venomous influence of snake poison." Higher potencies are better.

Secale cornutum.—It is another very important medicine in the collapse stage of cholera. Indications: Watery, slimy and offensive stools; vomiting of water; eyes sunken; violent cramps of the calves, the hands and the chest; great

restlessness ; constant thirst ; difficulty of breathing ; pulselessness, or small, slow and almost imperceptible pulse ; coldness of the body, but patient feels heat inside, and cannot keep clothes on body. I have very little confidence in *Secale* in collapse, but it is a very valuable remedy in some other conditions in cholera. It often removes distressing cramps when *Cuprum* fails. I frequently find it efficacious in removing that dreadful symptom, the cramps and pains in the side of the chest, and in the heart. Appearance of the menstrual flow during an attack of cholera is very serious, and in such cases *Secale* proves of immense value. Typhoid condition in cholera is also a very dangerous complication, and here *Secale* is one of our great helps.

Febrile heat after coldness ; sleepiness with occasional restlessness and often profound comatose sleep ; pinched appearance ; frequent and small pulse. It may be useful in gangrene and bed sore, ulceration of cornea and some other symptoms, derived from the low vitality of the system after an attack of cholera. Dilutions from 6th to 30th.

*Veratrum alb.* is also a very useful remedy in collapse. Dr. Salzer writes as follows : "I can hardly believe that *Veratrum* should not be as useful in collapse owing to the paralytic condition of the heart. Perhaps we give the remedy at too long intervals. Dr. Carrol Dunham recommends it to be given like Camphor, every five minutes. Much of this disrepute of the drug in collapse may also be owing to its not having always been administered at the right place and according to right indications.

*Antimon. tart.* being a depressant medicine on the heart, is recommended in the collapse stage of cholera, and we often find it useful. Its indications are generally the same as *Veratrum*. I find it very useful in cholera with drowsiness and complete exhaustion.

Another medicine of collapse is Nicotine, the active principle of tobacco. It may be used in collapse with cold sweat, deadly nausea, sleepiness and weakness of heart's action. It is sometimes applicable in typhoid symptoms with vomiting and drowsiness. I have had very little experience with this remedy.

## REMEDIES AND THEIR CHARACTERISTICS.

**Abrotanum.**—Cholera infantum, lienteric diarrhœa, diarrhœa alternating with constipation. This remedy is generally called for in emaciated rachitic children suffering from marasmus. The child is at times so weak that he is unable to hold his head up. Ravenous hunger is another symptom ( Sulphur, Natrum Mur. )

**Acetic Acid.**—This is a remedy that has seldom been used in true cholera, still it has some very marked abdominal symptoms. An exhausting diarrhœa where the stools are painful, liquid and undigested. It is generally worse in the morning and very exhausting. Intense thirst is the most characteristic symptom of Acetic Acid. But large quantity of water does not seem to disagree. The abdomen is generally very much swollen and there is marked debility. Sour belching and vomiting of pregnancy, burning, water brash and profuse salivation day and night ( Allen ). Sensation of sinking in abdomen causing dyspnœa. Better by rest or lying on belly.

**Aconite.**—Aconite is one of our best remedies in this disease and has been instrumental in saving many a precious life. It is generally useful in the first or in the last stage of the disease. If the disease is of an inflammatory type and there is marked rise of temperature along with the purging and vomiting, there is no remedy that can equal it. While again when the patient is suffering from death agony, Aconite will become an invaluable aid. Hughes very truly observes that Aconite is a remedy that reveals that the condition set up is one answering to the chill of fever and ague and the collapse of cholera.

The stools of Aconite are watery, green like chopped

spinach, bloody, slimy, mucous, frequent and at times involuntary. The disease generally turns worse from getting wet or from exposure to cold winds, at night and from eating fruits. Before stool there is cutting pain, nausea, sweat and anguish. During stool cutting pains, *teyemus*, sweat. After stool relief ( Bell ). The principal symptoms of Aconite are anxiety, fear of death, restlessness, unquenchable thirst. There is general dry heat, and a full hard and very quick and bounding pulse.

Hahnemann says—“Whenever Aconite is chosen Homeopathically you must above all observe the moral symptoms and be careful that it closely resembles them ; the anguish of mind and body, the restlessness, the disquiet not to be allayed. In cholera there is Hippocratic countenance, face bluish, lips black, expression of terror and imbecility, cold limbs with blue nails and finally collapse.

Aconite will cut short even cholera without any other remedy. We have just related a case while mentioning the therapeutics from Dr. P. C. Majumdar's book.

*Æthusa* — This remedy is called for generally in cholera infantum. It has some very peculiar characteristics that must be observed carefully.

Intolerance of milk, the child cannot bear milk in any shape or form and it is generally vomited in large curds.

Great weakness, prostration with sleepiness. There is generally an expression of great anxiety and pain with a drawn condition and well marked *linea nasalia*. ( Allen. )

Violent sudden vomiting of frothy matter, sometimes greenish vomiting.

Symptoms of acute hydrocephalus, spasms with clenched thumbs, red face and the eyes turned downwards. After the vomiting or the stool there is great weakness with sleepiness. The pulse is generally small, hard and quick.

The surface of the body is cold and covered with clammy sweat. Spasmodic hiccough. Painful contraction in stomach.

We have derived decidedly good results from the administration of this remedy and we think that Dr. Guernsey very truly observed that it is one of the most important remedies in the *Materia medica* and is not so well known as it should be. We particularly draw the attention of the reader to its usefulness in convulsion of children during an attack of cholera infantum ; for hydrocephalus is a very common complication and it is right here that *Æthusa* will frequently help us out.

**Agaricus**—*Agaricus* is a remedy that has been little used in true cholera. But there is one aspect of the disease where we may need to use this remedy and that is in the condition generally known as cold delirium. If delirium sets in before reaction has begun, i.e. while the patient is yet in the collapse condition, where the extremities are cold and pinched and the respiration is hurried, if the patient begins to talk incoherently then we may need to use *Agaricus*. It has been said to be useful in diarrhoea and it resembles *Natrum sulph.* in this condition. The stools are generally thin, yellow, fecal and slimy. Sometimes watery or grassy green, fetid, with sudden violent urging to stool. Crampy colic with emission of much flatus.

Emaciations appear all over the body along with the diarrhoea and disappear as soon as the diarrhoea begins to subside.

**Aloes**—This is a remedy that has been seldom called for in true cholera but its symptoms in this sphere are very well marked and as such we must incorporate them here. Dr. Dunham observes :—"The diarrhoea of *Aloes* occurs especially in the morning, say, from 2 to 10 A. M.



The desire for stool is sudden and extremely urgent being felt in the hypogastrium and in the rectum and being so urgent that the patient can scarcely retain the feces long enough to effect the necessary stratagic change of base during this brief interval ; he fears to evacuate, wind by the anus, or to make any physical exertion or even to strain to pass water lest he should have an involuntary evacuation of the bowels."

It is a deep acting antipsoric of great value in diarrhoea, particularly in the chronic form. In children when Aloes is indicated the appetite is generally found to be very good. It has many symptoms like sulphur.

The stools are generally yellow, fecal, bloody, transparent, jelly-like mucous, undigested, involuntary ( when expelling flatus or urine, when walking, standing or after eating—Bell. )

Sometimes yellow, watery and offensive. The Aloes diarrhoea is generally worse in the hot and damp weather. There is relief by bending double and by passing flatus.

The abdominal pains are generally relieved after stool. There is marked prostration, fainting and profuse clammy sweat. Loud gurgling in the abdomen as water running out of a bottle.

**Ammonium Carbonicum.**—There is one symptom in this remedy that may call for its use in the disease.

*Cholera-like symptoms at the commencement of menstruation.* ( Bovista, Veratrum ).

**Ammonium Muriaticum.**—It is especially adapted to people who are generally fatty and sluggish.

During menses diarrhoea and vomiting, bloody discharge from the bowels ( Phosphorus ). Many of the symptoms resemble those of Aloes. Green mucous stool may render it useful in diarrhoea. The stool is generally green, thin and

mucous. Sometimes it is copious and watery. Before the stool there is generally pain about the navel.

**Amyl Nitrite.**—This remedy which is truly a heart sedative has properly speaking no use here. But in the later stages of cholera when the dyspnœa is great, prompt relief from this distressing symptom may at times be obtained by the administration of this drug.

**Antimonium Crudum.**—Like Nux Vom. this remedy will at times be of great service in cholera. It is a very useful medicine in all gastric disorders. Its one leading keynote is a thick dirty white coating on the tongue, its vomiting is also peculiar. The vomiting differs from that of Aconite, Arsenic, Veratrum and other remedies by the absence of severe thirst and the white-coated tongue.

Gastric complaints from over-eating, stomach weak, digestion easily disturbed, patient is very subject to canker sores in the mouth, longing for acids and pickles. Gastric affection from bread or pastry.

Aggravation after cold bathing, over-heating and in hot weather. We will particularly draw the attention of the reader to the above symptoms for it portrays the picture of a condition that so frequently obtains in this country. It frequently happens that people have a good bath and a good cooling drink after it, even when they have had several loose motions already. The general impression is that the system is over-heated and this will have a refreshing effect but most often the very contrary is the result. I have been told by some of our most eminent colleagues that chilling the system in this way is a most dreadful thing to do and these cases most often prove fatal. The administration of remedies like Aconite or Ant. Crud. at the very beginning may have a very salutary effect. Later Rhustox. may be of use.

Violent vomiting, bitter, of bile, of slimy mucus, renewed

on taking food or drink, greenish vomiting soon after nursing, vomiting of sour curds, vomiting continues after nausea ceases, frequent eructations, hiccough. The stools are generally profuse, undigested, excoriating, mucous, yellowish and offensive.

**Antimonium Tart.**—As we have already observed Ant. Tart. is a very valuable remedy in cholera both at the very initial and the last stages of the disease. It has many symptoms in common with *Veratrum Album* and we have already dealt with this question. Bell very truly observes that *Veratrum Album* has been given many times where the choice should have fallen on this remedy. Ant. Tart. however has more drowsiness and twitching of the muscles than *Veratrum*. Through the pneumo-gastric nerve Ant. Tart. depresses the respiration and circulation thus producing the keynote of the remedy viz: when the patient coughs there appears to be a large collection of mucus in the bronchi; it seems as if much would be expectorated but nothing comes up ( Allen ).

Face cold, blue, pale, covered with cold sweat (*Tabacum*). Vomiting; in any position except lying on right side; until he faints followed by drowsiness and prostration; of cholera morbus with diarrhoea and cold sweat, a dose after each attack (*Veratrum*).

Asphyxia, mechanical, as apparent death from drowning, from mucus in bronchi, from impending paralysis of lungs with drowsiness and coma.

Great sleepiness or irresistible inclination to sleep (*Nux Vom.*, *Opium*). It relieves the "death-rattle."

The stools are light brownish, yellow, fecal, watery, bloody, frequent and profuse.

Before stool sharp cutting colic, nausea.

There is generally great thirst for cold drinks. Conti-

nuous anxious nausea, straining to vomit with perspiration on the forehead. Vomiting with great effort, vomiting accompanied by trembling and fainting and followed by great languor, drowsiness, loathing and desire for cooling things. Face pale, sunken with dim swimming eyes.

Violent and painful urging to urinate with scanty or bloody discharge.

*Apis Mel.*—This is a remedy that will seldom be called for during the choleraic evacuations but it may be of great help for the complications, sequela and the febrile exacerbation that so frequently follow this disease. In cholera infantum and in diarrhoea of children it is an invaluable remedy because it frequently checks the case from getting into the hydrocephaloid condition.

Sudden, shrill, piercing screams ( *Helleborus* ), extreme sensitiveness to touch ( *Bell.*, *Lachesis* ), thirstlessness, stupor. Frequent, painful, scanty and bloody urine ; urine passes with great difficulty. Great irritability of the parts.

Diarrhoea, of drunkards, involuntary, from every motion as though anus were wide open ( *Phosphorus* ). Febrile heat at 3 P. M. *with thirst.*

*Arsenicum* and *Pulsatilla* follow *Apis* well.

The stools are greenish, yellow, mucous, watery, clear ( colourless ), bloody mucous mixed with fecal matter, painless, offensive, constant oozing from the anus of which the patient is unconscious.

Accompaniments ; head hot, especially the back of the head. Boring the head back into the pillow. Bruised sore feeling of abdominal walls.

Hands blue and cold. Cold forearms. Increasing prostration. Indescribable feeling of weakness. *Anasarca*, *ascitis*.

Here is a case to the point :—A young man, aged 26, residing near Bowbazar Street, was taken ill on the night of

the 9th. January, 1902, at about 9 P. M., with vomiting and purging; the stools were very copious and watery with flocculent matter floating on it, and the vomit at first consisted of undigested food only and was later on thin and liquid; at midnight after a big stool he fainted, and at 3 A. M. he was in a state of complete collapse. I saw the patient on the morning of the 10th, there was great dyspnœa, severe pain on both sides of the chest, inability to express his sufferings, abdomen quite stiff, cold clammy perspiration on the forehead, whole body icy cold, extremities and face deeply cyanotic, pulseless at the wrist, on auscultation only one sound audible, both vomiting and purging stopped since 4 A. M., looked extremely anxious. The attending physician told me that a host of medicines had been tried both by himself and two other physicians who had been called in consultation but all their attempts had been of very little use. On enquiry I could learn that *Veratrum alb.* 6x., *Arsenicum alb.* 30., *Carbo veg.* 30., *Secale cor.* 30, *Cuprum met.* 30, and *Aconite* had all been tried. I gave a very bad prognosis and left two phials, one to be tried after the other; in the first one I gave *Argentum nit.* 30, and in the second *Naja tr.* 6 to be tried if the former did not produce any appreciable effect. I never thought of seeing the patient over again, but to my surprise I was sent for again in the afternoon when on my arrival I was astonished to see the dyspnea much diminished by *Naja tr.* The patient was feeling much more easy and comfortable than before. Cyanosis was diminished, perspiration on the forehead was still continuing, but he had no motion the whole day, was complaining of great thirst, pulsation was still not perceptible at the wrist. I ordered a few doses of Placebo powders, but left three doses of *Veratrum alb* 30, one or two doses to be tried if the perspiration became-

copious and thirst continued excessive at night. On the following day when I saw the patient, he was much better, passed two stools at night, perspiration on the forehead continued as before and he was given two doses of *Veratum alb.*; just a little before my arrival he passed a small quantity of urine; the patient was making steady progress, pulse could be felt at the wrist, stool was yellowish, cyanotic appearance almost gone, thirst much less (for small quantity only), barley water was given to drink, and *Arsenicum alb.* 30 was prescribed, one or two doses during the whole day.

In the evening, the report was that the patient had not passed any stool or urine, nausea and occasional hiccough had made their appearance; *Nicotine 6* was given every three hours. The next morning when I saw him again I could know that he had passed four scanty yellowish stools at night, but no urine, had not had much sleep at night, was getting drowsy at times, and thirst gave him some trouble; he also complained to me of a feeling of obstruction in the passage of fluids down the gullet, occasional hiccough two or three at a time, was also a source of trouble; there was no urine for the last 24 hours. All these symptoms again made me a little anxious. I prescribed *Laurocerasus 3x*, one dose immediately and the next one after four hours. The evening report was that with two doses the difficulty in the passage of fluids down the gullet and hiccough were much diminished but the patient was rather drowsy. I sent words to the attending physician to try *Opium 6x* or *Apis mel 6x* whichever he thought best. *Opium* had no effect. *Apis mel* had to be given afterwards. He passed several stools and urine at night, and next morning the patient was much better; so all medicines were stopped and the patient got well gradually.—D. N. Roy.

**Argentum Nitricum**—While we have rarely had occasion to use *Argentum nitricum* during the violence of the disease,

still it has unmistakable signs and symptoms of the malady. This remedy, however, has been of great use in the tympanitic distention and the emaciation of withered dried up old looking patients, particularly in cholera infantum.

"Sudden and severe attacks of cholera infantum in children who are very fond of sugar and sweets and who have eaten too much of them, will find their remedy in *Argentum nitricum*." ( Bell ).

*Argentum nitricum* is one of our best remedies in ulceration of the cornea that so frequently follows an attack of cholera.

Only lately I had occasion to use this drug in this disease with excellent results. But I must state here that the recovery in these conditions is generally very slow and we must patiently persevere with the treatment.

Apprehension when ready for church or opera, diarrhœa sets in. ( Bell ).

Acute granular conjunctivitis, scarlet red, like raw beef, discharge profuse muco-purulent, ulceration of the cornea. Desire for sweets. Craves sugar. Belching accompanies most gastric ailments.

Diarrhœa . green mucous like chopped spinach, in flakes turning green on remaining long in diaper ; after drinking, masses of muco-lymph in shreddy strips or lumps ( *Asarum* ) with much noisy flatus ( *Aloe* ).

Diarrhœa as soon as he drinks ( *Ars.*, *Croton Tig.*, *Thrombid.* ).

Craving for fresh air. Dr. Lippe finds the higher potency very efficacious in these conditions. We generally use the 30th. potency. The 200th. has also been used with success in some cases.

*Arnica Montana*.—This is a remedy that is sometimes called for in that dreadful complication, viz : the typhoid condition in cholera. It is also very useful in hydrocephalus ;

deadly coldness in forearms of children ( in diarrhœa, Brom ).

In typhoid everything on which the patient lies seems too hard ; keeps moving from place to place trying to find a soft place ( the parts rested on feel sore and bruised, Baptisia, Pyrogen ).

Heat of the upper part of the body, coldness of lower parts. The face or head alone is hot, the body cool.

In cholera we frequently come across this feature. An unequal distribution of the circulation is a common phenomena. It is generally a very grave condition and remedies like Arnica would be of great value in such conditions.

It may also be used in diarrhœa at times. The stools are brown and fermented, bloody, frothy, offensive and involuntary. Aggravation after mechanical injuries.

Pale sunken face, sour, bitter or putrid taste in the mouth. Aversion to food. Constant sensation or sense of repletion in stomach with nausea. Vomiting of what has been drunk. Tympanitic distention of abdomen, offensive flatus. Urine scanty and stains linen yellowish brown. Fœtid breath, offensive sweat, drowsiness and stupor.

Arnica causes according to Jahr and Hahnemann, violent urging to stool with scanty natural feces, as if the muscular coat of the bowel was excited, hence its use in dysentery and diarrhœa. It acts also on the stomach causing contractive pain, flatulent distention and hiccough.

**Arsenicum Album.**—As we have already noted, Arsenic is one of our sheet anchors in the collapse stage of cholera. It has been very truly observed by my father Dr. P. C. Majumdar that the pathogenetic symptoms of cholera so closely resemble those of an Arsenical poisoning case that one may be very easily mistaken for the other. It has a very vast range of action and we have been so peculiarly success-



ful with this remedy that we have become quite partial to it. We have already noticed many of its symptoms.

Although we cannot quite agree with Dr. Hughes as regards his theory of Asiatic cholera and Malarial fever, yet what he says about Arsenic is so interesting that we quote it here. "I think I shall carry most pathologists with me at the present day in maintaining (as I have long ago done) that Asiatic cholera is essentially a pernicious Malarial fever in which the poison exhausts its influence in a single paroxysm. We have already seen Arsenic causing the primary chill and the consecutive fever of this malady and we shall hereafter find the cramps, the vomiting and purging and the suppression of urine reproduced in its pathogenesis. So complete is the resemblance that Dr. H. C. Wood can truly say that Arsenical poisoning has been mistaken for cholera not only in life but also after death on the post mortem table. He is probably referring in these last words to a case reported by Professor Virchow in the fortyseventh volume of his *Archiv*. The very fungi described by Kleb and others as peculiar to cholera were present in the rice-water fluid with which the intestines were filled; and the condition of the mucous membranes was anatomically identical. Moreover, the phenomena sometimes occur in Arsenical poisoning where the patient dies in a few hours in collapse, without symptoms of gastro-enteric irritation. *Sidiration*, as the French call it, has been compared by many observers to the way in which cholera occasionally invades the system. It is true that this is not always so; and that the vomiting and purging of Arsenical poisoning usually depends on gastro-enteritis, which is absent in cholera. Hence the minute symptomatology of the disease does not altogether correspond with that accepted as the characteristic of the drug, though the internal burning of which cholera patient so often complains

is a point in its favour. It was probably for this reason that Hahnemann, on first hearing an account of cholera when it invaded Europe in 1830, in naming the drugs most likely from their homeopathicity to be its antidote, specified Camphor, Veratrum and Cuprum, but omitted Arsenic. Further knowledge of the disease has shown that the features in which there is true similarity are those of most importance. Arsenic has accordingly been added to the three Hahnemannian medicines by those who care more for real lesions than for symptomatic minutiae. With such it has become the sheet anchor in the most desperate cases. In the epidemic of 1849 Dr. Russel at Edinburgh and Dr. Drysdale at Liverpool concurred in giving to Arsenic the chief place in the treatment of cholera when the time for Camphor had gone by; and I believe this to be the general experience of Homeopaths. I may add that with malarious fevers Boudin classes not only cholera, but also yellow fever and plague as being all *limphæmic* affections and accounts Arsenic the great remedy for them all."

While speaking so emphatically as regards the virtues of Arsenic, I think I must also warn people from making a wholesale use of the drug in cholera, for when not indicated it will frequently do more harm than good. I verily believe that one of my colleagues here spoke the truth when he said that he killed a patient by repeating Arsenic 200.

Its symptoms are quite clear and characteristic and we should never make any mistake on that account.

*Great prostration* is generally marked everywhere wherever Arsenic is indicated. The vital force sinks very rapidly, so that Arsenic naturally becomes one of our principal remedies in the collapse stage of cholera.

*Restlessness*, both mental and physical;—changing places continually, but at times so fearfully weak on account of the

prostration that he cannot move, but still the desire is there ; hence the mental restlessness. Anxious fear of death, the patient thinks his disease is incurable and death inevitable.

*Burning* all over the body. Burning both internal and external.

*Thirst*—Great thirst for cold drinks, the patient drinks often but little at a time. The mouth gets dry, but the stomach does not tolerate cold water.

The aggravation of Arsenic is also peculiar. It is generally seen after midnight or midday. Diarrhœa sets in after eating or drinking.

Stools thick, dark green mucous, brown mucous, bloody, dark or black, watery or fluid. Frequent, scanty, corrosive, offensive, smelling like carrion, painless, watery stools, profuse brownish yellow watery stools. After stool there is generally great prostration, the patient feels thoroughly exhausted. Vomiting immediately after eating or drinking. Burning in the stomach and abdomen, abdomen swollen, urine offensive, scanty, retained, suppressed or greenish. Stupor with dry hot skin. Twitching of limbs and tonic spasms of the fingers and toes. Although the patient complains of intense burning heat internally, the skin is very cold and covered with clammy sweat. The pulse is very rapid and hardly perceptible. The characteristic restlessness and thirst must be carefully observed where Arsenic is indicated. We generally use the 30th. potency. Sometimes 200 and higher potencies give excellent results in single doses.

*Annilinum*.—In this connection I must mention two other remedies that have characteristics very much like Arsenic.

With Annilinum there is great prostration with extreme restlessness. The pulse is imperceptible, but the body is hot. A true picture of blood poisoning. The remedy may be

used with advantage in plague and other malignant diseases also. Always think of Annilinum where Arsenic seems indicated but fails to relieve. Dr. P. C. Majumdar recommends this drug, having used it successfully in some cases. Detailed symptomatology may be found in Allen's *Materia Medica*.

**Anthracinum.**—When Arsenic or the best selected remedy fails to relieve the burning pain &c., this remedy may be used with great advantage.

Septic fever, rapid loss of strength, sinking pulse, delirium and fainting ( Pyrogen ).

Bad effects from inhaling foul odors of putrid fevers or dissecting room ; poisoning by foul breath.

**Arum Triphyllum.**—This remedy has seldom, if ever, been used in cholera proper ; but there is one aspect of the disease where it may be invaluable at times. In threatened uremia it is an excellent remedy. It has been used with excellent good results in typhoid scarlatina and we do not see why it should not be used with similar effect in typhoid cholera. These cases are generally marked with apathy and scanty or suppressed urine. The sore mouth and sore nose are the guiding symptoms in malignant conditions. Its leading characteristic is the constant picking at the nose until it bleeds. The patient picks lips until blood flows down. The patient picks and bores into the red bleeding surfaces, though it is very painful ; screams with pain but still keeps up the boring.

Should not be given low or repeated often, as bad effects follow. The higher potencies act more promptly.

**Asafœtida**—Asafœtida is a remedy that may prove very useful in cholera infantum. It has been used with advantage in diarrhœa of scrofulous children and hysterical women. The stools are generally very offensive and are particularly worse at night. There is painfulness and oppression of the stomach,

the abdomen is distended with flatus, which is very fetid and disagreeable; there is frequent inclination to evacuate the bowels, and the discharge is thin and watery.

The pulse is quickened, the head is affected with flying pains and there is giddiness. Like the pulse the respiration also at times becomes quickened, there is constriction of the chest with dyspnoea. Another marked symptom is globus hystericus. The stools are yellow, dark, brown, watery and profuse. During stool there is discharge of offensive flatus.

We generally use the 30th potency.

*Baptisia Tinctoria*—For the typhoid state of cholera we have an excellent remedy in *Baptisia*. Great prostration and tendency to decomposition of fluids are marked features of the drug. All exhalation and discharge is fetid. (Pyrogen, Psorinum).

Perfect indifference, stupor, the patient falls asleep in the midst of his answers, when spoken to answer correctly. but delirium returns at once. (Arnica).

The tongue is coated white, and there is sordies on the teeth.

Diarrhoea of children especially when very offensive (Carbo veg., Podoph., Psorinum).

In the typhoid state the patient thinks he is scattered all over the bed, as if his body is cut to pieces and so he tosses about to get the pieces together. In whatever position the patient lies, the parts rested upon feel sore and bruised.

*Baptisia* is a remedy that we have used extensively and with excellent results; only lately we had occasion to use it in a very bad case with very good effect. We generally use the lower potencies in frequently repeated doses.

*Baryta Carb*—This is a remedy that is very rarely used in disorders of the alimentary tract. It has however sometimes

been used with advantage in the diarrhœa of scrofulous children and hence may be called for in cholera infantum. In such cases the concomitant symptoms generally guide in the selection of the remedy. The higher potencies are generally used.

**Belladonna**—We generally use Belladonna in two stages of cholera, viz : in the hydrocephaloid condition of cholera infantum and at the beginning of uremia when typhoid symptoms begin to manifest. In both these conditions Belladonna has been a great help to me time and again. In many a case I have been able to avert that fearful complication—uremia—by the timely administration of Belladonna. A single dose has been able to establish the urinary secretion with the consequent disappearance of all brain symptoms. It is much better than the routine practice of giving Cantharis for urinary secretion.

In Belladonna the head is generally hot and painful, the face is flushed, the eyes are injected, the pulse is full and bounding ; the mouth is dry and the patient is drowsy but cannot go to sleep. Frequently there is a tendency towards convulsion, there is rush of blood to the head and face and a throbbing sensation in the head and neck or all over the body, the abdomen is sensitive and frequently very much distended.

The skin is shining red and hot. Delirium. The patient wants to run home, is inclined to be spiteful, wants to bite or strike people, sees all kinds of animals and is frightened. He is sensitive to light, noise and other external impressions. The character of the stool is hot—very characteristic.

Many cures have been made with the repeated doses of the 3x potency. Of late we have had excellent results from a single dose of 200th. Here is a case illustrating the usefulness of the remedy :—

A boy, six years old, had been attacked with cholera two days previous to the day I was called to see him. When I arrived, I found the boy slightly drowsy, his pulse in a flickering condition, his eyes slightly injected, his senses somewhat benumbed, his head hot and the rest of the body cold; his evacuations were of the rice-water consistency and the abdomen slightly tympanitic. Our friends, the allopaths, say that we are very poor in diagnosis, although it is true that we cure our cases. We admit the shortcoming; but when we get a case from them, how many of the symptoms are the symptoms of the disease and what portion of it is due to allopathic drugging it is very difficult to make out. And so it was with the present case. However, I gave the poor boy a few globules of Nux Vom 200 dry on the tongue and left a few Placebo globules to be administered three hours later.

In the evening I saw him again. His father told me that the boy was slightly better but that he had been delirious during the day, had been sitting up in bed and had been wanting to go home all the time, although in his own room. His abdomen was still tympanitic, but the evacuations had been more yellow. He had been moved twice during daytime and his pulse was much improved in volume but was very frequent. He had also a slightly flushed appearance. Belladonna 30, one dose, dry on the tongue. I also left two more doses to be administered in case he got worse at night, otherwise no more medicine. In the morning the boy looked better all round. His eyes were clear, the tympanitis gone, he had slept fairly well during the night. But he had not passed water even then. Placebo one dose.

In the afternoon I got the report that he had passed a quantity of urine about 10 A. M. Had not been moved since and had slept more or less all the time. No more medicine

was required and the last time I saw the boy was a fortnight ago when I went to see the father who was suffering from renal colic. He is in perfect health now, it is nearly six months.

**Bismuth**—Bismuth, as we all know, is a great remedy for diarrhœa among our friends of the other school, and it does sometimes check loose evacuations as we will presently see from its symptoms.

In our hands Bismuth has been very useful in diarrhœa of children and I think Bell speaks very truly when he says—The value of Bismuth has not been fully appreciated in cholera infantum. The excessive prostration without coldness of the surface will readily distinguish it from other remedies. In thickly coated white tongue and gastric symptoms it resembles Antimonium crudum.

Vomiting of water as soon as it reaches the stomach and purging, offensive stool.

Stools watery ( *Natrum album* ).

Stomach—Pressure as from a load in one spot; alternating with burning; pain crampy, spasmodic, with irritation, cardialgia and pyrosis,

Cholera morbus and summer complaints when vomiting predominates, stools foul, papascent, watery, offensive, very prostrating ( *Ars.*, *Ver.* )—Allen.

**Borax**—This remedy has very few symptoms that will lead to its being used in cholera but it may be of use in cholera infantum having some desired characteristics.

Dread of the downward motion is a leading symptom. The child cries out as soon it is taken down from the lap to be laid on the bed.

Constant vomiting with painless diarrhœa, distension of the abdomen after every meal, pinching pain in the abdomen, abdomen flabby and sunken, frequent urination preceded by



cries. Urine acrid and fetid. Startling from sleep with anxious screams, throwing the hands about, seizing things, clinging to the mother.

We have used Borax in apthous sore mouth and in diarrhoea of children where there was marked debility with some of the other characteristics.

**Bryonia Album**—Although Bryonia has a few symptoms that would call for its administration in cholera, yet it has been instrumental in saving life in two or three very desperate cases in our hands and as such we are obliged to give it a prominent place here.

In the case of a neighbouring physician where life was despaired of, a single dose of Bryonia 200 became the life-saviour and brought about a radical change in the condition of the patient.

The symptom that led to its use was a pain and oppression in the chest that compelled the patient to lie perfectly still and with it there was great difficulty of breathing. There was also great thirst for large quantities of water.

Complaints when warm weather sets in after cold days; from cold drinks or ice in hot weather, after taking cold or getting hot in summer. From exposure to draught of cold winds (Acon., Hep. Sulph.)

Aggravation from motion is one of the leading characteristics. In delirium the Bryonia patient talks constantly about his business, sometimes there is great nausea and faintness.

Great thirst for large quantities of water at long intervals. Pressure as from a stone at the pit of the stomach, relieved by eructations (Nux, Puls.)

Diarrhoea during hot weather, bilious, acrid with soreness of anus; stools like dirty water, from cold drinks when over-heated, worse in the morning on moving. We give

below a very interesting case that we had occasion to treat some years ago.

"I was called to attend a young woman who was suffering from an attack of cholera. There had been another case in the same house that ended fatally and this patient had nursed the one deceased.

She was in the collapse condition, her pulse was imperceptible; she was somewhat apathetic, but answered questions that were put to her. The abdomen was slightly tympanitic and the stools were watery and copious, mixed with mucous shreds. She had also great nausea, but vomited little.

Colchicum 30 after every two stools. In the evening about 5 P. M. I saw the patient again and found her in a much worse condition. She had slight difficulty of breathing and she complained of great pains which were particularly worse on motion; so that she had to keep perfectly still. The stool and urine all stopped, the tympanitis was worse and she was very much distressed. The nausea was gone, but in its place, she had constant hiccough with dry cough and a tickling in the throat. I directed Bry. 200 to be taken every half an hour and to report again to me in two hours, as I expected the Carbo Veg. condition would soon supervene.

But Bryonia did wonders for this patient, as the next report was that she was sleeping and therefore must be more comfortable. At first I had grave doubts and enquired repeatedly whether she was really asleep, or whether it was the eternal sleep. But they emphatically declared that she was asleep and was better. Placebo continued during the night.

The next morning I went to see her early and found her in a much better condition, and thenceforward she made an

uneventful recovery. Bryonia is such an unusual remedy in cholera ; but after all we treat the patient and not the disease."

**Calcareæ Arsenicum.**—This remedy is seldom called for in the true cholera evacuations ; still there is one stage of the disease where it is invaluable. We have already mentioned about this before and here we shall try to incorporate some of the leading symptoms.

Great depression of mind, congestion in the head before an epileptic attack, head is hot in albuminuria, face swollen especially above the eyes. After belching, burning in œsophagus as from pepper with garlicky taste in the mouth when swallowing, acidity of stomach, gastric ulcer. May be useful in pancreatic diseases, with colic and looseness of bowels. Bowels very tense, albuminous stools with ascaridis, region of the kidney greatly sensitive to pressure, infantile diarrhœa. Must pass wind every hour. Urine contains mere albumen.

Albuminuria during pregnancy.

Loses voice and afterwards consciousness. Before an epileptic attack a kind of asthma waking soon after midnight. Heart beat very strong in albuminuria. Back of hands œdematus, collapse in heart and kidney affections, *embolism in albuminuria*. Fever in the afternoon with sensation as if the abdomen were puffed ; much thirst for cold water and afterwards loss of appetite in the evening. Bruised feeling in the chest, fatty degeneration of the heart due to obesity. Heat and kidney diseases. Its antidotes are Carbo veg Glonoin and Pulsatilla.

Dr. Clarke in his Dictionary of Materia Medica gives us its characteristics :—Vertigo when moving the head, flying or swimming sensation as if the feet did not touch the ground ; indescribably well, ( in malignant diseases this is always a very grave symptom. I have frequently observed plague

patients make this remark just before losing consciousness. They declare that they are all right and there is nothing the matter with them. In these cases we should know that the end is not very far off). Rush of blood to the head before an epileptic attack. Epilepsy with heart disease. The headache goes from before backwards. Violent pains in the right eye, delirium in the dark. Blue rings under eyes. Swelling of inguinal glands with tearing pains in the legs. General dropsical swellings with albuminuria. Burning and heat in chest, feeling as if he would suffocate with palpitations. Every fourth beat of pulse intermits with great regularity. According to Dr. P. C. Majumdar it is the most efficient remedy in the infantile enlarged liver and spleen of india. In albuminuria great sensitiveness of the kidney. Cholera with impeded respiration from heart embolism. It is suited to lymphatic, scrofulous and tuberculous persons ; fat women approaching the climaxis. It is a chilly medicine, the symptoms being worse in cold weather, when out of doors.

I have myself made use of this remedy in albuminuria, in cholera, in plague and in the enlarged liver and spleen of infants—a disease so common in Bengal but seldom heard of elsewhere.

I have already stated I learnt its use in the sudden failure of the heart's action from Salzer's excellent brochure on cholera.

Here is a case where *Calcarea arsenica* did very good work.

A young man, aged 20, was attacked with cholera about the beginning of December. When I saw him, he was in the collapse condition, his pulse was imperceptible, he was very restless, tossing about the bed ; complained of violent pains in the abdomen, his stools were of the rice-water consistency and being moved very frequently. He was an up-country lad, had come down to Calcutta for shopping

purposes, had suffered privations in the way and had taken irregular meals of undigestible substances at all hours. He had been given chlorodine &c. previous to my visit.

Aconite 3x every hour for four hours. When we visited him again, the pulse was slightly perceptible, but he was slightly drowsy and complained of severe abdominal pains. Nux vom. 200, one dose and no more medicine for four hours.

About 10 o'clock in the night I was informed that he was better in every way but seemed to be more drowsy. The pulse was perceptible but very weak. Placebo four powders, one every three hours during the night.

I visited him early in the morning, when I found a decided improvement in the patient. His pulse was much better, the restlessness was also gone but he still complained of the pains and felt very hungry. It was nearly 48 hours since the disease began, but as yet he passed no urine and complained of slight burning of the body. Sulphur 200, one dose. No more medicine during the day. At 2 o'clock I was informed that he had still passed no urine but was talking non-sense and was jumping out of bed. He was also slightly feverish. Bellad. 200, one dose.

About six o'clock I was informed that he had still passed no urine and was in the same state. Moreover he was becoming very restless. I gave him a dose of Acon. 200 and told the man not to administer the powder, should he find the patient better on his return, for it has been my experience that the less medicine we administer during reaction, the better.

On his return he found that the patient had passed water but still he gave him the powder as he thought the patient was still very restless. This however made his condition worse.

Although he passed water freely and the stools became more consistent and natural, the pulse was worse and he was completely unconscious. Except groaning and moaning, he could not answer our questions and the pulse was very feeble and irregular.

Calc. Ars. 30 every two hours. I was informed after six hours that the pulse had improved but he was still unconscious and was getting drowsy. Moreover there was marked tympanitis as he had not been moved since the morning.

Nux Mosch. 30, one dose followed by Placebo.

The patient was decidedly better in the morning, and in the course of two days he was completely restored to health.

In my opinion the timely administration of *Calcarea arsenica* saved the patient from an imminent heart failure while *Nux Moschata* no doubt helped to clear the brain symptoms which was also equally essential.

(*I. H. R., Vol XIII, No. 12.*)

*Calcarea Ostrearum*—I do not know whether *Calcarea* has ever been used in true cholera, but that it has been used with decided good results in cholera infantum and other loose evacuations of the bowel, is a well-known fact.

Diarrhoea during dentition. The *Calcarea* child is generally flabby and is very susceptible to cold. His head sweats a great deal. He has great longing for eggs; craves for undigestible things (*Alumina*). Aversion to meat. Acidity of the digestive tract; sour eructations, sour vomiting, sour stool, sour odor of the whole body (*Hepar, Rheum.*)

Pit of the stomach swollen like an inverted saucer and painful to pressure.

Uremia and other diseases brought on by standing on cold damp pavements, or working while standing in cold water.

*Stools*—Green, whitish, large, watery, yellow, smelling like rotten eggs, sour, undigested containing curdled milk, *Ascarides* with the stool. Summer diarrhœa of children.

Debility.—Profuse sweat on the head when sleeping, especially in the back of the head, wetting the pillow. Knees clammy. Feet constantly cold and damp.

The selection of *Calcarea* will frequently depend more upon the constitutional symptoms than the character of the stool and like indications.

*Calcarea Phosphorica*—Bell has very truly observed that *Calc. Phos* is one of our most valuable remedies for the diarrhœa of scrofulous and rachitic children. I have frequently used this drug for the debility and general prostration that so frequently follow an attack of cholera. Many a case that finally merges into tuberculosis is saved by the timely administration of the drug.

Like *Calcarea Ost.*, it is also a good remedy during dentition. Great emaciation, the child looks old and wrinkled. Skin dry and cold.

*Stools*—Green, slimy, undigested, spluttering, expelled forcibly. Very offensive.

I have made most extensive use of *Calc. Phos.* in cholera infantum when *China* and other remedies failed to effect a radical cure and a hydrocephaloid condition was impending.

“A young boy about 3 years old had an attack of cholera and in spite of our best efforts lingered for days and began getting from bad to worse every day. We tried *Chamomilla*, *Ipecac*, *Podophyllum*, and *Verat.* according to indications when brain symptoms began to develop. *Apis* was tried in vain. Ultimately I suggested *Calc. Phos.* and the 30th potency in frequently repeated doses effected a complete cure.”

“Diarrhœa is very prominent and the stools are green and

spluttering ; that is the flatulence ( of which there is much ) with the stool makes a low spluttering noise when the stool passes. I have made some very fine cures in such cases, where there seemed little hope for the child and hydrocephaloid seemed impending. The little patients were shrunk, emaciated, and very anæmic.”—E. B. NASH.

Camphor—This is a remedy that has been so extensively used in cholera that we should deal with its virtues at some length here. Camphor vies with Cuprum in its usefulness in choleraic diseases. Hahnemann observes :—“A receipt has been given to the world which proved so efficacious in Dun-burg in the Asiatic cholera that of ten patients but one died. The chief ingredient is camphor which is in ten times the proportion of the other ingredients. But not a tenth—nay, not one in a hundred of the patients would have died, had the other ingredients which were but injurious and obstructing, and the venesection been left out and the camphor been given alone and always at the very commencement of the disease, for it is only when given alone, and at the first invasion of the disease that it is so marvellously useful.”

Joslin very truly remarks :—During the prevalence of cholera in any locality, every person should consult his physician for such slight symptoms as often precede cholera. On such application to the physician, if he is a homeopath, the disease may almost always be warded off or, if commencing in a slight form, immediately cured, and prevented from advancing into the form of cholera proper. The most usual premonitory symptom is a fecal diarrhœa, often so slight that it would excite no apprehension in ordinary times. Or the evacuations may be rather copious, or in moderate quantity and milky, no other symptoms being present. In any of these forms diarrhœa in the epidemic is called choleric. It is often referred to as the first stage of the first variety of



cholera ; the importance of an early attention to it is so great, that at the expense of some repetition, a familiar account of its symptoms and first treatment is given here, for the convenience of such families as may use this book, and physicians hitherto unacquainted with this practice.

Where there is diarrhœa without any special indication for any particular remedy, give a drop of Spirits of Camphor on a lump of sugar or in sugared water. Give another drop after an hour or earlier if the diarrhœa returns and let it be followed by three doses of the third attenuation of Camphor at intervals of an hour or after each evacuation if it occurs sooner.

The Camphor may also be used for a short time, with advantage for most other symptoms, but if this is domestic treatment, there should be no unnecessary delay in consulting a homeopathic physician ; as the disease may reach a dangerous height before the appropriate remedy is employed.

Where there is a decided attack of cholera, we resort from the first hour, or a longer or shorter time according to circumstances, to a treatment for which as well as for all the most successful modes of treatment the world is indebted to Hahnemann.

Whatever may be the form of the attack, give a drop of the tincture of Camphor, dropped on a lump of sugar, and then dissolved in a table spoonful of cold water. Repeat this every five minutes, until there is a decided mitigation of the symptoms. This will usually be after five or six doses. One sign of its good effect is perspiration. In proportion as the symptoms yield, let the doses be at longer intervals, as an hour, two hours, twelve hours and even twenty-four hours. In these later doses, the third attenuation would be preferable. If the disease be taken in time, ten or twelve doses of the tincture are ordinarily sufficient.

In the preparation of this Spirits of Camphor, Hahnemann recommended the proportion of one ounce of solid camphor to twelve of alcohol. Dr. Quin used the preparation of one ounce to six. We ourselves use a similar preparation even now. Camphor is very extensively used now-a-days in India. The Camphor treatment of cholera is so well-known that it is used by many who do not believe in the homeopathic system of treatment. There is abundant testimony to the efficacy of pure Camphor treatment from all parts of Europe.

Hahnemann states that in Berlin and Magdeburgh alone, thousands of families having followed his instructions respecting the treatment of Camphor restored those of their members who were attacked by the epidemic—restored them in less than a quarter of an hour.

But I must say here that Camphor is seldom indicated where a physician is called in. Generally that stage is long past at the time. From the general ability of the early employment of Camphor, it is not to be inferred that the homeopathic physician will usually commence with it, when the family instructed in its use, has given many doses of it previously to his arrival. His course of course will be divided by a consideration of the totality of the symptoms.

Hahnemann's instructions \* as to the use of Camphor at the onset of a cholera attack had been issued on the 10th. September 1831.

Two months afterwards Dr. Quin was at Tischnowitz in Moravia, whither he had gone to assist in treating cholera patients. He had soon an opportunity of testing in his own person both the effects of cholera and the effects of Hahnemann's recommended remedies. Here are the words in which he describes the attack on his own person—"I fell to the ground insensible; (no premonitory diarrhœa!) carried

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\* Lectures on Cholera by L. Salzer.

at once to bed. I had recourse to the Spirits of Camphor as soon as I had recovered my senses ; and after six doses the cramps, the retchings, the sensation of burning at the stomach, the feeling of sinking and prostration, the vertigo and the feeble and slow pulse sensibly diminished. The borborigmi, the great coldness of the face and extremities and their blue, mottled colour, continued for sometime longer and gradually disappeared. The action of the bladder did not return until twenty-two hours after the attack. Slowly the other characteristic symptoms also abated ; but for some days though rescued from instant death there remained a livid circle round the eyes, there was occasional headache, giddiness and constriction of the chest." Interesting and instructive as this case no doubt is in itself, it becomes the more so, from the fact, that it was the first of many more similar cases which were soon afterwards taken up by Dr. Quin, and treated by him according to Hahnemann's instructions, with a result shown in the annexed table sent to him by the Chief Magistrate of Tischnowitz :—

	CASES OF CHOLERA	CURED	DIED
Allopathically treated ...	331	229	102
Homeopathically treated ...	278	251	27
With Camphor alone ...	71	60	11
Inhabitants 6671 ...	680	540	140

Dr. Salzer further observes :— I believe, gentlemen, after what I have said, you will agree with me, that the homeopatheity of Camphor to such choleraic attacks as described by Hahnemann, has upto this day remained undemonstrated and undemonstrable. It is only by the aid of Allen's collection of cases of true camphor poisoning as recorded

in the 10th Vol. of his *Encyclopedia of Pure Materia Medica* that we for the first time get a true insight into the therapeutic relation between the effects of camphor and the first stage of the spasmodic variety of cholera, "with its tonic, spasmodic character" as Hahnemann described it ; for we have seen that Camphor in full and poisonous doses is a powerful exciter of the motor nerves, capable of causing both tonic and clonic spasms, thus being homeopathic to the first stage of the spasmodic variety of cholera.

Having dealt with the history of this valuable drug, now we shall try and enumerate some of the leading characteristics of the drug, for after all the totality of symptoms is always the sole guide for the true homeopath. For to administer a drug because of its utility in the so-called first, second or third stage of a disease is a most unsatisfactory way of doing things. Here is a case to the point :—

A very rich upcountry Zeminder who was living in Calcutta, had an attack of cholera. Two very eminent homeopathic physicians were called to attend on him.

My late grandfather Dr. Behari Lall Bhaduri who happened to be one of the physicians was of opinion that the patient should have Cuprum for he elicited all the symptoms of Cuprum, but his colleague insisted on giving Camphor as he considered it to be a case in the first stage of the spasmodic variety of cholera. Accordingly Camphor was administered and the remedy seemed to have had a most disastrous effect, so much so that we have not been able to forget the effects of it even to-day. The patient died almost immediately.

■Bell says :—In cholera great sinking and collapse, sometimes without stool or vomiting. Cold as death, but cannot bear to be covered. Camphor is useful in the very commence-

ment of diseases of the bowels ; later stages presenting similar symptoms, require Verat., Cuprum &c. "*In Camphor collapse is most prominent ; in Verat. all the evacuations and vomiting, in Cuprum the cramps.*"—Dunham.

*Stools* :—The stools are generally brownish or black, watery and like coffee grounds.

Bad effects of shock from injury, surface of body cold, face pale, blue, lips livid, profound prostration.—Allen.

Surface of the body cold, yet cannot bear to be covered ; throws off all coverings ( Merc., Secale ). The tongue is cold, flabby and trembling ( Lach. ). *Nose cold and pointed*, anxious and restless, *skin and breath cold* ( Verat., Jatropha ). In the first stage of cholera, severe long lasting chill ( Verat. ).

Great coldness of the body with sudden and complete prostration of the vital force. It is often a very useful remedy in pernicious intermittents. The pulse is very weak, extremely small, and scarcely perceptible.

Here are a few cases from Dr. Salzer's Lectures :—

N. G., aged 21, a woman of intemperate habits, when walking in the streets to-night at half past eleven, was suddenly seized with severe cramps in the abdomen and legs. She would have fallen, had she not been supported and led into the house. We saw her first at 12 o'clock on the 21st. October. Her abdomen was much swollen, she had severe cramps in the legs, shivering and coldness all over the body. Frequent muttering delirium, tossing about the bed, complained much of cold. Great desire to vomit, little rejected, pulse slow and weak.

Tincture Camphor in water every quarter of an hour.

22nd. one A. M. much better.

Mis. T., aged 23, subject to dyspepsia attacks. She awoke this morning, 4th November, about 6 A. M., with vertigo,

nausea, and pain in the epigastrium. We first saw her at 7 A. M. the same day. She had vomited ( three times in an hour ) a large quantity of greenish watery liquid. She complained of pain in the head and the stomach. Skin cold, pulse 120 irregular ; painful dry retchings, no vomiting.

Tinct. Camphor every 10 minutes. One P. M., no vomiting ; occasional pains in the stomach and through her head ; taken no food, rather thirsty. Continued Camphor every half an hour until relieved. 5th November noon—Says she is better ; has weight and pain in epigastrium, and feels a little nausea.

Camphor continued. 6th November 2 P. M.—She is sitting up and is quite well.

R., aged 4, was quite well to-day, 11, December. While sitting playing, about 3 P. M., she cried out suddenly on account of pain in her bowels, and when relieving them began to vomit white frothy fluid. She became stiff, cold and blue particularly below the eyes ; complained of pain in her belly and fainted, no urine since forenoon. Seen at 9 A. M. and ordered Camphor half-hourly.

12th 9 A. M. After a few doses of Camphor went to sleep ; slept well and perspired ; urinated this morning. Is up playing and seems well.

Dr. Salzer has reported many more cases illustrating the excellent results of Camphor.

Besides the ordinary tincture of Camphor as recommended by Hahnemann and also the tincture as prepared by Dr. Rubini, Dr. Salzer has recommended a trituration of Camphor that should be used 10 grains for a dose. It contains 1 grain of Camphor to five of sugar of milk.

Camphor antedotes nearly every vegetable remedy ; also tobacco, fruits containing prussic acid, poisonous mushrooms, should not be allowed in the sick room in the crude form.

It should not also be carried with homeopathic remedies in the same box. It should generally be carried in a well sealed box very carefully.

**Cantharis or the Spanish fly**—Though not a remedy for the true choleraic evacuations proper, still it is an invaluable aid in the later stages of the disease, where there is a likelihood of uremia supervening in the course of the disease. But the symptoms of Cantharis are clear-cut and unmistakable and abuse of the drug like that of any other remedy in the homeopathic materia medica, is fraught with very far reaching mischievous results.

The stools of Cantharis are not very characteristic.

**Stools** :—Passage of pale red, white or tough mucus, like scrapings of the intestines, with streaks of blood.

Constant urging to urinate, passing but a few drops at a time, which is mixed with blood ( sudden desire to urinate and intense itching in the urethra Petrosel ), violent tenesmus and strangury, burning cutting pains in the urethra during micturition.

There is a persistent violent urging to urinate, with great tenesmus. Urine is passed only in drops and seems like molten lead passing through the urethra, so intense is the burning. There is with this usually an aching in the back.

The burning pain and the intolerable urging to urinate is the red strand of Cantharis in all inflammatory affections.

Three years ago I had occasion to treat a very rich lady in the suburbs of Calcutta, who was suffering from a very severe attack of cholera. There was another local physician attending the patient. I was called in when the disease was at its height. With Colchicum, Verat alb and Arnica I managed to abate all the other symptoms of the patient and she was apparently getting on well but she did not pass any

urine and that caused considerable anxiety in the patient's family.

Now my poor colleague suggested we should give *Cantharis* to the patient as she was not voiding urine. I told him that as the patient had no symptoms of *Cantharis* and as the improvement in her general condition was gradual and steady, I would not give her any medicine and so kept her on *Placebo*. The patient had no symptoms of uremia, and the patient passed a copious quantity of urine the next morning in the natural course of events.

Now my colleague showed me a Vernacular book in which it was advised to give *Cantharis* if the patient did not pass urine, regardless of the symptoms. This is really a dangerous practice. Hahnemann strictly enjoins us not to interfere with the patient in any way so long as the improvement continues. In fact this sort of meddlesomeness is very injurious.

**Capsicum**—I do not know whether *Capsicum* has ever been used in cholera proper. It is a remedy that has frequently been found useful in dysentery. There are one or two symptoms that will generally lead to the use of this drug.

Every stool is followed by thirst and every drink by shuddering. Every chill is attended with thirst and every drink with shuddering. As the coldness of the body increases, so also does the ill humour.

A severe drawing pain in the back. Burning and smarting sensation as from cayenne pepper, in the throat and other parts not ameliorated by heat. The burning is very characteristic of *capsicum*.

**Carbo vegetabilis**—The vegetable-charcoal has been one of our sheet anchors in cholera. It has been instrumental in saving many a human life from the very jaws of death.



In cases of difficulty of breathing with a desire to be constantly fanned and particularly if it is associated with marked tympanitis, Carbo acts like a charm. I have myself verified it in practice time and again and can vouchsafe for its efficacy.

Although opinion is divided as to its usefulness among British practitioners, we can all of us here in India echo the opinion of our late illustrious colleague Dr. Mohendra Lal Sircar.

Such authorities as Teste, Rusell, Hempell and Hughes altogether question the usefulness of this drug in the collapse of cholera. Dr. Hughes after his pronouncement on the drug in his *Pharmacodynamics* and in his *Principles and Practice of Homeopathy* says, "Carbo vegetabilis was much used by Tessier to meet the later prostration of cholera and Dr. Sircar seems to think it of value."

Dr. Joslin mentions the following as indications for Carbo. veg. and also cites a few cases: "If the patient is blue, cold and pulseless *i. e.* collapsed, Carbo. veg. two or three globules. If the collapse is complete, the principal remedies are Cuprum, Arsenicum, Carbo. veg. and Secale.

Here is a case reported by Dr. Joslin—A girl, aged  $7\frac{1}{2}$ , was attacked about  $4\frac{1}{2}$  P. M., Thursday, Aug. 16th 1849. The disease commenced with diarrhoea and vomiting. Was seen before the collapse was complete. Then took one drop doses of Camphor and then some doses of Camphor 3rd and then was treated with Veratrum 30. She was in collapse within two or three hours from the commencement of the disease. Pulseless; voice nearly lost; tongue, face and limbs cold; cramps; urine suppressed. In the evening she was put under Carbo. veg 30 and Cuprum met. 30 alternately, every hour.

Friday, the second day, in the morning;—after remaining in this state of collapse for about twelve hours, entirely

pulseless, reaction came on in the morning under the continued use of Carbo. veg 30 and Cuprum 30 given as above mentioned. The pulse and voice were restored, and the tongue and most of the skin acquired a temperature nearly normal.

Saturday, the third day—A stool nearly normal except as to consistence which was that of mush i. e. semi fluid. Reaction about complete. Temperature normal, the recovery was also complete.”

We think Carbo. veg. alone would have effected the cure in this case.

Dr. Nash in his excellent brochure, *Leaders in Therapeutics*, gives a picture of Carbo. veg. that we so often come across in cholera. “Vital forces exhausted, cold surface especially from knees down to feet, lies motionless as if dead, breath cold, pulse intermittent, thirsty, cold sweat on limbs. This is truly a separate condition. Then add to these symptoms, blood stagnates in the capillaries causing blueness, coldness and echymoses ; patient is so weak that he cannot breathe without being fanned constantly. Gasps, Fan me ! fan me ! Carbo. veg. has saved such cases.” The most marked and valuable place for this remedy is in its power to relieve complaints from excessive flatulence in the stomach. Stomach feels full and tense on account of flatulence, so much so that it causes distressed and painful breathing which compels the patient to call for constant fanning. In such cases Carbo veg. acts very promptly.

Hippocratic face, very pale, grayish yellow, greenish, cold with cold sweat ; after hemorrhage, from loss of vital fluids. Patients crave things that make them sick ; old toppers crave whisky or brandy, want clothing loose around the abdomen.

Weak digestion, simplest food disagrees ; excessive accumulation of gas in the stomach and intestines lying down.

Eruclatations gave temporary relief. Deficient capillary circulation causes blueness of skin, and coldness of extremities, vital powers nearly exhausted, desire to be constantly fanned.—H. C. Allen.

In the collapse stage of cholera as already stated, with copious cold sweat, cold breath, cold tongue, voice lost, Carbo veg. will be your sheet anchor many a time, particularly if there is tympanitis. I have found it useful even in cases where Opium and Ant. tart. failed. We sometimes use Carbo veg. like Sulphur in cases where these well-selected remedies fail to act.

In the hemorrhagic variety of cholera we frequently find Carbo veg. indicated, particularly where Aconite fails to produce any good effect. Sometimes we have sudden collapse without stool. Nose, cheeks, and finger tips icy cold, lips bluish, cold breath and tongue. *Respiration weak and labour-ed Hiccough at every motion.* This last symptom you will frequently come across in the later stages of cholera and is one that is very difficult to relieve. Light drinks should be recommended in such cases. Sometimes they persist with great tenacity, but we need not be anxious on that account. My late grandfather Dr. Bihari Lal Bhaduri used to say:—“I have never lost a case from hiccough.” When he said this he backed it with an experience of hundreds of cases. This has been our experience also. Hiccough is a complication that seldom occurs in cases that have been under homeopathic treatment from the beginning. These cases generally come from allopathic hands and Nux is our great ally in such cases; failing which we try Carbo veg.

In its prostration Carbo veg. is very similar to China. We generally use the 30th potency. Sometimes the 200th also does very good work.

Dr. Salzer in his lectures mentions the following:—I can-

not tell you who first hinted that Carbo veg. should be used in cholera, in the collapse stage ; but it is a very happy hit indeed.

Both Baehr and Kafka speak very highly in its favour, and I may as well add my own small share to the statements of others. Carbo vegetabilis, says Dr. Baehr, has done us not infrequently good service at a period of the cholera process, where most of us are at a loss how to lay hold upon an effective remedial agent. It is indicated at the asphyctic stage when vomiting and purging have ceased, and when there are no cramps any more, the patient lying moreover extremely prostrated—corpse-like. Carbo often follows well after Arsenic ; more frequently, however, it suits cases void of reactionary signs from the very beginning.

It is worthwhile noticing that the effects of carbonetted hydrogen closely resemble the asphyctic stage of cholera. In Allen's Encyclopedia, Article Carbonicum Hydrogenisatum, we read actually that it has produced in one man exposed to the gas ricewater stools for sometime after the attack.

**Carbolic Acid**—This is a remedy that we have never used in cholera yet, but still it has some very marked characteristics that may call for it in cholera.

“Profound prostration, collapse, surface pale and bathed in cold sweat. ( Camph, Carbo veg, Verat. alb. )

In malignant diseases. Vomiting of drunkards, in pregnancy, of dark olive green fluid ( Pyrogen—H. C. Allen. )

Stools :—Ricewater, offensive like rotten eggs, Bilious, watery, involuntary, thin black stools ( in collapse )—Bell.

In hydrocephalus with offensive stools Carbolic Acid will be very useful at times.

In an exhausive diarrhoea with very offensive stools when Carbo veg, and Psorinum do not help give Carbolic Acid”—C. Pearson.

**Chamomilla.**—This remedy though seldom called for in true Asiatic cholera, is still found to be very useful in diarrhoea and cholera infantum in which it is invaluable. We have time and again used this drug with great benefit and I think we should not be in too much hurry to charge it for another, if the symptoms will indicate it. If we find the least improvement, we should persist with it.

If we notice some improvement this will itself bring about a perfect cure in many a case inspite of the experience of some authors to the contrary. During dentition children very frequently suffer from these derangements and Chamomilla with Calcarea stands at the head of the list for such troubles.

Peevish, irritable, oversensitive to pain, driven to despair (coffea), cannot return a civil answer—H. C. Allen.

Child becomes exceedingly fretful and whiny and wishes to be carried constantly. Piteous moaning.

“One cheek red and the other pale.” I have myself verified this symptom of Chamomilla.

“Novices often fail with Chamomilla. It is not adapted to every case of diarrhoea during dentition. The mental symptoms are of chief importance (Comp. Cina) but the desire to be carried alone is not decisive. If however the other symptoms correspond, particularly of the stool, this symptom will make the choice more certain.”—J. B. Bell.

Stools—Yellow, watery or greenish and slimy, and hot. Sometimes chopped up white and yellow mucus. At times very offensive like rotten eggs. Convulsions during dentition. Hydrocephalus in the later stages of cholera infantum (Calc. Phos). Convulsion in children from morning, after a fit of anger in the mother.

“Dentition with diarrhoea of green stools smelling like rotten eggs.”

"Hot and thirsty with the pains, also fainting."

"Gastralgia in coffee-drinkers, constrictive pain or as if a stone were in the stomach."

"Wind colic, abdomen distended like a drum; wind passes in small quantities without relief."

"Stools green, watery, corroding (Sulph) like stirred eggs."

"Stools hot, smelling like rotten eggs."—E. B. Nash.

As regards potency we generally use the 12th, but sometimes the 200th acts very well.

*Cicuta Virosa*.—We are sometimes called upon to use this drug in the later stages of the disease, when convulsions and other brain symptoms appear. Here are some of the symptoms. Convulsions violent with fearful distortions of limbs, in fact of the whole body with loss of consciousness.

Brain diseases from suppressed eruptions. Desire to eat chalk, charcoal and such other indigestible things (Alumina, Psorinum.)

In cholera:—Loud-sounding, dangerous hiccough. Vomiting alternates with violent tonic spasms of the pectoral muscles. Congestion of blood to the brain or chest after vomiting ceases.

Violent jerking backwards of the head. Staring or upturned eyes. Heavy breathing. Sopor Convulsion.—J. B. Bell.

The stools are not very characteristic. They are thin and frequent and generally expelled with a great deal of force all at once. Every morning there is aggravation with distended abdomen.

As regards the potency, 6th, 30th or even the 200th has been used with excellent results.

*Cina*.—Though, properly speaking, *Cina* is a remedy that is generally indicated in worm affections, still I used *Cina* in cholera with excellent results, particularly when the symptoms were rather erratic and unexplainable. Our

distinguished colleague Dr. D. N. Ray once told me that Cina had saved many a patient for him. Now it has become my practice to give Cina if the symptoms indicate it whether there are any worms or not.

Face is pale ; sickly white and there is bluish appearance around the mouth ; sickly with dark rings under the eyes. One cheek red and the other pale ( Chamomilla ).

Ravenous appetite, wants to eat all the time. There is a burning sensation in the stomach ( Sulph. ).

Worm affection of children.

Ascarides ( Marum verum. )

The urine is inclined to be white and turbid. The stools are bilious, white or greenish. Round worms are passed with the stools. The white turbid urine is a clear indication for Cina.

We generally use the 200th. The 30th potency is also sometimes used. Here is a case :—

A female child had an attack of cholera. She had homeopathic treatment almost from the beginning. In spite of our best efforts the child was getting from bad to worse.

Ultimately we despaired of her life. There was no history of helminthiasis. The child was drowsy and was boring at the nose occasionally. Occasionally she would scream out in her sleep. She passed no urine for 3 days. After several remedies we gave Apis and expected much from it but to no effect.

Ultimately I gave a dose of Cina 200 and in about 3 or 4 hours' time the child passed a quantity of turbid urine and began improving gradually. I continued Placebo after that. She is a hale and hearty girl to-day. I might mention that there was an epidemic raging at the time, and we lost another case in this very house.

Cinchona.—Like Carbo veg. China is one of our best

remedies in the profound prostration that frequently result from an attack of cholera.

Our late illustrious colleague Dr. Mahendra Lal Sircar said :—"The best remedy that we know of in this condition, is China. It is singular that when we were ignorant of the Hahnemannian system, we used to derive the greatest benefit from Quinine. Hahnemann said "Debility and other complaints after loss of blood or other fluids particularly by nursing or salivation, bleeding, cupping &c." To this Dr. Nash has added profuse suppurations and long continued diarrhoea and I will go a step further and say after an attack of cholera. For this state of things, we have a "friend indeed" in China.

The mental condition of the China patient is also peculiar. He is indifferent and apathetic, frequently of a gloomy and foreboding nature and sometimes taciturn.

The face looks pale and haggard, almost hippocratic.

Excessive flatulence both in the upper and the lower part of the abdomen. Aggravated by eating. Colic worse after eating and better by bending double ( Colocynth. )

One hand icy cold, the other warm ( Digitalis, Ipecac, Puls ).—H. C. Allen.

The stools are generally yellow, watery, undigested, profuse, frothy, involuntary, putrid and painless.

The tongue is coated white or yellow.

Pulse is generally hard and rapid, sometimes extremely feeble.

Great weakness, particularly with the painless stools. Profuse night-sweat. Rapid exhaustion and emaciation.

After a long lasting attack of cholera infantum, child becomes drowsy, pupils dilated, rapid and superficial breathing ; Chin, nose and tips of the ears cold ( impending hydrocephalus )—J. B. Bell.



When properly selected China frequently completes the cure. In threatened hydrocephalus however it is often necessary to follow it up with Calc. phos. The 30th acts very well.

**Colchicum**—Of late this remedy has been very extensively used in cholera and in some instances with excellent results. In Colchicum the abdomen is not so puffed as in Carbo. veg., neither does it lie flat with the spine as in Verat. Alb. Although there is a bursting feeling with the flatulence of Colchicum, still it is nothing like that of Carbo veg.

The stools are generally watery with mucous shreds floating in them. The abdominal discharges contain white and shreddy particles in large quantities. White mucus. Scrapings of the intestines ( Carbolic Acid )

Aversion to food. The smell of cooking food is objectionable. Bad effects of night watching. Urine suppressed, or in drops with white sediment.

Nausea and vomiting. The desire to vomit becomes much less if the patient remains perfectly still. There is heat in the mouth with thirst. Great thirst, even burning, unquenchable. Increased secretion of saliva, often very profuse. The saliva causes nausea and often inclination to vomit, when swallowing it. Burning in the stomach with icy coldness, also in the abdomen.

Colchicum stands next to Podophyllum in painless cholera morbus. It differs chiefly in the stools being smaller and less gushing ; in the time of aggravation, and the presence of the nausea and vomiting.—J. B. Bell.

Bloody stools with deathly nausea from cooking food—Lilienthal.

Colchicum is indicated in the hemorrhagic variety of cholera if there is great nausea and where Aconite and Ipecac fail.

**Cornus Circinata**.—This remedy, though seldom used, is a very valuable one when indicated. Its leading symptom is a distended condition of the stomach and abdomen relieved after passing stool, but the abdomen swells up again in no time. We have verified this symptom in practice time and again.

The stools are watery, greenish and mucous. There is frequent passage of offensive flatus. Jaundice is a very common symptom ( *Chelid.* )

I had a case of a young baby, about 10 months old, suffering from diarrhœa. The characteristic flatulence and the jaundice were very quickly relieved by *Cornus*.

**Croton Tiglium**.—This is a remedy that has been long used in cholera and choleraic diarrhœa, and has a very good reputation in checking these loose evacuations.

Copious watery diarrhœa coming out in a great gush. The bowels are moved with a jerk "coming out like a shot" ( *Gambogia* ) as soon as the patient eats or drinks ; the stools are grayish, yellow and watery.

Constant urging to stool followed by sudden evacuation which is shot out of the rectum ( *Gamb, Gratiola, Podop, Thuja* )—H. C. Allen.

What Dr. Nash says about *Croton Tig.* is so eminently true that we cannot help but quote it here. "When the allopaths, in any case, where they considered an operation of the bowels imperative, had exhausted all other resources, *Croton Tig.* was their "biggest gun for the last broadside." In other words, this is a most violent cathartic.

Now, if *Similia &c.* is not true, *Croton Tig.* ought utterly to fail to cure diarrhœa, but it is true, and notwithstanding this remedy has proved its truth over and over again, the allopaths deny and reject homeopathy.

As in *Podop.* and *Aloe*, *Croton Tig* cures its kind and

no other. Its guiding symptoms are : First yellow watery stool ; second, sudden expulsion, coming out like a shot, all at once."

Now these lines are so true that we have felt justified in quoting them in full. In disease there can be no royal road to a cure. The saying what is one man's meat is another's poison, is as true to-day as it was the day it was uttered. Still our inclination to simplify matters in this world, has led us to most disastrous ways in the field of medicine. While our friends of the other school are making such wonderful strides in the collateral branches of medicine as for instance, in bacteriology, pathology, surgery, hygiene &c., yet they are hopelessly at sea when they come to the study of medicine proper. We find most eminent physicians prescribing patent medicines the ingredients of which are not known to them. Is it to be wondered then that the market is being infested with these patent drugs all over the world. Now, if we can rely on these for the various diseases to which we are subject, then what is the use of having qualified physicians ?

Stools yellow, watery, frequent, brownish or undigested. Coming out like a shot. Generally worse after drinking and is better after sleep. Vomiting immediately after drinking. Violent vomiting of injesta ; of yellowish white frothy fluids. Burning and pressure in the stomach. Colic and writhing around the umbilicus. The lips are dry and packed. Great pain and weakness, coldness of the body.

The stools of Croton are very characteristic. The yellow watery motion, coming out like a shot is always a leading symptom.

**Cuprum Metallicum.**—Copper has long been used in disorders of the bowels. It was known to the ancients. In India it is customary among people to tie a copper coin

around the waist of children. It is said to ward off such diseases as cholera &c.

Cuprum is one of the few remedies recommended by Hahnemann for the treatment of cholera. What was prophesied then, has been very well verified in practice. I quote here in full what Hahnemann said about the treatment of cholera.

“When the cholera appears, it usually comes on in the commencement i. e. in the first stage ( with tonic spasmodic character ); the strength of the patient suddenly sinks, he cannot stand upright, his expression is altered, the eyes sunk in, the face bluish and icy cold, as also the hands, with coldness of the rest of the body ; hopeless discouragement and anxiety with dread of suffocation, is visible in his look, half stupefied and insensible, he moans or cries in a hollow, hoarse tone of voice, without making any distinct complaints, except when asked ; burning in the stomach and gullet and cramp pain in the calves and other muscles ; on touching the precordial region, he cries out ; he has no thirst, no sickness, no vomiting or purging.

In the first stage Camphor gives rapid relief, but the patient’s friends must themselves employ it, as this stage soon ends either in death or in the second stage, which is more difficult to be cured and not with Camphor. In the first stage accordingly the patient must get as often as possible ( at least every five minutes ) a drop of spirit of Camphor (made with one ounce of camphor to twelve of alcohol) on a lump of sugar or in a spoonful of water. Some spirit of Camphor must be taken in the hollow of the hand and rubbed into the skin of the arms, legs and chest of the patient ; he may also get a clyster of half pint of warm water, mingled with two full teaspoonfuls of Camphor, and from time to time some Camphor may be allowed to

evaporate on a hot iron, so that if the mouth be closed by trismus, and he can swallow nothing, he may draw in enough of Camphor vapour with his breath.

The quicker all this is done at the first onset of the disease, the more rapidly and certainly will the patient recover; often in a couple of hours warmth, consciousness, rest and sleep return and he is saved.

If this period of the commencement of the disease so favorable to recovery and speedy cure by the above indicated employment of Camphor, has been neglected, then things look worse; then Camphor is no longer serviceable. There are moreover cases of cholera, specially in northern regions where this first stage, with its tonic spasmodic character, is hardly observable, and the disease passes instantly into the second stage of clonic spasmodic character; frequent evacuation of watery fluid, mixed with whitish, yellowish or reddish flakes and along with insatiable thirst, and loud rumbling in the belly, violent vomiting of large quantities of the same fluid, with increased agitation, groaning and yawning, icy coldness of the whole body, even of the tongue, and marbled blue appearance of the arms, hands and face, with fixed sunken eyes, diminution of all the senses, slow pulse, exceedingly painful cramps in the calves, and spasms of the limbs. In such cases the administration of a drop of Camphor spirit every five minutes must only be continued so long as *decided* benefit is observable (which with a remedy of such rapid action as Camphor manifests itself within a quarter of an hour). If in such cases decided benefit is not soon perceived, then no time must be lost in administering the remedy for the second stage.

The patient is to get one or two globules of the finest preparation of *copper* (prepared fine metallic copper in the mode described in the second part of my work on chronic

diseases ) ; thus Cuprum ʒ,ʒʒ moistened with water and introduced into his mouth every hour or every half an hour, until the vomiting and purging diminish and warmth and rest are restored. But nothing else at all must be given beside ; no other medicine, no herb tea, no baths, no blisters, no fumigation, no venesection, &c. ; otherwise the remedy will be of no avail. Similar good effects result from the administration of as small a portion of white hellebore (*Veratrum Album* ʒ,ʒʒ), but the preparation of copper is much to be preferred, and is more serviceable, and sometimes a single dose is sufficient, which is allowed to act without a second being given, as long as the patient's state goes on improving.

The wishes of the patient are to be indulged in only in moderation. Sometimes when aid is delayed many hours or other and improper remedies have been administered, the patient falls into a sort of typhoid state with delirium. In this case, *Bryonia* ʒʒ alternately with *Rhustox* ʒʒ proves of eminent service."

Here are some of the leading symptoms of the drug :—

Cholera morbus or Asiatic cholera, with cramps in abdomen and calves of legs.

Cramps in the extremities ; palms, soles, calves with great weariness of limbs.

Clonic spasm in the fingers and toes. Spasms and cramps ; constant protrusion and retraction of the tongue ( *Lach.* )

When drinking the fluid descends with a gurgling sound

(Ars., Thuja). Compare Ars. and Veratrum in cholera and cholera morbus; Ipecac the vegetable analogue.—  
H. C. Allen.

The stools are watery and frequent. There is generally great restlessness with tossing about and constant uneasiness. The eyes are sunken with blue rings around them. Excessive thirst; tip of the tongue is cold.

Deathly nausea; violent vomiting, with violent colic and cramps. Violent pains in stomach.

Deathly spasm and constriction beneath the sternum. Violent spasms with piercing screams. Spasms of the throat preventing speech. Dyspnoea so intense that he cannot bear a handkerchief before the face.

Urine scanty and suppressed. Soft, slow pulse, weak and small. Intense coldness and blueness of the surface with cold sweat. The violent cramps and spasms of Cuprum will distinguish it from Camphor, Verat, and Arg. Nitr. These cramps particularly affect the flexors, the muscles often drawing up into visible knots.—J. B. Bell.

Cuprum as we all notice from the symptoms, is a great spasmodic remedy. In craps it is perhaps the best remedy. These cramps may be localized or general. The more violent the cramps, the more difficult is the case and the more easily and promptly will it yield to Cuprum if timely administered. We have used this remedy most extensively and have derived admirable results. I echo Hahnemann's opinion even to-day, as I have always found Cuprum yielding better results

than Veratrum. Now there are different preparations of Cuprum that we have used and to some of which we are peculiarly partial, because they have yielded most excellent results in the hands of myself, my father Dr. P. C. Majumdar and my late grandfather Dr. Behari Lal Bhaduri.

Cuprum Arsenicosum stands at the head of the list. Its action is most prompt and it has been the saviour of many a life in my hands. The late Dr. E. M. Hale first introduced this remedy.

It received quite an extensive use in the hands of late Dr. B. L. Bhaduri in cholera.

Dr. Hale records his experience thus :—"I first used in some severe cases of cholera which occurred in 1867 and 1876. These cases were marked by the usual intestinal disorder to which were added severe and painful cramps in the abdomen and extremities. The alternation of Arsenicum and Cuprum did not prove as satisfactory as I expected, but the use of Cupric arsenite in the 6x trituration in water for children, and dry on the tongue in adults generally acted promptly. I can recommend it in cholera infantum, spasmodic and neuralgic pain in the bowels accompanied by screams, and cramps in the fingers and toes attended with great debility and threatened collapse. I have also used it with good effects in chorea dependent on a profound affection of the nervous centres, and presenting the wellknown characteristic symptoms of Cuprum united to the dyscresia which always indicates Arsenic.



Cuprum aceticum and Cuprum sulphuricum are some of the other remedies that have been used with good results in this disease. Cuprum aceticum has been spoken of very highly by some of our local physicians. Its symptoms resemble those of Cuprum metallicum very much. Personally I have had no experience with the drug, having never used it in practice.

I have lately used Cuprum sulph in one or two cases with marked benefit. Below is the report of one of them :—

A case of cholera in a woman, 40 years old, in Jugipara. The patient had been purging and vomiting since 10 P. M. the night previous. I saw her at 8-30 A. M. She was having violent cramps in the extremities and abdomen. The pulse almost imperceptible. The body was cold. Generally the patient's condition looked bad. Secale 30, every three hours.

In the afternoon I got the report that she was not better. The vomiting was incessant and the vomited matter was greenish. The cramps were also very severe. Cupr. sulph 30 every two hours.

1—2—09. Saw the patient this morning. She is much better in every way, but she has not passed urine yet. Placebo every three hours.

3—2—09. Got the report that she was all right. Cupr. sulph acted very nicely in this case. Here are a few other Cuprum cases :—

#### I.

Spasmodic choleroïd—On Sunday morning, August 19th,

1849, a merchant, aged 37 years, had a loose evacuation. Without consulting a physician, he took Veratrum. From his medical associations, I had little doubt that it was some low dilution.

At midnight, he was seized with a chill, or paroxysm of shivering, soon attended with cramps in the jaw and wrists. Being alarmed at these symptoms, he sent a carriage for me as soon as possible. The distance was about a mile. In the mean time, he took tincture of Camphor, which on my arrival at a quarter before 2 A. M., was followed by perspiration.

Prescription, Cuprum 30. He was well the same day, Monday 20th. ( B. F. Joslin, M. P., L. L. D. )

## II.

On the 19th of September, 1887, at 10 P. M., I was called in to see a patient who had taken ill with violent vomiting and purging. This was in a native state in Central India where I had gone to attend a rich man. The patient was a telegraph master in charge of the station office. He was very strongly built and was about 35 years old. There was a fair in that village on that day. This gentleman with his wife and a few friends went to visit the fair in the evening. While there, he drank a bottle of lemonade ( I must say here that ærated waters are rare in such out-of-the way places, and if available they are usually of the worst kind and state ). Within a short time of his drinking that bottle of lemonade, he felt a gürling sensation in the abdomen, and

was feeling sick. He actually vomited on the road before he could reach home which was not very far ; on reaching home, he had one profuse watery stool. He had several rice-water stools, and vomited several times ; violent cramps in the different parts of the body, more in the limbs, before I arrived at his place ; at 10 P. M., I found him in a very bad condition, namely he was frequently passing profuse, involuntary rice-water stools, constant retching and at times vomiting ; violent cramps here and there on different parts of the body ; great thirst ; hands and feet were icy-cold ; eyes were sunk, cyanotic countenance, extreme prostration, very feeble—almost imperceptible pulse I had only two remedies with me, Camphor and Veratrum Alb. 6x. I gave him two drops of Camphor in a little sugar of milk. He retained the powder. The first beneficial effect noticed was the diminution of retching and stoppage of vomiting. He passed a copious watery stool before me. After the stool the spasm became very bad, and he was bitterly complaining of cramps. Another dose of the same medicine was given after half an hour of the first. I waited an hour after the second dose and within that period he had neither stool nor vomiting ; in fact he revived a great deal. I left his place a little before midnight. When I left him, his only troublesome and painful symptom was the cramps which made him quite restless. I got a man with me to give him some medicine for troublesome cramps. I sent a few doses of Cuprum met 6x. with instructions that a dose should be given immediately, and be repeated every

hour or so, if the cramps were annoying. The next morning I went to see the patient. To my surprise, I found him so well that I could hardly believe he was the same person that had been ill the night before. His wife told me that she had given him only one powder of the last medicine. The cramps subsided and he slept till 3 A. M., when he had a small semi-fluid stool, for which he received no medicine, in fact after the dose of Cuprum he had no medicine at night. At 8 A. M. he had another stool, and again he complained of a slight tendency to cramps. Another dose of the same medicine was repeated in the morning, and some arrowroot-water was given as diet. He passed no stool during the day ; in the afternoon he passed a small quantity of urine. The next day he felt much better, of course the weakness was very great. However, as he was a strongly built person he soon recovered. ( D. N. ROY. )

**Cyclamen**—This is a remedy which we have never used in cholera, but it has so many symptoms in common with Pulsatilla that we are obliged to incorporate it here. Like Pulsatilla the Cyclamen patient is despondent and listless. He has blue rings round the eyes and the face looks pale.

The stools are yellow and watery and expelled with considerable force. There may be much thirst or no thirst at all, nausea with vomiting of mucus, the pulse is feeble.

Agravation after coffee, aversion to fatty food, desire for lemonade. Like Pulsatilla, Cyclamen will be found useful in diarrhoea of women with menstrual irregularity.

We generally use the lower potency of this drug.

**Digitalis**—The peculiar heart symptoms of this drug generally lead to its use in all disorders. Still it has some very characteristic symptoms in the perversion of the functions of the bowels. Hence its mention here.

The stools are whitish, grey and involuntary, sometimes like coffee grounds.

Violent vomiting of food, of green bile and of mucus.

Feeling of sinking at the stomach, as though one would die of exhaustion, extreme prostration.

Feels as if the heart would stop beating. Extremely weak, irregular pulse.

The peculiar heart symptoms and the gone feeling would call for Digitalis.

We generally use the 6th and the 30th potency.

**Dioscorea**—This remedy though seldom called for in true cholera, has many symptoms in the digestive sphere. It is indicated in persons with feeble digestive powers.

Flatulence after meals or after eating, especially in tea-drinkers.

*Violent twisting colic* occurring in regular paroxysms as if the intestines were grasped and twisted by a powerful hand.

Colic worse from bending double, better by bending backwards.

The stools are yellow, watery or bilious. During stools there is great tenesmus.

We generally use the 30th potency and find this remedy very efficacious in *colic*.

**Dulcamara**—Like Aconite, Dulcamara is called for in cases where the disease is the result of exposure to cold. Careless exposure to cold, or to a change in the weather from warm to cold, frequently causes violent diarrhoea and sometimes cholera-like symptoms appear in these cases. A few doses of Dulcamara at the very outset will cut short the disease altogether. The stools are yellowish, greenish, watery with flocculi ; sometimes bloody and changeable.

Much thirst for cold drinks. Nausea with vomiting of mucus. General prostration.

Patients living or working in damp, cold rooms, getting diarrhoea.

Diarrhoea from taking cold in damp places, or during damp foggy weather—H. C. Allen.

Dulcamara is generally used in the 6th and the 30th potency. Where the disease is caused by dampness, Dulcamara will be found very useful.

**Elaterium**—This is a very good remedy in loose evacuations of the bowels when there is violent colic, attended with chilliness and great prostration. The stools are generally yellow or watery and frothy and there is violent flatulent colic after the diarrhoea.

**Ferrum**—Bell says :—“It must be remembered in cholera and choleric, especially when the slightest attempt at eating, drinking, or moving brings on a stool.”

The stool is watery, slimy, undigested and comes out in a gush. Sometimes it is like rice-water. Watery with mucous shreds like scrapings of the intestines. Extreme paleness of the face.

Red parts become white ; face, lips, tongue and mucous membrane of the mouth.

Regurgitation of food in mouthfuls ( Alum ) without nausea—H. C. Allen.

Vomiting immediately after eating or after midnight, sour, acid. The higher potencies are to be preferred. The 200th and upwards. Ferrum is a very good remedy particularly for anæmic people, but the wholesale use of the drug by allopaths has brought it into disrepute.

Gambogia—Gambogia has a very good record in affections of the bowels. Its indications are clear cut and it gives prompt relief when properly selected.

The stools are thin and watery, at times yellowish, and very offensive, but the leading keynote is the forcible expulsion of the stool. *The stool comes out all at once with a single effort.*

Rumbling and gurgling in the abdomen with relief after stool. The patient feels as if an irritable substance has been removed from the abdomen.

We have generally used the 6th potency but the higher may also be used.

Gelsemium—Diarrhoea brought on by nervousness as from fear or anxiety, has a very good remedy in Gelsemium. If the anticipation of any unusual ordeal, as going to theatre or preparing to meet an engagement brings on diarrhoea, it will be promptly checked by Gelsemium. *Weakness and trembling.*

Fears that unless he is on the move all the time the heart will stop beating (fears it would stop beating if he moved—Digitalis).

The stools are yellow, fecal, green and at times involuntary. The Gelsemium patient is made worse by sudden depressing emotions, fright, grief, bad news, excitement &c. Chilliness and drowsiness are the characteristics of Gelsemium. All potencies from the 12th and 30th upto 200th, have been used and with decided good results.

Graphites—If cholera-like symptoms appear on the sudden

suppression of an eruption, we have a very good friend in Graphites. Like Psorinum, it is an excellent remedy in such conditions.

The stools are brown, fluid, mixed with undigested substances, and of an intolerable odour, at times sour-smelling, and corrosive.

The abdomen is full and hard ; even after eating a little the abdomen becomes distended.

The Graphites patient is generally of a flabby constitution and suffers much from eczematous eruptions.

The higher potencies are to be preferred, beginning from the 200th and going upwards.

**Gratiola**—Gratiola has been an useful remedy in that form of cholera commonly known as diarrhaic cholera. In its symptoms and sphere of usefulness it resembles Croton Tiglium and quite an extensive use was made of the drug by the last generation of practitioners, particularly by Dr. B L. Bhaduri. Yellow watery stools coming out with a gush was his leading characteristic. These were generally cases of diarrhœa which ultimately assumed a choleraic form. The green or yellow stool gradually became colorless.

There is nausea with inclination to vomit.

At times there is violent vomiting with pain in the head.

Much flatulence with cold feeling in the abdomen. Rumbling in the abdomen.

Dr. Bell remarks :—"Gratiola will prove particularly useful in cases of cholera morbus resulting from drinking excessive quantities of water of moderate coolness."

We generally use the 6th potency.

**Helleborus Niger**—In the later stages of cholera I have used Helleborus with marked good effect. In that grave complication uræmia Helleborus frequently plays an important part. Sometime ago a female child was saved from the



very jaws of death by the administration of Helleborus. When I saw the child, the stools and the vomiting had stopped, she was lying in a comatose condition; had passed no urine for three days, was rolling the head from side to side and was screaming out occasionally. Apis had failed to do anything. A few doses of Helleborus seemed to restore animation to a corpse. She passed a copious quantity of urine, the brain symptoms disappeared and she made a beautiful recovery. Such cases make our faith in homeopathic treatment so strong and unshakable.

Here are a few of the characteristics of the drug:—

Weakly, delicate, psoric children, prone to brain affections, when there is impending serous effusion in the brain. (Apis, Bell, Tubercul). Meningitis: acute, cerebro-spinal, tubercular, with exudation; paralysis more or less complete; with *cri encephalique*. Vacant thoughtless staring; eyes wide open; insensible to light; pupils dilated, or alternately contracted and dilated. Soporose sleep with screams, shrieks and starts.

Hydrocephalus, post-scarlatinal or tubercular which develops rapidly. Automatic motion of one arm and one leg.

Convulsions with extreme coldness of the body, except head or occiput which may be hot (Arnica).

Greedily swallows cold water, bites spoon, but remains unconscious.

Chewing motion of the mouth.

*Boring the head into pillow*; rolling from side to side, beating the head with the hands. Constantly picking the lips, clothes or boring into the nose with his fingers (while perfectly conscious. Arum Trif). Diarrhoea, during acute hydrocephalus, dentition; watery, clear, tenacious, colorless mucus; white jelly-like mucus, like frog spawn; involuntary.

—H. C. Allen.

*Suppressed urine*, or urine loaded with coffee ground sediment.

The skin is cold and clammy, the pulse intermittent, death seems imminent.

We have used the 6th and the 30th potency of the drug.

**Hepar Sulphur**—Hepar Sulphur is seldom called for in true cholera but there are times when we may be called upon to administer Hepar Sulphur and that very appropriately too. I remember of one case where all the indicated remedies gave partial relief, until finally the patient broke out with a very bad sore in the mouth which ultimately led me to enquire if the patient had received mercury in any shape, and sure enough, my predecessors, the allopaths had administered the drug in quite substantial doses. Hepar Sulphur is a beautiful antidote to the effects of mercury. When cases come to us from allopathic treatment we should always enquire about the drugs employed. Mercury is very freely and extensively used, so it seems to me.

The susceptibility to cold, with desire to be covered even in a warm room and over-sensitiveness to pain are characteristics.

Diarrhœa : of children with sour smell (Calc, Magn. carb, child and stool have sour smell—Rheum)—H. C. Allen.

The Hepar patient feels better in wet damp weather (Causticum, Nux v., Rev. of Nat Sulph.)

Generally used in the higher potencies, e. g. 30th, 200th and higher.

**Hippomane Mancinella**—Though seldom used in cholera, it has some valuable symptoms that deserve to be mentioned here.

Violent vomiting of injesta ; bitter, watery, green ; of a bitter watery substance, on which floats pieces like white, hardened fat. Tympanitis, drowsiness. The stools are dark,

fecal, afterwards watery ; fetid. We have used the 3x and the 6th potency.

**Hyoscyamus**—In diseases with complications of the brain, this remedy stands between Bell and Stramonium. In delirium, in convulsions, in hallucinations, and in fact in all kinds of derangements of the functions of the brain Hyoscyamus occupies a prominent place.

Below are given some of the leading characteristics :—

Convulsions : of children, from fright or irritation of intestinal worms (Cina).

Diseases with increased cerebral activity. Delirium, with restlessness, jumps out of bed, tries to escape ; makes irrelevant answers, thinks he is in the wrong place.

Spasms without consciousness, very restless, every muscle in the body twitches (with consciousness Nux v).

Suspicious, is afraid of everything, fears being alone.

Lascivious mania, kicks the clothes off, inclined to expose the genitals. Lies naked in bed and is incoherently delirious. All diseases have a tendency to assume the typhoid condition. The stools are yellow, watery, at times involuntary.

Urine scanty or retained. Sleeplessness from nervous irritation, subsultus tendinum. We use the 30th or the 200th. The highers seem to act better.

Here is a case :—

A lady about thirty belonging to a very rich family, thin, emaciated-looking but otherwise healthy, came under my treatment for an attack of cholera on the 6th April 1908.

Pulse very thin, great restlessness, very great cramps in the extremities, considerable thirst. Purging and vomiting of rice-water stools continued but less in quantity. No pain in abdomen. Cuprum met. 30 every 3 hours.

She was much better the next day ; cramps almost disappeared and thirst reduced. Placebo one dose every 6 hours.

The patient was almost all right in the morning. In the afternoon I heard that she had bearing down pain in abdomen. I also learned then that she was pregnant three months at that time. Pain increased in severity and abortion took place in the evening. The hemorrhage was not very copious. Next morning pulse though thready was feverish and she was delirious. Bryonia 30th three doses had very little effect. At night delirium increased and Hyoscyamus 200, one dose, was given.

Hyoscyamus acted like a charm and there was no delirium the next day and the patient was conscious but in the evening slight fever, restlessness and much thirst; Rhust. 200, one dose. On the 12th April, the patient was free from all complaints except that she was very weak, so much so that she could not raise her hands and move on her side. There was slight sleepiness and apathetic condition. Phos. acid 30, two doses.

Better in every respect, placebo. On the 15th April I saw her last and she was in a convalescent state. Very slow recovery took place.

*Ignatia*.—*Ignatia* will seldom be called for in true cholera, but if the disease is brought on by grief as from the death of a dear relative, we may use this remedy with advantage.

A sighing respiration with a desire to take a deep breath is a characteristic.

The stools are not very characteristic but there is rumbling in the abdomen.

The 30th is generally used.

*Ipecacuanha*.—This drug is very frequently used in cholera, particularly in cases where nausea and vomiting predominate.

In cholera infantum it plays a very important part and is very frequently followed by *Arsenicum*. It is invaluable in all diseases with constant and continual nausea.

Some of its leading characteristics are :—Nausea, vomiting of mucus without relief.

Stomach feels relaxed, as if hanging down with violent colic.

Flatulent, cutting colic about the umbilicus.

Hemorrhage from all the orifices of the body. Oppressed breathing during hemorrhage. Violent dyspnea with wheezing and anxiety about the abdomen.

The stools are green as grass, sometimes bloody, putrid and frequent.

The face looks pale and there are blue margins about the eyes. The pupils are dilated. There is cold sweat on the forehead. Nausea and vomiting. Ipecac is complimentary to Cuprum and is followed well by Arsenicum, two remedies that are so pre-eminently useful in cholera.

Ipecac is generally used in the 30th potency. The higher may also be used with advantage.

Iris Versicolor—Iris, like Ipecac, is one of our sheet-anchors in cases where the vomiting predominates, particularly if the vomited matter is sour and irritating. In these cases the patient seems to be greatly exhausted from the very beginning. Bell says—"It will be found applicable mostly to cholera morbus, occurring in the hottest season. It is said to have been used successfully in cholera, with icy cold tongue, and general coldness of the surface."

In cases where the tongue appears to be cold and discolored the prognosis is generally very grave.

The stools are watery, bloody, frequent, profuse, corrosive, fetid and at times mixed with mucus.

There is marked tenesmus with prolapse of the rectum at times.

Nausea and vomiting *with burning from the mouth to the rectum*. Violent efforts to vomit with cramps.

We have used Iris in the 6th and the 30th potency.

Here is a case where I used *Iris* to allay the distressing vomiting :—

A young lady was attacked with the disease while attending a cholera patient. She was already much reduced in health having lately undergone a very serious operation.

I saw her in the morning and found her having frequent yellow stools with griping pains. She also vomited several times. She was of a melancholic disposition and had indulged in sweets and pastry the night previous. *Pulsat* 30 every 3 hours.

I visited her again at 3 P. M. and found the whole household in great commotion. Although the purging and vomiting were somewhat better, she suddenly had a sort of hysterical attack which frightened every body very much.

I had left another physician in attendance whose timely administration of a dose of *Nux moschata* 30 had very good effect. Now the patient came out of the attack very nicely but strange to say her power of speech was completely gone. The husband of the patient was very much alarmed. I assured him that it was only due to weakness and would be all right soon.

Placebo continued. I saw the patient again at night and found her in about the same condition, only the vomiting had been somewhat distressing and constant. *Iris Vers* 30 two doses during the night.

The next morning I saw the patient early. The vomiting was gone, but she had slight fever and she complained of headache. Her pulse was excited and a new complication had arisen. The menstrual flow had made its appearance. This is a very distressing complication and I dreaded it very much.

*Bellad.* 30 every 3 hours during the day. I saw the patient in the evening again and found her somewhat better. The

fever was less and she felt more easy generally. The flow continued. I gave a dose of Lil. Tig. 30 and two doses of Pulsat on the following days and she was all right in four or five days.

*Jaborandi*—This remedy may be used in cases where *Croton Tig.* fails. We have not much experience with the drug.

*Jalape*—*Jalape* is useful in diarrhoea of children with colic. It has one symptom like *Psorinum*, the child is good all day and cries all night.

*Jatropha*—The yellow watery diarrhoea that is frequently met with at the beginning of cholera is very quickly checked by *Jatropha*. It has nearly all the symptoms of cholera but it is seldom called for in the later stages of the disease.

Hering says that *Jatropha* should be preferred to *Veratrum* in the treatment of this disease.

It has cramps in the extremities with general coldness of the body. Clammy perspiration is also noticed at times. There is violent rumbling noise in the abdomen.

It has been used in the 6th potency.

*Kali Carbonicum*—This remedy is generally used in chronic diseases, but there are a few important symptoms that are worth narrating here.

Stomach excessively distended and sensitive, feels as if it would burst. Every thing the patient eats seems to be converted into gas.

Difficulty of breathing from 2-4 A. M. The heart seems to be weak, as if suspended by a thread. I know nothing characteristic about the stools of this drug.

The higher potencies are to be preferred. I have used the 30 and 200.

*Kalmia Latifolia*—In sudden heart pangs sometimes *Kalmia* may be used with great advantage. In cholera the

heart becomes so irregular that we need to have all our remedies in this sphere quite at hand.

**Kreosotum**—Kreosote is a very useful remedy in malignant affections. It matters little what the disease is, the characteristics of Kreosotum are clear cut and unmistakable. *All the discharges are corrosive and ichorus*, they are also foetid. Vitality is generally greatly depressed.

Vomiting, of pregnancy, sweetish water, with ptyalism, of cholera, during painful dentition ; incessant with cadaverous stools, in malignant affections of the stomach.

Smarting and burning during and after micturition ( Sulph ). The stools are greenish, watery, foetid and cadaverous smelling. Excoriating.

Intense thirst with greedy drinking. Continuous vomiting and straining to vomit. Belching and hiccough, griping about the navel.

Abdomen distended. Very restless. Quick, scarcely perceptible pulse. Arsenic follows Kreosote well, but Carbo veg and Kreosote are inimical.

The 30th is generally used, but the highers may also be used with advantage.

**Lachesis**—This remedy will seldom be called for in cholera but may sometimes be used with great advantage in the later stages of the disease. We would do well to remember Nash's symptom in typhoid. Where well selected remedies fail to create an impression, think of Lachesis (like Sulph). Its modalities are very characteristic. Left side principally affected ; diseases begin on the left and go to the right.

Great sensitiveness to touch. Intolerance of anything tight around the waist or neck. Extremes of heat and cold cause great debility.

All symptoms are worse after sleep. As soon as he falls asleep the breathing stops.



Great physical and mental exhaustion, trembling of the whole body, sinks down from weakness. Sensation of a ball in the inner parts.

The patient is unable to protrude the tongue. It catches on the teeth and cannot be put out. Intolerance of the slightest pressure in the left iliac region. Langour, Debility.

The urine becomes frothy.

The stools are watery, chocolate colored, consisting of decomposed blood, bloody water, corrosive, offensive smelling.

At times there is great thirst and much distress after sleep. The higher potencies are to be preferred. I generally use the 30th and the 200th.

Laurocerasus—Like Carbo veg this remedy is called for in the later stages of the disease when all the other remedies fail and vitality seems to be at a low ebb.

Bell very truly remarks :—"The symptoms of Laurocerasus remind us at once of a most severe and fatal form of cholera infantum. The rattling of drink as it rolls down the œsophagus is the most characteristic symptom and one of evil omen. In these cases, the other symptoms corresponding, this remedy will save many otherwise fatal cases. The same remark applies also to cholera and cholera morbus."

The stools are involuntary, watery or green.

The appearance becomes sunken, Hippocratic, there is great thirst and the pupils become dilated. Pulse becomes slow and imperceptible. *Whatever the patient drinks rolls down the œsophagus with a gurgling noise.*

Absence of vomiting and stools in cholera. The body becomes cold, the pulse slow, irregular, or imperceptible. Breathing slow, feeble and rattling ( Ant. tart ). The heart's action becomes irregular and there is great dyspnœa. Respiration becomes slow, almost gasping and the urine entirely

suppressed. In fact a typical picture of the last stage of the disease obtains.

Generally used in the 6th and the 30th potency.

**Lycopodium**—Lycopodium, though generally indicated in constipated persons, will at times be very useful in cases of cholera resulting in old dyspeptics who suffer from diarrhœa due to acidity. We frequently come across this condition in women at the climacteric, who have been subject to acidity and dyspepsia all their lives. It is also a useful remedy in cholera infantum with brain complications.

Some of its modalities are very characteristic.

All complaints feel worse from 4 to 8 p. m.

Children look weak and emaciated. Babies cry all day and sleep all night ( Rev of Jalapa, Psorin ). The patient is generally very greedy and avaricious.

Everything tastes sour, eructations, heartburn, water-brash &c.

The stools are thin, brown or yellow, green, offensive, and painless. The gastric symptoms are also very peculiar. A few mouthfuls seem to fill him up, cause great distention of the abdomen, but with Lycopodium the distention is in the lower abdomen, whereas with Carbo veg. it is generally in the upper abdomen.

Nausea in the morning.

Loud rumbling of flatus in abdomen. Urine suppressed, or there is a red sandy deposit in the urine.

The feet are cold, or *one foot hot and the other cold*.

Lycopodium is a deep seated, long acting remedy, and should rarely be repeated after improvement begins.—H. C. Allen.

**Magnesia Carbonica**—The stools of Magnesia Carb are not generally of a choleraic nature, but the pain and colic will sometimes necessitate the use of the drug. When no

remedy will relieve the pain, Magnesia Carb will. The pains are lightning-like, worse on the left side, insupportable during repose, must get up and walk ( Rhus. )

The stools are preceded by cutting, doubling up colic. They are green, frothy, like the scum of a frog pond. White masses like tallow are found floating in them. Profuse, sour smelling, undigested. Sour smell of the whole body ( like Hepar s. and Rheum ). I have generally used the 30th potency.

Magnesia Muriatica—This remedy will frequently be found useful in cholera infantum. Children, during dentition, are unable to digest milk ; it causes pain in the stomach, and passes undigested ; puny rachitic children who crave sweets ( Arg. nitr. ). These cases generally develop hydrocephalus if not checked at the beginning. The head sweats profusely.

Rising of a white frothy substance in the mouth constantly.

Eructations taste like rotten eggs.

Magnesia muriatica we have generally used in the 30th potency.

Medorrhinum—Properly speaking this antisycotic has no place here. But Dr. Allen's exhaustive symptomatology gives us a few valuable symptoms by which it seems to me that when Carbo veg. and Cuprum fail in very desperate cases, Medorrhinum might sometimes be used with good results.

Here are a few of the characteristics :—Trembling all over, ( subjective ) intense nervousness and profound exhaustion.

State of collapse, wants to be fanned constantly ( Carbo veg. ), craves fresh air ; skin cold, yet throws off the covers ( Camph, Secale ) ; cold, and bathed with cold perspiration ( Verat alb. )

Anticipates death ; always anticipating, feels matters most sensitively before they occur and generally correctly.

Anxious, nervous, extremely sensitive ; starts at the least sound.

• Many symptoms are worse when thinking of them. Pains return as soon as he thinks about them ( Oxal Acid. )

Headache and diarrhœa from jarring of cars.

Ravenous hunger immediately after eating. (Cina, Hyosium., Psorin. )

In cholera sometimes patients complain of hunger which is frequently due to a burning sensation in the stomach and the intestines ( Sulph. )

Constant thirst, even dreams she is drinking.

The stools of medorrhinum are not characteristic.

The nosodes should always be used in the higher potencies. I have used the 200th and the c.m.

Mercurius Corrosivus—Of late I have heard of Mercurius Corrosivus having been used in cholera, but with what measure of success I do not know. I have not seen any regular report of cases treated with this drug.

Its symptomatology is very imperfect, there being no regular provings except those from poisoning cases.

The intense tenesmus which is more characteristic of dysentery than diarrhœa being the sole guide. The vesical tenesmus is equally well marked. There is great burning with the tenesmus and urine passes scanty, hot, and bloody. Sometimes the urine is suppressed altogether.

The stools are hot, scanty, bloody, and slimy ; offensive with colicky pains.

Mercurius Solubilis—This is the great soluble Mercury of Hahnemann and nearly all the symptoms of Mercury are from the provings of this drug. Profuse sweating is one of the leading symptoms of Mercury. There is great weakness

with trembling from the least exertion. Intense thirst although the mouth is moist ( *Rev Pulsatilla.* )

*Mercury is worse* by the heat of, but better by rest in bed.

*Arsenic is better* by the heat of, but worse by rest in bed.

The stools are green and frothy, watery and colorless, undigested, frequent, hot and gushing. Sometimes watery with greenish scum floating over it.

Nausea. Vomiting of bile, of bitter mucus. Pinching colic.

Violent urging, a never-get-done feeling.

The face looks pale, earthy and yellow. Great thirst, particular for cold drinks.

Mercury and Silicea do not follow each other well.

Mercurius may be used in any potency beginning with the 6th and going up to the c.m.

**Muriatic Acid**—This remedy will be called for in the later stages of the disease particularly when typhoid symptoms supervene.

Diseases of an asthenic type, with moaning, unconsciousness and forgetfulness.

Great debility, the lower jaw hanging down, the patient glides down in bed, it is difficult to keep his head on the pillow.

The stools are involuntary, while urinating or passing wind. Cannot urinate without the bowels being moved at the same time.

The stools are watery, bloody and slimy. Profuse.

The face looks pale and sunken; sometimes flushing suddenly. The breath is foul. There is nausea and vomiting.

The pulse slow and weak, sometimes intermittent.

In typhoid or typhus with deep stupid sleep. The 30th and the higher potencies are generally used.

**Natrum Carb**—This is a very useful remedy for the diarrhœa of dyspeptics. It may be called for in choleraic diarrhœa, particularly when it happens in dyspeptic subjects. Aggravation from milk is one of the leading characteristics of the drug. The stools are generally watery, yellow, and may at times be mixed with blood. Like Sulphur it has the peculiar empty gone feeling at 10 or 11 A. M. Bell says it will rarely be called for in diarrhœa, but it may sometimes be useful, if there is the characteristic aggravation from milk.

**Natrum Sulph**—It is the great hydrogenoid of Grauvogl and has been used with advantage in various complaints of the alimentary tracts, but we find it more useful in chronic ailments. Flatulence is one of the guiding key-notes of the remedy. The stools are thin, yellow, and at times gushing. It may also be involuntary. It is made worse in the morning after moving about. During stool there is profuse emission of flatus and the pain and discomfort are relieved after stool.

The aggravation in the morning and the flatulent symptoms are characteristic.

Natrum Sulph is used in the 30th and the 200th potencies. The higher may also be used with advantage.

**Nicotinum**—I was led to use this remedy by my learned colleague Dr. D. N. Ray. He used this remedy with marked good effect in a case where Tabacum failed. I do not know whether this remedy has any symptoms from provings, but I will narrate some of the symptoms as related by Dr. Ray :—

“The alkaloid of Tabacum is largely used in medicine. The difference between Nicotine and Tabacum is, the symptoms of the former are much milder than those of the latter ; for instance in a case of constant violent nausea, icy coldness of the extremities, rapid collapse, I would administer

Tabacum. But if the symptoms were milder, I would prefer Nicotine. I can assure you this kind of use of Nicotine has proved quite a success in my hands."

*Symptoms* :—Vertigo, stupefaction, dilated pupils, dryness of the throat, no appetite, no thirst, eructations with vomiting, nausea with inclination to vomit, vomiting relieves, no stool, no urine, occasional hiccough, pale face, pulse and respiration very irregular, cold sweat on the forehead, great exhaustion, icy coldness of the extremities. Dr. Ray recommends the 6x and the 12x potency.

Here is a case to the point :—

One young lady, aged about 16 or 17, mother of two children, residing at Chytun Sen's Lane, was taken ill with vomiting and copious watery stools on the morning of the 12th January, 1904. She was given a few doses of homeopathic medicines by a physician of his neighbourhood. But as the relations of the patient were not satisfied with the progress she was making, they changed the treatment to allopathy, and she had enough of medicines both internally and hypodermically till the 14th January, when her condition became almost hopeless. She was again given homeopathic medicine ; I was called to see the case in consultation with another physician ; when I saw her at 10 A. M., on the third day of her illness, she was in a state of complete collapse, —pulseless, coldness of the extremities, sunken eyes, pinched face, blueness of the extremities, purging less frequent, as she had passed the last stool at 3 A. M. and none since. The most distressing symptom was the violent continuation of retching, and at times vomiting of blue substances, hiccough now and then, some four or five at a time, no secretion of urine since 3 P. M. of the day she got ill. She could answer my questions only in a feeble voice ; her eyes red and lower part of conjunctiva looked ulcerated. As a dose of

stimulant ether mixture and hypodermic injection of ether were given at 7 A. M., just 3 hours before my arrival at the patient's place, I did not give Nicotin which was the best simillimum to my mind for her. I gave her a dose of Nux. v. 30 and asked the attending physician to watch its effect for an hour or two and if no changes took place to give her Nicotin 6 which I left in a phial with him. The doctor waited for a couple of hours as was directed, and having found no change in the patient's condition for the better, he administered for the first time a dose of Nicotin 6 at noon. Within a short time there was less retching and the medicine was continued every 3 hours. In the evening I came to see the patient, and did not find any great improvement in her condition except that there were no more retching and vomiting, and the feeble pulse was felt at the wrist. But on the other hand she became slightly drowsy at times, moaning and groaning when stirred. I advised to give her a few doses of Apis Mel. 6x during the night, and in case she should show any tendency to violent delirium, I left Bell. 30 for her with the physician. It so happened that the patient became very violent and the attending physician had to give two doses of Belladonna 30 to quiet her. On the morning of the 15th January her principal complaint was soreness all over the body, in fact she was afraid of being touched anywhere in her body. She was very drowsy, but the slightest touch in any part of her body caused her to scream. No stool, no urine, with difficulty she could open her eyes, which were congested and slightly ulcerated. I gave only one dose of Arnica 30, and asked the attending physician to watch her carefully and if no improvement was perceptible within three hours, to give her Opium 6 every 2 or 3 hours. In the evening she became quite senseless and did not recognise her own mother and other attendants. There was a tendency to violence



again. She wanted to get out of bed and run away, and was moaning and groaning with drowsiness. She was given *Agaricus Musc.* 6x, during the night, and under its administration she became quiet but there was no sign of consciousness. She passed an involuntary stool containing somewhat fresh matter at night. On the morning of the 16th when I visited I noticed complete unconsciousness and there were many symptoms of uræmia. I gave *Decoc. Apocynum* two drops for a dose every 2 hours. After two doses of the medicine she passed large quantities of urine at noon (after nearly 8 hours). But the passage of urine did not alter her condition in the least. The unconsciousness continued, and the same medicine was also continued at 4 hours' interval. She had two doses more of it by ten at night and then all medicine was stopped. In the morning of the 17th, the report was that she passed two or three stools at night and also passed urine twice. The condition of the patient remained unchanged. She was still unconscious and drowsy. I gave her *Acid phosphoric* 6. She had two doses but still there was no improvement in her condition. *Cina* 30 was given and she passed two stools during the day and a round worm of considerable size with one of the two stools. No medicine was given at night. When I visited her on the morning of the 18th January, the report was that she passed 4 stools (æcal matter) and passed urine 6 times, copious in quantity each time. She was still unconscious and did not answer questions and was so irritable that slightest touch on any part of her body would make her cry, moan and groan. She would not ordinarily open her eyes, but when she did, the look was perfectly indifferent and vacant. I gave her a dose of *Sulphur* 30 and then left instruction to continue *Apis Mel.* every 2 or 3 hours if there was no improvement. Next day when I came to see her, the report of the previous

day was satisfactory, i. e., she gained consciousness in the previous evening after a dose of Sulphur 30 and some 3 doses of Apis Mel. She had two stools and passed urine several times at night. She was perfectly unconscious this morning. I gave her few doses of Sac lac. She had no medicine the whole day and night. On the 20th of January a kind of measly eruption was visible over her body and face, and by the evening these rashes became quite prominent and the temperature rose to 104° F. The patient again became very restless. Two doses of Rhustox 30 were given during the night and fortunately the fever left her the next morning and those eruptions mostly disappeared. She had two doses of the same medicine again the next day (21st.) There was no accession of the fever, the eruptions disappeared and she made a rapid recovery—D. N. Ray.

**Nitric Acid**—Like Hepar sulphur, it is one of our principal remedies to antedote the effects of syphilis and mercury. It is found especially suitable to certain forms of diarrhoea from which infants suffer very frequently. But the constitutional symptoms of Nitric Acid should be studied carefully.

Excessive physical irritability is characteristic of the drug. The pains are excruciating, of a sticking, pricking character as from splinters.

Ulcers bleed easily and have irregular edges with the characteristic pains. Urine is like horse's urine. It is generally scanty, high-coloured and strong-smelling, and the patient feels cold when it passes. The stools are scanty and passed with great straining. Yellowish white, green, mucous and offensive.

There is nausea and colic. Great exhaustion, nightsweat, debility, intermittent pulse &c. are some of the symptoms. It resembles Arsenic in the morbid fear of cholera. We have generally used the 30th potency of the drug.

**Nuphar Luteum**—This is not a remedy with a very wide range of action but it has some marked symptoms. The yellow watery diarrhoea with the feeling of weakness following the motion is characteristic of the drug. In cholera this is a marked symptom. Very frequently a single stool exhausts the patient completely. He is unable to move. In these cases if Nuphar is administered timely, a calamity might be averted.

The stools are yellow, watery and painless.

The face looks pale and the eyes discoloured.

Sensation of weakness and loss of power in the limbs.

General exhaustion.

We have generally used it in the 6th potency.

**Nux Moschata**—I have used this remedy with excellent results in several cases of cholera. There is one case already narrated, under *Calcarea ars*. The drowsiness, the marked tympanitis and the characteristic tongue have led me to use this drug in cholera with very good effect.

All the ailments of *Nux moschata* are accompanied by drowsiness and sleepiness. In fact it occupies a place midway between *Ant. Tart* and *Opium* in this respect. Stupor and insensibility, unconquerable sleep.

Absence of mind, cannot think, great indifference to every thing.

Vanishing of thoughts while reading, talking or writing. Hysterical mood—sudden change from grave to gay, from lively to severe. Becomes apparently senseless.

Great dryness of the mouth, the tongue adhere to the roof of the mouth.

Abdomen enormously distended. The stools are thin, yellow and undigested, sometimes putrid and very profuse. In summer from cold drinks, white stools (*Colchicum*), Irresistibly drowsy; sleepy, muddled, as if intoxicated, coma, lies silent, immovable, eyes constantly closed (with

sterterous breathing--H. C. Allen.) I generally use the 30th. The 200th and the higher potencies may also be used.

Here is another case :—A young lady was attacked with the disease while attending on her uncle who was suffering from cholera. She was already much reduced in health having lately undergone a very serious operation.

I saw her in the morning and found her having frequent yellow stools with griping pains. She also vomited several times. She was of a melancholic disposition and had indulged in sweets and pastry the night previous. Pulsat. 30 every 3 hours.

I visited her again at 3 P. M. and found the whole household in great commotion. Although the purging and vomiting were somewhat better, she suddenly had a sort of a hysterical attack which frightened every body very much.

I had left another physician in attendance whose timely administration of a dose of *Nux moschata* 30 had very good effect. Now the patient came out of the attack very nicely but strange to say her power of speech was completely gone. The husband of the patient was very much alarmed. I assured him that it was only due to weakness and would be all right soon.

Placebo continued. I saw the patient again at night and found her in about the same condition, only the vomiting had been somewhat distressing and constant. *Iris Vers.* 30 two doses during the night.

The next morning I saw the patient early. She had slight fever and she complained of headache. Her pulse was excited and a bad complication had arisen. The menstrual flow had made its appearance. This is a very distressing complication and I dreaded it very much.

*Bellad.* 30 every 3 hours during the day. I saw the patient in the evening again and found her somewhat better. The

fever was less and she felt more easy generally. The flow continued. I gave a dose of Lil. Tig 30 and two doses of Pulsat on the following days and she was all right in four or five days.

**Nux Vomica**—Of all the remedies that are most frequently called for perhaps Nux vomica stands at the head of the list. But I am afraid we do not always make judicious use of the drug. For like any other drug we should not use it unless called for by the symptoms of the case. It is true we very frequently get cases from the hands of allopaths or kabirajes, but then we should not use Nux unless called for by the totality of the symptoms. And when so selected, it is often sufficient to effect a complete cure without the intercession of any other drug at all. I have cured many a so-called case of cholera, when the patient was suffering from frequent evacuation, with vomiting and violent hiccup &c., when the patient had come to me from allopathic hands and a single dose of Nux vomica 200 had been sufficient. In these cases a great difficulty arises now-a-days. In almost every case where we are called, we find a dear and near neighbour, who styles himself a homeopath, is also attending the patient. Now it is very difficult to explain our procedure to these men. If we tell them that we have given only one dose of medicine and that we are following it up with Placebos, they are taken aback and yet their curiosity is so great that you can not very well refuse to tell them the name of the drug. Here are some of the Nux characteristics :—

Debauchers of a thin, irritable nervous disposition, who suffer from indigestion.

Oversensitive to external impressions ; to noise, odors, light or music.

Bad effects of coffee, tobacco and other stimulants People of a sedentary habit suffering from bowel complaints.

Convulsions with consciousness. Eructations sour, bitter ; nausea and vomiting every morning with depression of spirits ; Nausea, constant after eating, in morning, from smoking ; and feels "If I could only vomit I would be all right." Pressure in stomach. Pyrosis. The stools are thin, brown, bloody, frequent and small. Frequent ineffectual urging. Alternate diarrhœa and constipation. The Nux patient is particularly worse in the morning.

"Nux must not be overlooked in the treatment of diarrhœa because more often used for constipation."—Bell.

Oleander—There is a characteristic of Oleander that is worth mentioning here and that is the patient thinks he will pass wind whereas he passes small quantities of stool. Children frequently suffer from this kind of complaint. With Oleander there is also a great accumulation of flatus. It rolls and rumbles in the bowels.

We have used the 6 potency.

Opium—Opium is the remedy for the two extremes of life. In this country, there is a general impression even to-day, that people should take small quantities of opium when they are beyond forty. It tends to longevity.

Opium is called for in cholera when the patient merges into the typhoid state without voiding any urine.

There is a lack of susceptibility to remedies.

There is a partial or complete insensibility due to paralysis. In delirium constantly talking, eyes wide open, face livid and puffed, deep coma, preceded by stupor.

Spasms in children from fright. Deep sterterous respiration. Digestive organs are inactive. The stools are watery, offensive and involuntary from paralysis of the spincter.

Urine retained not suppressed. Drowsiness or sopor without vomiting or stool. Stupid, comatose sleep with

rattling, snoring breathing and contracted or sluggish pupils. Slow full pulse. Abdomen distended.

In coma Opium occupies the most prominent place.

Opium may be used in any potency from the 30th upwards.

**Petroleum**—Petroleum may be used in loose evacuations of the bowels where the motions are yellow watery and gushing, and more particularly worse by eating cabbage, sour kroust &c. These stools always occur in the day time. There is also one peculiarity about the Petroleum delirium, the patient thinks that there are other people lying in the bed with him, and he addresses himself in the third person. Diarrhœa brought on by the suppression of skin eruptions.

Petroleum is used here in the 30th potency.

**Phosphoric Acid**—Phosphoric Acid is often an invaluable remedy in this malady. It is characterized by a long lasting painless diarrhœa that it is very difficult to check. With it there is at times a frequent and profuse flow of urine-like water.

The stools are whitish, watery, undigested, painless and involuntary. Indifference and apathy are marked throughout. Abdomen distended. Cramps in the arm, forearm and wrists.

The 30th potency is generally used. The highers may also be used.

**Phosphorus**—It is one of the great burners of our materia medica. There is great burning pain with almost all the maladies. Phosphorus is a very useful remedy in cholera. The stools are characteristic. There is a tendency for movement as soon as anything enters the rectum, profuse pouring away as from a hydrant. The rectum feels wide open. This is not only a sensation but it is often an actual fact. The anus remains wide open. The motions are often involuntary, particularly during cholera time, (which precede cholera—Phos Acid) morning, of old people. -- H. C. Allen.

There is a gone feeling in the stomach and entire abdomen. Longing for cold, juicy, refreshing things. As soon as water gets warm in the stomach, it is vomited up. Nausea from putting hands in warm water

Night sweats. Profuse, pale, watery urine.

\*Only lately I had occasion to use Phosphorus in a case of cholera where nothing seemed to check the vomiting. The patient would want iced water all the time and as soon as it would get warm in the stomach, it would come out again.

Phosphorus should be used in the higher potencies only and should not be repeated very frequently.

Podophylum—This remedy is a favourite in the treatment of cholera. But in homeopathy we should never have any favourite remedy. Each individual case will have to be studied and a remedy selected for every case. Podophylum no doubt contains many important symptoms. Here are a few of them :—Painless cholera morbus ; cholera infantum. Violent cramps in feet, calves, thighs ; watery painless stools—H. C. Allen.

Diarrhœa during the dentition of children, hydrocephalus, rolling the head from side to side.

The stools are watery, yellow, greenish watery, profuse, frequent, gushing, painless, like dirty water soaking the linen through, with yellow meal like sediment in it. The stools are generally worse in the morning and in hot weather.

Bell says—“There is no remedy so surely indicated by painless cholera morbus as Podoph. The stools are profuse and gushing, each seeming to drain the patient dry but soon he is full again. There may also be violent cramps. It would seem to be similar to many cases of cholera.”

Psorinum<sup>d</sup>—This is the principal nosode in our therapeutics and has a very wide range of action as an antipsoric. We have used it with decided good results in various diseases



including cholera. The filthiness of the discharges is one of the leading characteristics. But the selection here must be like that of every other drug, namely on the totality of the symptoms. Allen very truly observes:—"Psorinum should not be given for psora or the psoric constitution, but like every other remedy, upon a strict individualization and the totality of the symptoms and then we realize its wonderful work."

Like sulphur one of its chief indications is when 'well selected remedies fail to relieve or permanently improve.'

The psorinum patient is very susceptible to cold, or to change of weather

Feels unusually well day before the attack.

Body has a filthy smell.

Child is good all day but cries all night.

All discharges have a very filthy odour about them.

The patient feels hungry in the middle of the night.

The stools are watery, dark brown, fœtid, smelling like carrion, frequent and involuntary.

The Psorinum patient feels entirely hopeless during convalescence. Great debility. The skin has a dirty greasy look about it. Psorinum is one of our sheet anchors in cholera infantum and is often very serviceable even in cholera where the alvine discharges are unusually foul.

The 400 is the potency generally used, although I have used both the 30th and the c. m. with very good effect. When I give the 30th, I repeat frequently.

Pulsatilla—As I sit down to write this, I have occasion to use Pulsatilla. Last night we had a big dinner consisting of many rich dishes and from the morning one of the participants, is having many loose motions and feels sickish. It is one of the principal remedies in the initial diarrhœa of cholera, particularly if it has been provoked by rich food such as pastry, cakes, highly spiced meat, and oily things.

The stools are ever changeable, generally worse at night, watery, greenish yellow, as soon as they eat. Offensive and involuntary. The Pulsatilla patient always feels better out of doors, is miserable in the house, and is frequently inclined to weep, is very sad and gloomy. Begins to cry in narrating the symptoms. I had a lady patient, who would always weep when she would tell her symptoms. I was quite alarmed the first time I saw her, but afterwards I found out that she was a typical Pulsatilla patient.

Flatulent colic, painful rumbling in abdomen, difficulty of breathing. The Pulsatilla patient craves fresh air. Diarrhœa is generally worse at night.

Hahnemann says these kinds of nightly diarrhœa are characteristic of Puls, and there is scarcely a drug which occasions them as often.

Silicea is the chronic of Pulsatilla. Any potency may be used.

Pyrogen—In cases of a septic nature Pyrogen acts like magic very often. I had one case where its effect was marvellous. A young lady, just after childbirth, was attacked with violent diarrhœa and vomiting, the discharge was also very profuse. The pulse had become intermittent and she was in a bad way when I saw her. A few doses of Pyrogen acted wonderfully in this case.

Here are a few of the symptoms:—great restlessness, tongue large and flabby, dry and cracked, articulation difficult (Crotal, Terb).

Vomiting, persistent, brownish, coffee ground, offensive, stercoraceous, with impacted or obstructed bowels.

Stools, horribly offensive, brown or black, painless, involuntary, uncertain when passing flatus (Aloes, Oleander). Pulse abnormally rapid, out of all proportion to temperature. The patient looks pale, cold, of an ashy hue (Secale).

There is at times marked chill with unusually high temperature and rapid irregular pulse, and cold and clammy sweat following. Pyrogen should be given high.

**Raphanus**—Raphanus is a very good remedy in diarrhœa. Flatulence is one of the principal symptoms accompanying every trouble where Raphanus is indicated. The intestines protrude like pads all over the abdomen and there is no passage of flatus either way for sometime.

The stools are liquid, undigested, frothy, copious and passing with much spluttering. There is violent thirst, constant nausea, and vomiting. We have used the 6th potency.

**Rheum**—Sour stools is the guiding keynote of Rheum. The evacuations are as sour as sour can be. The body smells sour.

Colic with sour stools. It is complimentary to Magnesia carb in the sour stools. May be given after abuse of Magnesia with or without Rhubarb if the stools are sour.—H. N. Guernsey.

**Rhus toxicodendron**—Dunhams says that Rhustox and Rhus Radicans are very much alike in their symptoms. For the bad effects of getting wet after being overheated there is no remedy like Rhustox. My father Dr. P. C. Majumdar frequently remarks, that people who bathe after having a few motions, thinking that their system is overheated, seldom get well and the only remedy that can do any good in such cases is Rhustox. The Rhus patient is very restless, wants to change position frequently to get relief. He is very sensitive to open air and has great apprehension at night. The Rhus patient is particularly worse at night.

It is an invaluable remedy in cases that are likely to assume a typhoid form.

Stools involuntary, with great exhaustion in the beginning

of typhoid, dark, yellow, watery, bloody, jelly-like mucous, *bloody water, like washings of beef.*

During stool there is nausea, tenesmus and a tearing pain running down the thighs. The tongue of Rhustox is very peculiar. It is dry and rough with a triangular red tip.

The Rhus patient dreams of hard labour, as if he is sawing, swimming, chopping wood &c. Many a cholera patient would be saved from getting into the typhoid state by the timely administration of Rhustox.

We have used all potencies beginning with the 3x and the 6th up to the c. m.

Here is a case I treated only lately :—A young man was attacked with a very bad type of cholera early in the morning about 3 A. M. After he had two motions, he thought his system was overheated and so he went to the river which was close to his shop and had a good bath.

I saw him for the first time at about 2 P. M. He was in the collapse condition. There was no pulse perceptible at the wrist, the extremities were cold, he was very restless, and was having violent cramps. Cup ars. 30 was given every hour. At about 6 P. M. I saw him again and there was hardly any improvement. Moreover he was having cramps in the sides and complained of great pain all over the body. Secale 30 every 2 hours. At 2 A. M. I had the report that the pains were unbearable and he had become very restless and was inclined to be delirious. Rhustox 30 every 2 hours. In the morning he was much better but still complained of the pain. The pulse was perceptible at the wrist.

Rhustox 200 one dose followed by Placebo.

In the afternoon he passed urine and gradually made a complete recovery.

Ricinus—Ricinus has become a very valuable remedy in the treatment of cholera. My late grand-father Dr. Bhaduri

used the remedy with great effect in cases where *Veratrum* failed. Dr. Hale in his new remedies suggested the use of *ricinus* in cases of cholera. Dr. P. C. Majumdar thinks this remedy very useful in diarrhœaic cholera. If a case of diarrhœa gradually turns into cholera and the patient becomes prostrated, *Ricinus* will be used with much good effect. Many authorities hold that castor oil poisoning never develops a picture of cholera, but we cannot agree with this view.

We narrate below a few cases in illustration :—

A. T. Mitra, a school student, was attacked with the disease. He had frequent purging and vomiting. In the evening he was passing many watery motions involuntarily. The eyes were sunken, pulse thready, the body was icy cold, violent cramps, urine suppressed, great thirst and boring in rectum after evacuation. Camphor did him no good. *Ricinus* 6x was administered every hour. After two doses, the motions stopped and he looked better. Although the case took a protracted course and needed *cantharis*, *opium* &c. in the course of treatment, *Ricinus* changed the whole aspect of the case and he made a complete recovery.

Prollhad, aged 35 years, of robust constitution, was attacked with purging and vomiting on the 25th of December 1882. Dr. P. C. Majumdar was called at 6 P.M. and found him quite prostrate. The voice became husky, skin of the fingers and toes shrivelled, eyes sunken, nose pointed and pinched. On inquiring he was told that the man took some indigestible substances a day before. There was still purging and vomiting, the evacuations were serous mixed with flakes of mucus resembling the true cholera digesta. Pulse was scarcely perceptible at the wrist, extremities were cold. The cramps were not very marked, only there were slight contortions of the muscles of the extremities. He prescribed *Ricinus* after every stool. At 9 P.M. he was informed that four doses of the

medicine were taken and the vomiting ceased ; there were four stools, the last one passed about half an hour ago, was a little yellowish ; but in the night, the friends of the patient could not exactly judge the real nature of the stool ; however, it was decidedly less copious and seemed to be thick in consistency. He saw the patient at midnight and found unmistakable improvement. The extremities were still cold, but pulse could be found though very small and thready. He ordered the medicine every three hours. He visited the patient next morning and found him much improved in his condition. He passed one large semi-solid stool in the doctor's presence which consisted of fæcal matter, mixed with some yellow mucus. There was complete anuria before but with his last stool he passed about two ounces of straw-coloured urine. The extremities and surface of the body assumed nearly the normal temperature. I discontinued the medicine and ordered arrowroot in water for diet.

CASE II.—The manager of a wine shop in Amherst Street, a healthy young man, fell ill of cholera. The purging and vomiting of rice-water character were marked, but no collapse. I was told that before my visit three doses of Rubini's Camphor, ten drops each time, had been taken. I found him shivering, with small but frequent pulse, blood-shot eyes, great restlessness and anxiety. There was a slight pain on pressure upon the hypogastric region. The patient had a great fear of death. I at once prescribed Aconite *ix* every two hours. Scarcely four doses of the medicine had been consumed, before I saw the patient again. At my first visit I found him wrapped up in a blanket, but now he has thrown it away. Restlessness was diminished, pulse was still very small and thready, skin was not warm but perspiring, purging and vomiting remained unaffected. I stopped Aconite and gave Ricinus after every evacuation. It was arranged that I should see him once more

before ten o'clock in the night. I went at candlelight with a homeopathic friend of mine. We were surprised to see the patient almost cured. After taking two doses of *Ricinus* the purging and vomiting stopped, and the pulse improved, in volume and frequency. We ordered a little barley water, and stopped all medicine. Next morning he was all right, and I allowed him rice and fish.

CASE III.—A young lady, aged 16, of a robust constitution, was attacked with cholera on the 15th January, 1883. After the first stool I was called to treat her. The husband of the patient was very anxious, in as much as there were two deaths from cholera in the same family, though they were treated homeopathically by some eminent physician. She had a copious stool, which, the husband said, was "purely water." I enquired whether she had any pains in the abdomen or nausea; but was answered in the negative. She had another copious stool in our presence, of ricewatery nature, and some cramps in the extremities, though not very violent. I at once prescribed *Ricinus* 6, in drop doses, after every stool. She took three doses in the night and the husband reported to me next morning that she was much better. There were altogether five stools since I left her, but the last two assumed a distinctly bilious character. I discontinued the medicine and gave her arrowroot in water. In the evening I went to see the lady and was told that she had three scanty stools during the day. I ordered her another dose and she was all right the next morning. Though this was a very simple case, there having been no collapse, still the husband was struck with our treatment.

CASE IV.—Babu Siris Chandra Ghose, aged 22, a student, had an attack of purging and vomiting on the 22nd January, 1883. An Allopathic physician prescribed chalk and opium which did him no good. The stools were exactly choleraic,

there were cramps of the arms and legs, pulse was scarcely perceptible at the wrist, features sunken, voice husky. I prescribed Ricinus 6 after every evacuation and Cuprum met. 12 every hour till the cramps abated. He was much better after taking two doses of Ricinus and two of Cuprum. At midnight I was summoned to see his brother who had an attack of cholera from 10 P. M. I saw him rolling on the bed, very restless from pain in the abdomen. In this case I prescribed Ricinus 6, which did him no signal service. After three hours' trial I changed the medicine, and gave him Veratrum 6. My former patient got permanent relief. These two cases are very instructive. In painful cases Veratrum gains the laurel. But in most painless cases Ricinus truly deserves a high place. Formerly, in these latter kinds of cases we generally used Podophyllum, but not with very satisfactory result. On the contrary, where vomiting was predominant, Ipecac or Iris. vers. gave us some help. Ricinus, I think, will probably supercede them all. Its action is very prompt and permanent. I hope some of our colleagues will give it a fair trial and report the result in some homœopathic periodical.

Robinia—Like Rheum, Robinia is a great acid remedy. It is found useful in vomiting with distention of abdomen. It has been found very efficacious in acid vomiting, so much so that Dr. Ray has used it in cases of acid vomiting in the collapse of cholera.

Constant eructation of a very sour fluid ; vomiting of intensely sour fluid ; frequent vomiting of such sour fluid that the teeth are set on edge ; soreness of the stomach, tongue covered with a white, gray, greenish or bluish thick coat ; pimples on the tongue ; great acidity in the mouth and throat, with continual nausea, desire for spices, tobacco and coffee or strong liquor ; ardent thirst with desire for sour



or spirituous drinks ; nausea with spasms, anxiety and cold sweat ; vomiting with diarrhœa ; stools are black and fetid, or whitish, very frequent, generally involuntary, and accompanied by vomiting with sensation as if the whole body would pass away through the stool ; cramps in the extremities, weakness and extreme prostration ; laboured respiration ; sunken countenance and ashy face ; cold sweat ; pulse weak and imperceptible.

Here is a case :—

A robust youngman of eighteen or nineteen years had been taken ill with copious vomiting and purging since the morning of the 9th May, 1896. For some time no notice was taken of all these. When he became very worse by 8 or 9 A.M., he was given *Iris vers.* ; this did him some good ; in the afternoon a physician was consulted who changed the medicine to *Veratrum alb. 6x*. No sooner was it given, the vomiting and purging commenced with renewed vigour and the patient was brought almost to a state of collapse. I saw him in the evening in complete collapse ; pulse was hardly perceptible at the wrist, cold perspiration on the face and forehead, body and extremities quite cold, voice quite husky, vomiting and purging were continuing at longer intervals. Abdomen retracted, face pinched, eyes sunken, mild cramps here and there. *Veratrum alb. 6x* was tried a few doses more as it was well indicated, but as no improvement followed this, at 11 P. M. it was changed to *Ars. alb 6*, every half an hour ; this also produced no effect and the patient gradually became worse ; coldness of the body increased, cold and clammy perspiration appeared in forehead, deathlike pallor of the face, extreme prostration, almost lifeless, no purging or vomiting for sometime. I prescribed *Carbo veg. 30*, every half an hour, and watched the patient by sitting on his bedside. Soon after he began to complain of respiratory

difficulties. I gave him Acid Hydrocyanic 6x. every fifteen minutes ; he took several doses of it without any avail ; I then changed it to Kali cyan 3x (trit.) at an interval of fifteen minutes ; the condition gradually became so serious that at 2 A. M. I was obliged to tell his guardians that there was very little hope of his recovery ; the respiration was so bad that I was expecting the evil every moment ; at 2-30 A. M. I gave him a dose of Naja tr. 6, and within half an hour there was slight improvement for the better and the whole tide was turned. I continued the same medicine three or four doses more till at day-break his condition was greatly altered. I entertained some hopes of recovery. In the morning he exhibited some symptoms of delirium with redness of the eyes, pulse quite perceptible, body warm again. Agaricus m. 6x was prescribed. Only a few doses were enough to remove all these outward symptoms. By noon he expressed a desire to eat something as he was feeling very weak ; he could hardly talk ; barley was given, but this excited vomiting. The fluid brought up was very sour which set the teeth on edge. Robinia 6x was then prescribed. This at once stopped the vomiting. All medicines were stopped as the patient was looking much better, although he did not pass any urine after nearly forty eight hours. He was kept on pearl barley water the whole of that day. He did not require any more medicine and got well gradually.—D. N. Roy.

**Rumex.**—This is a remedy that is more often used in cough, than in any other trouble. But we have used it with great advantage in very bad cases of diarrhœa.

The stools are profuse, watery and worse in the morning. The diarrhœa of Rumex is very similar to that of Sulphur. We generally use the 30th potency.

**Sabadilla**—This remedy will be called for in the diarrhœa

of children where they are subject to worm affection. It will be found to be very similar to Cina but the character of the stools is different.

The stools are brown and fermented, liquid and bloody, containing worms.

Pain around the navel with burning in the abdomen and the rectum.

Ptyalism, sour rancid eructations. Nausea and desire to vomit,

Abdomen distended with a feeling of discomfort in it.

*Sanicula*.—This remedy will sometimes be found very useful in loose evacuations of the bowels. It has many symptoms like Arsenic and Phosphorus.

Its symptoms sometimes change very constantly like Pulsat.

Nausea and vomiting which is made particularly worse by carriage riding.

Thirst—drinks little and often, is vomited as soon as it reaches the stomach.

Stools:—are changeable in character and color, like scrambled eggs, frothy, green, turn green on standing, after eating must hurry from the table. The odour of stool follows despite washing ( Sulph ) — H. C. Allen.

*Secale Cornutum* — This is one of our sheet anchors in cholera, particularly in cases where the cramps predominate. It occupies quite as important a position as Cuprum and has been equally beneficial in actual practice. If Cuprum fails to relieve the cramps, we should try *Secale*.

This remedy we have used quite extensively and can speak from personal experience with regard to its curative virtues.

Dr. Russel says, "*Secale Cornutum* or ergot of rye is a medicine in which we have great faith in some of the worst varieties of cholera."

The stools are profuse, watery, putrid, brown, very exhausting, painless, involuntary and colorless.

The face looks pale, pinched, ashy, sunken, hippocratic, drawn with sunken eyes and blue rings around the eyes. Collapse in cholera, skin cold, yet cannot bear to be covered.

The skin is cold to the touch, yet the patient cannot tolerate covering. Icy coldness of the extremities.

Pulse small, rapid, contracted and often intermittent.

Similar to Arsenicum, but cold and heat are opposite. Resembles Colchicum in cholera morbus.

In cholera there is great anxiety and fear of death, the features get distorted and the mouth becomes very dry. There is unquenchable thirst. The tongue becomes livid and cold and there is constant nausea.

Vomiting of food, of bile, of offensive watery fluid ; burning in abdomen.

Suppression of urine.

Bell says "Nothing is more characteristic of Secale than the aversion to being covered or to heat. This will often distinguish it from many other remedies that have otherwise similar symptoms, especially from Arsenic which has desire for heat and covering. It may be distinguished from camphor by the violent thirst, and also by paying attention to the fact that the cold spells of the latter remedy often occur at night, passing off in the morning. The choleraic stool is not offensive except perhaps, at first, but that occurring in childbed is so. In cholera morbus it most resembles Colchicum and is followed well by China."

*In Cuprum the spasms and cramps affect the flexors, while in Secale the extensors and the abductors are affected. The features are more fearfully distorted under Secale than under Cuprum. Both Secale and Arsenicum have unquenchable thirst.*

*Secale patient does not like covering while the Arsenic patient wants heat and desires to be covered.*

Dr. Dudgeon in his treatise on Cholera says :—"Secale cornutum is serviceable in cholera, when after the cessation of vomiting, the evacuations persist and continue colorless. Schmid and Fleischmann found it useful where there were severe cramps."

Secale we have used in all potencies, but we generally give the 30th.

Stramonium—This remedy is sometimes called for in the later stages of the disease, where violent typhoid symptoms supervene, particularly where Belladonna and Hyoscyamus fail. The stools are not so characteristic but the brain symptoms are very much so. The stools are black, fluid, putrid and cadaverous smelling.

In delirium the Stramonium patient becomes loquacious, talks all the time, sings, makes verses, raves, and becomes furious.

"The delirium is more furious, the mania more acute, while the congestion, though greater than Hyoscyamus, is much less than Belladonna, never approaching a true inflammation."—H. C. Allen.

The Stramonium patient desires light and company. Awakens frightened.

Hallucinations terrify the patient.

Desires to escape, imagines all sorts of things. Head feels as if scattered about the bed ( Baptisia ).

Eyes wide open, pupils dilated, really a frightful look. Utterly insensible to external objects. The extremities are cold while the face looks flushed and hot.

Sleepy but cannot sleep, convulsions. Vomiting as soon as he raises the head from the pillow ; from a bright light.

It follows Bell, Cuprum, and Hyoscyamus.

The higher potencies of Stramonium seem to have acted better in my hands.

**Sulphur**—Sulphur is our true friend in cases of difficulty. A friend in need is a friend indeed. Oftentimes a single dose of Sulphur 200 has helped me out from great difficulty.

• This antipsoric of Hahnemann has saved many a human life. It is indicated in scrofulous, psoric subjects who suffer from skin affections of various kinds. Standing is the worst position for the Sulphur patient. When well selected remedies fail to relieve or produce a favorable effect, always think of Sulphur. In complaints that are frequently relapsing, patient seems to get almost well when the disease returns again and again.

Burning is a great characteristic of the drug. Burning and heat on top of the head, in the palms of the hands and the soles of the feet. Cramps in the calves and the soles at night. Weak, empty gone feeling in the stomach at 11 A. M.

Stools—driving out of bed early in the morning, watery, green, brown, bloody, white and slimy, undigested and putrid. There is tenesmus with the stools. The rectum and anus feel excoriated. Soreness in abdomen. Nausea and fainting. Nausea and vomiting of water, of sour food, of bitter substance, with cold perspiration on the face.

Dysuria, retention of urine.

"Stupor with pale face, dropping of lower jaw, eyes half open, cold sweat on the face, suppression of urine and frequent twitching of muscles."—C. Hering.

Dr. Hering also recommended Sulphur as a prophylactic against cholera.

The Sulphur patient is very averse to being bathed. The body has a filthy smell despite washing.

Excessive prostration and rapid emaciation are also characteristics of the drug.

We generally use Sulphur either in the 30th or the 200th potency.

**Tabacum**—This remedy is called for generally in the later stages of the disease. Frequent nausea and vomiting with symptoms of uræmia. It has been a very valuable aid in this condition. Here are some of the characteristics ;—  
Vomiting due to cerebral irritation, complete prostration of the entire muscular system, icy coldness of the surface of the body, covered with cold sweat, face pale, blue, pinched, sunken, collapsed, covered with cold sweat.

Nausea incessant, vomiting on least motion, with faintness which is better in open air.

Vomiting—violent, with cold sweat, as soon as he begins to move.

*Terrible faint, sinking feeling at the pit of stomach.* Sense of relaxation of stomach, with nausea (Ipecac, Staph. ). Child wants abdomen to be uncovered, relieves nausea and vomiting ; coldness in abdomen ( Colch, Elaps, Lachesis ).—  
H. C. Allen.

The stools are yellowish, greenish, slimy, watery, sudden, and involuntary, with nausea, vomiting, prostration and cold sweat ( Verat. ) with extreme faintness. Violent palpitations when lying on the left side.

Pulse quick, full, large ; small, intermittent, exceedingly slow ; feeble, irregular, almost imperceptible.

Hands icy cold but the body is warm. Legs icy cold from the knees downwards. Trembling of the limbs.

In the collapse of cholera, there is death-like pallor, coldness, and deathly nausea. Tabacum is also a valuable remedy in cholera infantum.

Dr. Rutherford Russell in his book on cholera says :—  
"The cases for which it would best answer are those attended with much depression, vomiting, eructations, and obstinate

dysuria or suppression of urine, along with pains in the bowels, and cramps, and oppression of the chest." We have verified these symptoms several times in practice. Dr. D. N. Roy and myself treated a case where this remedy was used with marked benefit. In another case with similar symptoms, we tried this remedy without much effect, when Dr. Roy suggested Nicotinum which was given with very good results.

Tabacum should be given in the 30th or higher potencies.

**Terebinthina**—This is a remedy of some importance particularly in cases where urinary complications arise. These are some of the indications :—Colicky pains in the abdomen, dull pain and burning in the renal region, pains extending down the ureters, burning during urination, violent strangury, urine fetid, albuminous, scanty, dark, cloudy and smoky. Hematuria. Spasmodic retention of urine. The urine has the odor of violets.

Prostration with cold, clammy sweat, and thready, almost imperceptible pulse.

The stools are watery, greenish, frequent, and profuse, with burning in anus. The abdomen is distended.

The tongue looks smooth, glossy and red.

**Terebinthina** we have used in the 3rd. and 6th potency.

**Veratrum Album**—This is one of the remedies recommended by Hahnemann for the treatment of cholera and his advice has been amply verified in practice. I do not think there is a country where Homeopathy is known and where *Veratrum* has not been tried in cholera. Its indications are clear-cut and we need make no mistake in prescribing the drug. So long ago as 1849, Dr. B. F. Joslin tried this remedy most extensively in cholera. Dr. Solenbert of Leipzig and Dr. Preu of Nuremberg recommended *Veratrum*, *Ipecac* and *Arsenic* for cholera. Hahnemann himself recommended



Camphor, Cuprum and Veratrum for cholera. Speaking about Veratrum he says,—"Similar good effects result from the administration of one or two globules, every hour or every half an hour, of white hellebore ( Verat. alb. ). These are some of the characteristics of Veratrum Album :—Adapted to diseases with *rapid sinking of the vital forces* ; complete prostration ; collapse.

Cold perspiration on the forehead. Sensation of a lump of ice on the vertex.

Face *pale, blue, collapsed, features sunken, hippocratic* ; red while lying, becomes pale on rising up ( Acon. )

Thirst intense, for very large quantities of cold water, and acid drinks ; wants everything cold.

Icy coldness of face, tip of nose, feet, legs, hands, arms, and many other parts. Cold feeling in abdomen ( Colch., Tabacum. )

Violent vomiting with profuse diarrhœa. "When the stools become exceedingly copious and liquid, Veratrum is in most cases to be used.—B. F. Joslin.

Vomiting excessive with great prostration worse by drinking ( Ars ) ; by least motion ( Tabacum ) with great weakness after ; *cutting pain in abdomen as from knives*.

Cholera : Vomiting and purging ; stools profuse, watery, gushing, prostrating, greenish, watery with flakes, rice water, frequent, bloody and after fright ( Acon ). Violent cramps of the extremities. Wrinkling of the skin of the hands and feet. Skin blue, cold, remaining in folds when pinched. The pulse is very slow, almost or completely lost.

We should not give Veratrum Album in painless cases.

Dr. H. C. Allen recommends it after Camphor in cholera and cholera morbus.

We have used Veratrum alb. in the 12th and the 30th potency.

## SOME PECULIAR FEATURES AND THEIR REMEDIES IN CHOLERA.

We have already written about the etiology, pathology, diagnosis, prognosis and treatment of cholera, but still there are many things that come in the way of a practitioner in such places as Calcutta, where cholera is both endemic and epidemic, that require elucidation. Here are a few of them.

The very young and the very old are seldom attacked with cholera. Children sometimes suffer from cholera infantum, but in such cases the prognosis is not very unfavourable. Women are not as frequently attacked as men, and if attacked they generally have a mild form of the disease. The very robust people are seldom attacked with cholera, but if attacked with the disease, it is generally of the worst type and prognosis very unfavourable.

In those cases in which the onset of the disease is marked by a rise of temperature, be the evacuations as profuse and vomiting as frequent and troublesome, the prognosis is generally favourable and a few doses of Aconite if timely administered are all that are necessary.

A constant fidgity condition, i. e. turning from side to side in a semi-conscious state is a bad symptom and the outcome in such cases is generally very serious. Rhustox, Arnica and Baptisia are good remedies for such a condition.

People of this country are in the habit of taking a good bath and a nice cold drink after they have been moved a few times. This they do thinking that the system has been over-heated. If the evacuations are really choleraic, then contracting a heavy cold by such a procedure is a very grave affair. These cases generally run on to the tyhoid state and in spite of the best of treatment they are attended by most serious results. Rhustox is the only remedy that I

know of, that has been of any avail in such a condition. Then again sometimes in such a case the collapse stage comes on very quickly and it is very difficult to rescue the patient.

While re-action has not set in properly, i. e. the pulse is still imperceptible and the evacuations, vomiting, cramps etc. have not abated, if brain symptoms supervene, then we must know that we have a most difficult case to handle. Agaricus is a remedy that stands in good stead in such a condition.

In Dr. P. C. Majumdar's book on *Cholera*, we find that no medicine is required during the stage of re-action but here I want to say that we must guard the case most carefully at the commencement of this stage, for should the re-action be imperfect i. e. if the circulation is not equally distributed, if the trunk, the head etc. are hot while the limbs are cold and the eyes injected, we must do something promptly or *Coma* will supervene and it will be very difficult to rouse the patient from such a condition. Belladonna is a good remedy for such a condition.

Dr. Salzer in his most excellent work on *Cholera* says that Calc. Ars. ought to be a good remedy in cases that die suddenly of heart failure even when to all appearances the patient seems to be getting well. I wish to corroborate that statement of the venerable doctor and say that I have been able to save two patients from the jaws of death by the timely administration of this remedy.

The urinary secretion is generally stopped in cholera, but we sometimes find cases in which the patients urinate as they are moved, but still they go on from bad to worse.

At times even when the patient is apparently cured, a diarrhoea continues, which is very distressing and difficult to cure. Podophyllum is the remedy in such a condition. If the discharges are excessively offensive then we have a good friend

in Psorinum, but we do well to remember that here in cholera, as well as in all other diseases we should not forget Sulphur when the well selected remedies fail to act.

I have not mentioned about the cardiac symptoms of *Argentum nitricum*. It is at times an invaluable remedy in cholera, where we observe a peculiar neurotic condition of the heart. Raue recommends it in collapse when dyspnœa is excessive, owing to spasms of the respiratory muscles. It comes in very handy just before the Hydrocyanic Acid condition supervenes.

In violent cramps, where *Cuprum*, *Secale* and such other remedies fail, *Aconitum Radix* has been successfully used by my good friend Dr. G. L. Gupta. He finds Hydrocyanic Acid still more valuable, should the heart sympathise.

Dr. P. C. Majumdar has used *Anilinum* in cases where *Arsenic* failed. He also found it useful in tympanitis where *Carbo* seemed indicated but did not act. We find among its symptoms :—gastric disturbances with anorexia, blue lips and discoloration of the skin.

In cases of extreme prostration with typhoid symptoms *Spirit Nitr Dil* may be used with advantage as suggested by Hering.

*Terebinthina* is a remedy that we generally use in the urinary complications of cholera. But it must not be forgotten in the state of purging and vomiting, particularly if there is tympanitis.

We have already mentioned about *Colchicum*. Dr. P. C. Majumdar thinks highly of this remedy. It lies between *Carbo veg.* and *Veratrum*, as regards tympanitis and the mucous shreds with the stool is also another good characteristic.

*Bryonia* though ordinarily a constipated remedy, is at times used with excellent results in cholera, in cases of purging

and vomiting, where the stools are of a bilious character and rather copious. Bryonia, as we know, is aggravated by motion, but in cholera there is a very peculiar listless condition which we sometimes observe and where it is invaluable. The patient is afraid to move but still he does move, from one side to the other, when he appears to be in agony. This is a grave symptom.

In Phosphorus there is a passive oozing from the rectum that is very characteristic. Only lately I had the case of a child 2 years old where nothing seemed to check this oozing. Phosphorus saved the life of the child.

In the hæmorrhagic variety of cholera Aconite stands at the head of the list. Administered timely it will generally cut short the disease. In this connection Carbo veg., Colchicum, Ipecac, Phosphorus and Pyrogen should not be forgotten. The hæmorrhagic variety is generally observed in debauchers or people who are given to drinking, smoking hemp and other intoxicants and who lead an immoral life.

Muscarin is another remedy that has produced nearly all the symptoms of cholera and it will be particularly useful if there is marked dyspnœa.

In the later stages when the heart seems to be in a critical condition, the serpent poisons at times do wonders. We should not forget what Nash has said about Lachesis in typhoid fever. It is just as valuable in cholera. Naja trip. is another great remedy in the last stage of cholera. Dr. Ray has reported some cases in his treatise on cholera. When the respiration quickens, becoming at the same time more and more superficial, while the heart's action is normal and still comparatively vigorous, Naja tripudiens (Indian cobra) is to be administered.—Salzer.

Years ago, it became the rage with the medical world to use Salicylic Acid in cholera, simply because it had some of

the symptoms of cholera manifested in its symptomatology of which the doctors were not aware; and like many other such remedies, it has come and gone. No body hears of Salicylic Acid now.

We have touched upon Cina, but we forgot to mention Santonine, which also comes in very handy in cases complicated with helminthiasis.

Even after recovery in some cases we find the face and extremities to be somewhat œdematous and swollen and puffy. In such conditions China is an excellent remedy.

Something ought to be said with regard to convulsions. This is met with in what is generally known as the hydrocephaloid condition and is more frequently observed in cholera infantum, than in Cholera Asiatica. Belladonna, Cuprum Cupr. ars., Cicuta, Hyosciamus, Stramonium, Opium and Nux moschata are some of the remedies used in this condition.

With regard to uræmia I think something might be said that deserves the careful consideration of every physician, who has a cholera case in hand. Sometimes we find physicians to be in an undue hurry to have the urinary secretion re-established. Some go so far as to use the catheter. After having treated some hundreds of cases and with some amount of success, we have come to the conclusion that we need not be in a hurry about this matter. We do well to remember Hahnemann's saying "make haste slowly." Some physicians are in the habit of making a routine prescription of Cantharis for suppression of urine. This is a most injurious practice. If the patient improves gradually but steadily, we need be in no hurry about the urinary secretion. If, however, it becomes very obstinate, and untoward symptoms begin to appear, then we must be up and doing. We have already narrated the remedies that are useful in suppression of urine and uræmia and need hardly recapitulate them here. But we

should always remember that here as well as in every other condition the totality of the symptoms is our sole guide, and the more difficult the case, the closer should be our attention for the selection of the similimum.

If inspite of all efforts, the patient develops symptoms of uræmia and the typhoid condition supervenes, still we need not despair, for we have most excellent remedies to cope with this condition. We have time and again seen a so-called dying case revive under homeopathic treatment, even where profound coma, dyspnœa and other symptoms were present. Nash's Leaders in Typhoid is an excellent book for reference in such conditions.

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