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ORIGINAL ARTICLES

THE KEY TO SUCCESSFUL PRESCRIBING.

LETTERS TO A YOUNG HOMEOPATH—LETTER NO. 3.

Comments on What Is Curative in Medicines.



EAR DOCTOR: "If he clearly perceives," says Hahnemann, "what is curative in medicines, that is to say, in each individual medicine (knowledge of medicinal powers)." He does not mean, in this connection, what part of a drug acts in a curative manner, but *what will it cure?* What is its curative power? The answer is, it will cure any individual natural disease when the artificial disease which it has produced in the healthy human body is most *similar*. This is the law of similars—*similia similibus curentur*. This suggests the old question: "What is the best method of studying materia medica?" What is the best method of comprehending the artificial disease which each medicine produces in the healthy human body as manifested in the proving? What is the best method of ascertaining the *individuality* of each medicine? Some have adopted the plan of selecting out of the provings of each drug the "key-notes," that which is *characteristic*, the "red strand of the rope," any central principle or modality which may be used as a pivotal point of comparison, like this: Worse on motion—Bry.; amelioration from motion—Rhus.; high fever with *blood-shot eyes*—Bell.; she is so nervous that even the *rumpling of paper* disturbs her—Borax. Now these are good if properly used, but they will not do to prescribe by *in themselves*.

The study of what is curative in each individual medicine is one of constant comparison and differentiation. The pathogenesis of a remedy must be compared with the recorded anamnesis of the patient. The *individuality* of the patient's sickness must be recognized on the one hand, and the *individuality* of the artificial sickness produced by the drug must be discerned on the other, and they must be *similar*.

If you wish to find a word in an indexed dictionary, there are two ways: (1) Turn through the book until you find your word; and, (2) use the index, and open at once to that part of the book which contains it.

The "key-notes" are as an index. They often lead you to the remedy which, when further investigated, proves to be the most *similar*; but the *further investigation* must not be neglected.

Again, some adopt the *physiological* plan. That is to say, they assume that a given medicine produces in its proving certain physiological phenomena. They then profess to be able to diagnose a *similar* phenomena in the patient to be treated. On this basis they announce that this medicine is the greatest liver remedy in the world; and *that* the greatest brain remedy. Some have lectured to college students after this fashion, and even published books called *materia medicas*. But experience will convince any honest man that the plan is not practical. It is not enough to know that a given medicine affects the liver, but we must know *how* it affects it. What symptoms expressed the disorder? Moreover, we must know also how that medicine affects the rest of the system. Here is another medicine that affects the liver as profoundly, but not precisely as the first. Hence, the question: What symptoms did it manifest? How did it affect the rest of the body? While each medicine has some symptoms in common with all drugs, yet each individual medicine has *something peculiar to itself* and hence *individualizing*. It is this very thing which must be recognized in each medicine, but which no man can comprehend in a physiological diagnosis. Hence this plan must ever be a disappointment and a failure.

The third and only true method of studying *materia medica*, is to carefully peruse the provings of any given medicine with the fixed purpose of understanding *the individual artificial disease* which it produced; until you can see that sickness as a *likeness*, a *picture*, an *image*. Not with particular reference to the liver, or the brain, or the heart, or the stomach, but *the whole organism*. How did that drug affect the *provers*? That is the question. Then when you come to the bed-side of natural sickness, study the *patient* as you studied the *provers*. Study the totality of the symptoms until you see how the natural disease is affecting *the whole organism*; until you can see the *picture*, the *likeness*, the *image*. Then choose the remedy which produces the most *similar image*.

In my last letter I remarked that perceiving what is curative in medicine is just as important and as little understood as perceiving what is to be cured in diseases. You wish to

know what I meant. I shall now explain. What is curative in medicines can never be decided by their taste, or color, or their action on guinea pigs, or by laboratory tests. The *curative* power of any drug is hidden in its *dynamis*, its inner nature; and is *revealed* by symptoms reflected from the vital force of healthy human subjects. The symptoms form an image, and this image becomes the medium through which its curative power is "perceived."

The physician who can not comprehend that the internal essence of disease is *the deranged vital force*, and that *this* is what is to be cured; and that the degree and character of the derangement varies in each individual patient and in the same patient at different times as manifested by the diversity of images, will never be able to "perceive" what is curative in medicines; for whether it be morbid influences producing natural disease, or the action of a medicine producing artificial disease, the internal essence of each is *a deranged vital force*; and what is to be cured in the natural disease and what is curative in the medicine, must be perceived by the symptoms reflected in each case respectively.

In each instance we are dealing with the *immaterial*, the spirit-like—the vital force of the patient and the dynamis of the drug. Do you ask me to define these? Well, the dynamis of a drug is *what remains* after its material elements have been eliminated; and the *vital force* of the patient is *what is lacking* when only his material elements remain—that is, what the cadaver lacks of being a man; namely, the *animating power*.

So, my dear doctor, unless you can divest yourself of materialistic conceptions of disease and of drugs, all your hopes and aspirations as a homeopathic practitioner must be blasted. So long as you are inclined to see a little of the coloring matter or test the taste; to inquire about the pathological cause and the physiological seat of symptoms, you will never reach the goal in pure homeopathy. The philosophy is one of "perceiving" with the mind what can not be discerned by the senses. Hence Hahnemann talks about "perceiving" what is to be cured in diseases and "perceiving" what is curative in medicines. Not only so, but these must be "clearly perceived." I have borne down hard on this point, because it means so much to you as a homeopathic prescriber. No class of physicians in the world can "perceive" what is to be cured, and "perceive" what is curative in medicines, except the Hahnemannian class; for those who must first make a

diagnosis; or first ascertain the supposed physiological seat of each symptom, will never be able to perceive as the founder has directed, neither in natural sickness nor medicinal provings.

In Hahnemann's day there were a large number who wished to appear as homeopathic physicians, but who also wished to spare themselves the trouble and labor of seeking for the suitable homeopathic medicine for *each case of disease*. That number in recent years has grown *immensely!* They seem more anxious to affiliate with old-school doctors, than to follow Hahnemann. They learnedly inquire as to "cause and effect." They profess to be able to tell us the physiological seat of each symptom; but when they confront the symptoms: "Worse when thinking about his complaints;" or this one: "Thinking of his complaints ameliorates," they fail to put their fingers right on the "seat," or to give the physiological "cause." Hence, there is but one thing left for them to do—namely, *denounce the provers* and call loudly for a "modernized" materia medica. And there are thousands of true, well-tested symptoms absolutely essential for the true Hahnemannian prescriber, which they thus brush to one side as spurious and untrustworthy.

Now, my dear young doctor, what I want you to understand is this: if the intelligent patient says, "*Thinking of my complaints aggravates,*" the image of his sickness is not complete without that symptom; and the physician who rejects it, cancels it from the list and utterly refuses to consider it, must hopelessly fail to "perceive" what is to be cured in that individual sickness. Neither is it possible for him to "perceive" what is curative in the medicine which produces that symptom. All such would-be homeopaths must be complete failures in the homeopathic science and art of curing. And there are thousands of them! And they are all *materialists* as to disease, disease cause, and the medicinal powers necessary to cure.

Still, they want to appear as homeopaths! Hahnemann said: "They are nothing to boast of." Not one of them will love me any more for making known to you these truths; but I am more concerned in your successful career as a homeopathic practitioner and the perpetuation of pure homeopathy and the welfare of the human race, than in their personal affection for me.

Nothing has so retarded the progress of homeopathy as taught and practiced by the founder, as that class of physicians

who profess with their lips the doctrine of Hahnemann, but who, in practice, wantonly diverge from his teaching and disregard his beloved and only scientific system of cure every day of their lives, by the unnecessary and inexcusable employment of palliatives and other injurious allopathic trash. The people in their ignorance of true homeopathy, regard such doctors as homeopaths; and the result is that the *system* which in itself is infallible, must suffer reproach because of the inglorious and egregious blunders of its pretended friends who never understood its fundamental principles, who do not now understand them, and who *do not want to learn*. I hate a pretender in politics, in religion, or in medicine; and God speed the day when the masses shall be so well informed that this "mongrel sect" can not prey upon them in the guise of homeopaths.

But even during the life of its founder, amid persecutions and misrepresentations such as we have not experienced, there were physicians true to their convictions, loyal to Hahnemann and enthusiastic in the faithful practice of the newly discovered system of medicine; and from the day "the noble old man" laid down his pen even to the present, there have always been found a plentiful number of self-sacrificing physicians and of the very highest types of manhood, who are ever ready to pull back the curtain and let in the clear light for those who *want light*; who can be depended upon in sowing the *pure seed*; who practice homeopathy in its purity and simplicity, and who never, even in *general practice*, diverge from Hahnemannian lines or find any pretext for putting "new wine in old bottles."

In this connection, my dear doctor, I want to call your attention to the words of a very eminent old-school physician, Dr. D. W. Cathell, of Boston, author of "The Physician Himself." And I do this to impress your mind with the fact that even so-called "regulars" are close observers of our practice and are fully aware of the indisputable fact that our ranks are divided; that we have traitors in the camp, and that all are not homeopaths who profess to be. He says: "The genuine homeopath never gives tonics, never orders mineral waters, never orders emulsions, never alternates or mixes medicines, and never employes hypodermic injections, cauterizations, sprays, or gargles. Show a decent respect for the *real* homeopath, and for every one's views if honestly held, but carefully shun the fellows, who, as the ass did when in the lion's skin, plume themselves as homeopaths simply as a sham

to deceive the public because, just at this time, it pays." Yes, sir, it pays to play "homeopath" until each fellow, one by one, is exposed and shown to be an "ass in the lion's skin." High compliment, indeed, by a professional opponent! But have you ever heard of an attempted answer since "The Physician Himself" appeared—1889? No! There is no answer. The truth, like an arrow, goes straight to the heart and *sticks*.

Now, my young doctor, I am sure you do not want to classify yourself among doctors who have no defense for their practice; who are of a nondescript professional character; who are neither one thing nor the other; who are *anomalous*; who are neither "fish, flesh, nor fowl, nor yet a red herring." If they could even claim kin to the homeopathic Hering, they might well be proud; but he was not of their ilk. None but themselves could be their parallel; "*tombe des nues*." Take my advice, my dear doctor, and be a true *Hahnemannian homeopath*, or make no pretensions whatever toward homeopathy. Homeopathy, to be rich in laurels, must be practiced in its *purity*; and I feel sure you are ambitious for your full share of laurels.

You now have a glimpse, I trust, of what you have to avoid; of the evils with which there is danger of becoming contaminated, and of the moral stamina and professional rectitude necessary upon your part in order to be a consistent adherent of Samuel Hahnemann. It is astonishingly strange how easily a beginner may be led astray; and how even some apparently well grounded in the faith may become tinctured with old-school influences; or rather, I think I should say, how old-school doctrines cling to some who attempt to free themselves in order to embrace homeopathy. In order to illustrate what I mean, and to emphasize the care you should exercise in choosing homeopathic literature, I shall now quote from one of the most eminent, and I believe, one of the truest and most successful homeopathic prescribers who ever graced American soil. He stood third only from Hahnemann himself. But he was first an old-school physician; and his early impressions never fully faded away. He said, "In seeking a drug whose symptoms shall correspond most nearly to those of the disease to be treated, it is evidently necessary to seek a drug, the idiopathic symptoms of which shall correspond to the idiopathic symptoms of the disease, and the sympathetic to the sympathetic; a drug, too, whose symptoms of either variety shall have the same seat as the analogous

symptoms of the disease, and shall result from a *similar* pathological condition."

That has quite a traditional ring, and would sound good to all traditional doctors and their imitators; but every physician who has a correct understanding of Hahnemann's doctrine, knows that it is absurd on its very face. It is *assumed* that any physician capable of making a homeopathic prescription, upon being informed by his patient that he has a pain in the left hip, or in the vertex, can decide the nicest precision whether that pain is idiopathic or reflex! And likewise if the analogous symptom is communicated by the prover, that he knows *instantly* whether it is sympathetic or idiopathic! And further, that this erudite doctor knows in a flash, both in natural disease and in the pathogenesis of a drug, the "seat" of this symptom and that it has resulted from a "similar pathological condition." Now observe, my dear young doctor, all this is *assumed* and the *very thing* which remains to be proved. And to make a bad matter worse, he then *assumes* that this pathological distinction is "evidently necessary!" Now in view of the "send-off" I have given this writer, and the high esteem in which I hold him and in which all true homeopaths hold him in spite of the absurdity of the foregoing, whom would you guess him to be?

Great as he was he was not perfect; and the article I am reviewing he evidently wrote in the wrong time of the moon. The absurdity of such teaching lies in this fact, that pathology, at the very best, whether in the prover or in the natural disease, is often *wholly a guess*; and you can plainly see that he makes the decision as to whether the pain is idiopathic or sympathetic, contingent upon the *pathology*. The fact is, one must *guess*, that this pain is due to a certain pathological condition; and then *guess* that a certain remedy when tested on healthy subjects, produces a "*similar* pathological condition." That philosophy would coincide well with the old-school doctrine, for they guess all the way through—and that is where he caught this contagion.

This ought to have the effect to convince you that, what ever the repute of the author, whose pages you are devouring, *you must think for yourself*. The author quoted was a great student of Hahnemann; but he never learned this of Hahnemann. He was a personal student in the office of Bonninghausen; but he never learned this of Bonninghausen.

Having been cured of a dangerous illness by a homeopathic physician, after eminent practitioners of the "regular"

school had failed, he went to Philadelphia to seek the advice and instruction of Dr. Constantine Hering, one of the most learned homeopaths; but he never learned this of Hering. The truth is, all this talk about discriminating between a reflex and an idiopathic symptom; about locating the "seat" of the symptom by the "pathological condition," is some of the allopathic *scum* which clung to his garments as he waded, neck-deep, out of the medical quagmire of speculation, doubt and uncertainty, into the glorious light, science and *certainty* of homeopathy.

One of the chief glories of homeopathy is its simplicity; the fact that it does not rest on a theoretical basis; that its accuracy does not depend upon speculative pathology, but that it is founded on nature's law, and that its therapeutic rule is as reliable and certain and trustworthy, as the magnetic needle in the compass. Who could tell the pathology and designate the "seat" of this symptom: "He coughs every night precisely at two a. m.;" and this: "His cough begins every morning at five o'clock." Who could tell the pathology of each and explain the difference—if there is a difference? Is the homeopathic physician compelled to ascertain the "pathological condition" in each case which gives rise to the cough? And is he then compelled to find a remedy which has a "*similar pathological condition*" in its pathogenesis? Nonsense! He will find that Kali carb has produced a similar cough at two a. m., and if the rest of the image agrees, Kali carb *will cure*; and he will find that Rumex crispus has produced a cough at five a. m., and if the balance of the "pure picture" agrees, Rumex crispus *will cure*. That is the long and short of it.

Now let us suppose another case: Suppose you have two patients in one room—or one bed. One complains of *stitching* pain, worse by motion, inspiration and coughing; and relieved by *absolute rest*, and *lying on the painful side*. The other also complains of a *stitching* pain, but his aggravations and ameliorations are the *exact opposite*. Now who could define the pathological condition in each case and point out the exact "cause" of relief in one by that which aggravates the other? No man! But a novice in the homeopathic philosophy would know that in the first case Bryonia has produced those symptoms, and in the second, Kali carb; and that in each instance if the balance of the image agrees, each medicine will cure.

Again, suppose a patient complains of a pain in the hip, and that we correctly surmise that the pathological condition

is an *abscess*. Where would you go to find a medicine which has produced a "similar pathological condition?" What would a "similar pathological condition" look like? Not another abscess for that would be *like*. Now the mysticism here is all cleared up by calling your attention to the fact that we are to prescribe upon *the totality of the symptoms*; the *aggregate*; upon the "signs and symptoms" as an *image*. Among the signs or objective symptoms, maybe a pathological condition which can be clearly *seen*; but in another case, or even in the same case the pathology which is the "seat" of another symptom, *no man can see*; and no man can even guess it with any degree of certainty.

All that is necessary in order to make a scientific homeopathic prescription, are the symptoms which the physician can observe, which friends can tell him, and which the patient himself communicates. Those form the image of natural sickness. Then he must select that medicine which has produced a *similar image* (not a "similar pathological condition") consisting of the aggregate of symptoms which have been observed, and communicated by the patient.

Some non-homeopaths charge us with prescribing for symptoms; and sometimes symptoms in one disease which are also found in another disease. The answer here, again, is that we prescribe for *the totality of the symptoms, the aggregate*, in each individual case of sickness.

On this occasion I must direct your attention to the fact that beginners are especially prone to *hold to the great mass* of concomitant symptoms, without properly estimating the great difference inherent in every proved remedy. *We dare not hold solely to the relative number of concordant symptoms*; and constant care must be exercised to be certain that nothing CONTRADICTORY prevails between the proving of the drug and the image of the patient. And finally, the mental and emotional symptoms which constitute a part of the *image* of individual sickness, must find their analogue in the proving of the medicine selected.

Now, my dear doctor, when you shall have digested these points, you will feel that you have "the key to successful prescribing" in your hand; or rather, in your head. Now one more point, and then I shall close this letter; that *medicinal powers* are curative powers, will be conceded by all physicians; but the proposition I now submit is, *they are not material powers*. To draw a train, or lift a weight, or fell a tree,

material power is required. But to extinguish disease, save a life and thus happify a home, *spirit-like powers* hidden in the inner nature of drugs are necessary and *absolutely essential*. It would seem that some doctors, when trying to extinguish disease, judging by the *nasty, black, poisonous stuff* dispensed by them estimate medicinal powers by the power that *drives the wedge!* They are *materialists*; and they have crude, materialistic conception of disease and the philosophy of cure. And, my dear doctor, right here is *the real dividing line* between mongrels and Hahnemannian physicians. It pains me to have to publicly acknowledge such division. But we are not to blame, Hahnemann is not to blame, nor is pure homeopathy itself to blame. If these materialists would each consent to occupy his own pew, they would all be comfortably seated in the old school. There is where they belong. They ought to feel perfectly at home there. To see them marching in old-school ranks but carrying homeopathic colors, is the spectacle on which the world is gazing today.

The time now is when homeopathy should be the prevailing system of medicine throughout all civilization; when the world's physicians should understand each other and prescribe with safety, one and the same remedy for identical morbid images of sickness and not for identical *names* of diseases. But before such consummation can be realized, all professed homeopathic practitioners must form a solid front, stand on Hahnemannian ground and, with one united shout, unfurl the pure homeopathic banners before a suffering world.

Enriched by the treasure of her daily experiences, homeopathy must be delivered to the latest posterity *pure, undefiled and unequalled*. Hence, what she needs today are men; men of homeopathic knowledge and conviction; men firm as a rock; men steady as time; men true to themselves and to the system; men who are game to the backbone; men who make their commercial interests secondary, or rather, who appreciate the fact that their commercial interests are enhanced by pure homeopathy.

If you could find a thriving town which never had a bank; and you could convince its citizens that a bank is a good thing, why should you hesitate to do a strictly legitimate banking business simply because there are no other banks in that town! But do not imagine you could succeed by a mere profession, if the people find out that *in fact* you are running a bucket shop!

If a stranger is cited to a physician today as a homeopath, he has no assurance whatever by that cognomen, that he will not receive crude calomel, an opiate, or some patent medicine. This is what hurts homeopathy. And the chances are the stranger will think that doctor is a homeopath. He is sure to unless, perchance, he has formerly employed a *real homeopath*, or read such a journal as THE CRITIQUE.

The physician who perceives what is to be cured in each individual case of disease, and what is curative in each individual medicine, is a real homeopath—always; but he who fails to individualize in *each case of disease* and in the medicinal powers of *each individual medicine*, whatever his pretensions, is a generalizing allopath.

Those who employ the first, at once command medical science, art and skill; but those who are so unfortunate as to employ the second, become the subjects of experiment, physiological drugging and *luck*.

Were we presented with a number of counterfeit coins, we could never detect them by comparing them with each other. We might be allured by the imagined excellence of one, and yet, when compared with the *genuine*, find its imperfections. To the fountain we must go for the pure and limpid water which will enable us to detect the impurities of the stream below. The stream of homeopathy has become polluted—*awfully polluted!* Physicians who ask the public to patronize them as homeopaths, are, many of them, *counterfeits*. Samuel Hahnemann is the only criterion, the organon and chronic diseases the only standard. History repeats herself. Says Paul, "I marvel that you are so soon removed from him that called you into the grace of Christ unto another gospel; which is not another"—that is, it is a *counterfeit*. Every counterfeit is an evidence of the genuine; and the more counterfeits, the stronger the proof. There is but one way of being a genuine homeopathic physician, and that is by accepting the genuine homeopathic doctrine and exemplifying it in daily practice. Patrons who *know*, want the pure, unadulterated article; *qualis ab incepto*. There are always ear marks by which the genuine may be recognized; and we are determined to educate the people until they become familiar with those ear marks.

The word "heroic" looks to "regulars," and smacks of *material* power; while "spirit-like" points to homeopaths, and suggests the gentle, curative powers, the dynamic powers, hidden in the inner nature of drugs.

I am pleased with the progress you are making in a system so scientific, so perfect, so clearly comprehensible and so satisfying. When you once understand homeopathy as Hahnemann taught it, and learn to apply it as he practiced it, you will not be numbered with those who go out after "strange gods;" for you will realize that you have the *very best* there is in medicine; that the so-called "helps" only mar the beauty of your therapeutic law and hinder your success in curing the sick. It is a great thing to be able to cure the sick.

In my next letter I shall speak of *adaptation* and *finding the indicated remedy*.

Yours for Hahnemannian homeopathy,

J. C. HOLLOWAY, M. D., *Galesburg, Ill.*



PHLYCTENULAR OPHTHALMIA.

BY E. G. WHINNA, M. D.

THIS DISEASE has many synonymous titles, such as conjunctivitis phlyctenulosa, conjunctivitis pustulosa, scrofulous ophthalmia, eczema of the conjunctiva, phlyctenular keratitis, conjunctivitis exanthematica, conjunctivitis lymphatica, etc., but I prefer to use the name given as the title of this paper, as the disease may involve either conjunctiva or cornea, or as often happens both at the same time.

It is one of the most frequent of eye troubles and is found usually in those having a scrofulous history. It is essentially a disease of youth, and abounds among the poorer classes, where the children are illy nourished, living in damp, poorly ventilated houses, and where no attempt is made at cleanliness. In children of the better classes it may occur after an attack of the exanthemata, particularly after scarlet fever. Foundling asylums and infants' homes furnish a large proportion of our cases.

In addition to the constitutional cause given, certain dietetic errors are said to act as predisposing causes, such as the eating of pastry, candy, and other unwholesome foods, also the drinking of tea or coffee. The cases seen at the home have been in children between two and four years of age, and the girls seem rather more prone to it than the boys.

As a rule it makes its appearance suddenly; the symptom first attracting attention being the photophobia; the child wants to keep the head turned away from the light; and if

forced to face it, will close the lids tightly. The desire to close the eyes is, however, not a true photophobia, or fear of light; but is as much a desire to prevent the air striking the eyes, as the child will often bury its head in a pillow, even when in a dark room; if, however, this exclusion of light is encouraged or even permitted for a few days, a true photophobia will develop. Excessive lachrymation is usually present, and the constant flow of water from between the closed lids may cause cracking at the external canthus. If the child is old enough to talk, it will complain of smarting or burning pain as in an ordinary conjunctivitis. Considerable difficulty may be encountered on attempting to make an inspection of the eyes, on account of the swollen condition of the lids. Children usually make the greatest resistance to the forcible opening of the lids, in fact a state of inversion of the lids may be produced by the violent way in which they are held together. In making the examination, the child should sit on an assistant's lap, and then be laid over backwards on the examiner's lap, and its head held firmly between his knees; then with a small retractor the upper lid can be pulled back and the lower one held down by the finger, thus exposing the entire ball. What will be seen depends upon the number and the location of the phlyctenulae. We usually find one or more elevated patches on the conjunctiva, from one to three millimetres in diameter, and with a slightly abraded surface. If the cornea is involved, there is a slight elevation of the surface epithelium which soon breaks down forming a corneal ulcer.

When the conjunctiva alone is affected, only the conjunctival vessels are involved and especially those supplying the part where the phlyctenule is located. Thus we usually have a triangular zone of infection, with the apex at the site of the phlyctenule. If one should be seated near the corneal margin, there will be injection of the ciliary vessels of that side; but if located at the center or on various parts of the cornea, there will be complete pericorneal injection. As one characteristic feature of this disease is its tendency to recurrence, we will find this hyperaemia fading away in a few days, only to flash up again with each fresh eruption of phlyctenulae. There will also be found an injection of the palpebral conjunctiva, worse during the attacks, but persisting during the interval.

The treatment of this disease is essentially that of malnutrition plus the local treatment of the eyes. Strict attention

should be paid to general hygiene, especially to secure outdoor life a considerable part of each day, irrespective of any photophobia that may exist. As invigorating measures, spongings with cold water are of service; also a sojourn in the country, especially at the mountains or seashore. The question of feeding is of utmost importance; no sweets, pastry or greasy foods should be allowed and feeding between meals should be absolutely forbidden. The bowels should be kept open by the free use of water and fruit if possible, or by the use of mild laxatives if necessary. Locally anything like a poultice or bandage must be strictly avoided. Dark glasses may occasionally be of service to prevent the wiping and rubbing of the eye. Absolute cleanliness must be insisted upon, and to secure this, the eyes should be washed several times daily with warm borated water. Instillation of cocaine, one per cent. sol., are sometimes useful to lessen the sensibility to light. In obstinate cases, finely powdered calomel may be dusted upon the surface of the eyeball once daily. If the calomel does not seem to fill the bill, an ointment may be used, consisting of the yellow oxide of mercury and cosmoline, strength 1 gr. to ʒj. This is introduced into the conjunctival sac by means of a glass rod or brush, and is then rubbed about so as to be distributed over the whole conjunctiva.

The medicinal treatment consists in the administration of cod-liver oil and of such homœopathic remedies as may be indicated.

Arsenicum alb., scrofulous diathesis, great photophobia.

Calcarea carb., glandular enlargement.

Calcarea iod., when *calcarea carb.* fails.

Conium, photophobia and lachrymation, spasmodic closure of lids marked.

Graphites, similar to *arsenicum*, worse in A. M., canthi cracked and bleeding, as is also the alae of nose.

Hepar sulph., photophobia and lachrymation intense, worse in day time, worse from touch, better from warmth, canthi bleed easily.

Rhus tox., recurrent form, enormous amount of thin scalding water runs from eyes.

Treatment should not be intermitted in the interval between the attacks, but continued until the liability to them is quite removed.

Philadelphia, Pa.



SPECIAL ARTICLES



CLINICAL CASES—OBSTACLES TO CURE.

JULIA C. LOOS, M. D., H. M.



ASE I.—Edith M. L. was three and a half years old when I first saw her, and about the size of a normal child of six months. The face was much drawn, especially about the mouth, head drawn backward, to left side, extremities twisted in spasmodic contortions. One index finger and the toes were habitually extended, she had no control of her body and no use of her hands. Flesh was flabby and a general appearance of anaemia was prominent. She was subject to paroxysms of fever, continuing two or three days, ending in a clonic spasm of about twenty minutes duration. The first spasm occurred at birth. During sleep and at the beginning of sleep there is muscular twitching and jerking. She seldom sleeps two hours at a time, waking as if frightened or in pain. She was unable to speak an intelligible word, through making the effort to talk she becomes excited. She had suffered constipation from the beginning of her short life, voiding small quantities, in the form of a large, hard ball, by the aid of enemas and much effort and pain. The child's grandmother reported that the several doctors who had seen her, merely looked at her for a while but departed without any suggestion of a remedy for the condition.

Why is this child in this condition? What is disordered, what can be improved? Evidently there is some brain disturbance. Must the child be neglected because we cannot finger the brain substance and analyze its substance? The history reveals that three months before the child's birth, the mother had an intense fright, in consequence of which, together with the bodily injuries inflicted by a runaway horse, she was confined to bed for a week. Both mother and child have a sense of fear when they hear a horse, to the time the child was placed under treatment.

The child clearly is suffering the effects of fright, in disturbed brain function, transmitted to the functions under control of the brain. The history and the symptom image clearly

reveal the resemblances to opium. Under the influence of this remedy, development becomes orderly, the expression becomes intelligent, spasms occur rarely and bodily nutrition and control give the child an entirely different aspect in a few months. Under the curative influence she may reasonably be expected to develop along the normal lines, though handicapped by a few lost years.

CASE II.—Miss S. McC., about twenty years of age, was in a car fitted with seats extending across the car. When a slight collision occurred, the jar caused her left knee to strike against the seat in front of her, bruising the knee and shin. For some time thereafter, there was heard and felt, a crackling in the joint. Three days following the accident, while the patient was disabled because of the knee injury, paroxysms of unconsciousness began. Without warning, the body relaxed, in whatever position she happened to be, and she appeared as if sleeping. This condition continued for a few minutes or several hours, returning consciousness usually preceded by motion in some part of the body. The patient had proved herself of a nervous temperament on other occasions, fainting under stress of pain or other tension.

The father of this girl suffered sunstroke in the duties of army boy, and in consequence had frequent epileptic spasms. The allopath in charge of the patient from the time of the accident admitted he was unable to do anything for the paroxysms of unconsciousness, explaining that the girl had inherited her father's epileptic tendency. He was helpless because he could find no pathologic, anatomical basis on which to direct his efforts. Attention to the patient, selection of remedies according to the symptom characteristics (arnica and opium), resulted in restoration of the nervous system to order.

CASE III.—Miss J. W., in her eightieth year, suffered intensely from an erythematous, burning-itching eruption, for which scratching and rubbing offered no relief and increased the redness. It appeared on the backs of the fingers, hands, and extended up the arms; was especially troublesome about the eyes, where swelling was present, and the lids drooping; also appeared on the scalp. This continued for several months with palliation from remedies selected according to the skin characteristics. Here was not a local condition but an expression of internal disorder. The distribution of the eruption, its local character and the lack of reaction to remedies proved

that the thing to be cured was the sluggish condition of the system, a better condition for reacting was sought. This was aroused by the administration of X-ray in potency. The weak, fagged condition improved, the skin manifestations disappeared and the old lady declared herself as she appeared, in better condition than for several years.

CASE IV.—J. D., a girl of three years, was reported to have been delicate from birth. Many kinds of foods for infants had been used in succession but nutrition was poor and difficult. Constipation had persisted from infancy and dentition was delayed and accompanied by meningitis. She presented an anaemic appearance, was peevish, averse to being out of the house and in general discomfort. How can such disorders in an infant be explained except on the basis of inherited disorder? Clearly the functions of nutrition and elimination are in disorder in the beginning of a child's existence because of internal disorder. Laxatives and variations in food are not sufficient to change this condition. When it is observed that several other children of the same family have presented similar conditions, more or less intense, whose father had suppressed cycosis, we recognize sycotic anaemia. Under the influence of sepia and medorrhinum, selected on the individual characteristics, this girl soon became rosy, active, sweet-tempered, enjoying and assimilating her food with orderly elimination and presented the picture of vigor and strength instead of anaemia. To determine what was curable did not require the demonstration of specific bacteria, which might or might not be present. The disorder expressed itself to the perception in the child's variations from normal.

CASE V. Mrs. M. C., aged twenty-seven years, was desperately ill after parturition with her third child. Perineal and cervical lacerations were left to be repaired six months later. At the time, the tissues were found very tender, bleeding on slight touch and so infirm as to make it doubtful if they would hold the sutures. The surgeon hinted at possible malignant development, surmised that building up such an anaemic constitution would be very difficult and advised iron preparations, suggesting Gude's pento-mangan. Instead of following this suggestion, careful attention was directed to diet and the patient studied to ascertain the remedy similitimum. Nitric acid proved to be the remedy and under its influence, with good hygienic surroundings and habits, the patient's condition improved, strength and vigor increasing each month. When the baby was one year old, the mother declared herself

stronger and better able to assume her household duties than for three years and her appearance corroborated her remarks. Removal of the uterine tissues, overloading the digestive system with iron in a form which cannot be assimilated by the tissues would not have built from the foundations as did the system when vitality was directed in the lines of order. By restored internal order, cure of that which was to be cured, the entire system had the benefit of orderly functions and repair.

These are but a few cases to illustrate what occurs when the physician clearly perceives what is to be cured and acts accordingly.

OBSTACLES.

Organon, Section 3. * * * Finally if he knows the obstacles to recovery in each case, and is aware how to remove them. * * * *

Section 4. He is likewise a preserver of health if he knows the things that derange health and cause disorder and how to remove them from persons in health.

There are many varieties of obstacles to cure in individual cases, encountered after the physician has perceived the distinguishing features of the case and reached a conclusion as to the remedy most similar to the case. There are also obstacles presented in some cases, interfering with the physician's perception. Owing to the commoner training of materialistic instruction, patients applying for treatment fail to report such symptoms as are desired. From timidity or false sense of shame or false modesty or from ignorance of the relation of peculiar and individual symptoms, they withhold information about what they consider personal affairs. Mental symptoms, sexual symptoms, peculiar desires and aversions, strange habits and unusual cravings are apt to be withheld unless the physician succeeds in winning the entire confidence of the patient or attendants.

Many people do not realize the importance of giving themselves entirely into the charge of the physician and attempt to alter symptoms themselves. Without the direction of the physician and sometimes without permitting the physician to know it patients use proprietary pain palliatives, laxatives, indigestion tablets and other favorite prescriptions. They often neglect to report even the existence of symptoms for which they attempt to dose themselves or they may mention the symptoms without mentioning that they have attempted to alter the condition. Whether the use (or abuse)

of these things is mentioned or not, their influence in the case may be considered. To avoid such occurrences the homeopath has learned to caution patients to use *no medicine for anything* except such as the physician in charge prescribes.

Camphor especially is to be avoided as its influence on potentized remedies is peculiarly detrimental or inhibitive. Certain classes of substances, taken with foods, must often be prohibited, with the use of particular remedies. Coffee, acids, salt, pepper, are inimical to the action of certain remedies. The prevalent use of lime water in the milk for children or with the food of dyspeptics changes the aspect of the case or arouses disturbances not part of the patient's disorder. These many things may not always actually prevent the action of the potentized remedies which have been proved capable of acting in spite of cruder substances in the system but they alter the messages which are the guide of the physician and distort the evidence on which the physician must rely for judgment of the progress of the patient and the course to be pursued for the cure of the patient.

Symptoms which would disappear under the influence of the prescribed remedy may be observed repeatedly recurring by interference of inimical substances used at the same time. For this reason it is necessary for the patient's habits and customs to be known.

Perhaps most powerful of all interfering influences are those of the mental and emotional realm. These influences come nearer to the man himself and are more closely related to the original occasions of chronic disorder which must be recognized to be disobedience to moral and mental laws even more than disobedience to physical laws. Domestic and business discords and anxieties, unrequited affections, secret unsatisfied longings for affection or personal ambitions, jealousies and hatreds secretly harbored or expressed, are all opposed to harmonious life and prove a drain and a strain on the nervous system. Where these things persist the action of remedies may be prevented. There are instances where such emotional disturbances and mental distortions are part of the expression of the disorder and dependent on ill health for their continuance, but there are numerous instances where they foster physical disturbances in the mind, and the emotions are the issues of life and the life will follow the trend of these. It is in the realm of these disturbances that the successes of mental therapeutics have been achieved and these emphasize

the need of insisting upon obedience to hygienic laws. Hygiene, mentally, emotional and physical, is essential to cure of disordered man. Probably there are no obstacles to cure which could not be embraced in this command—Thou shalt require obedience to hygienic laws.

Harrisburg, Pa.

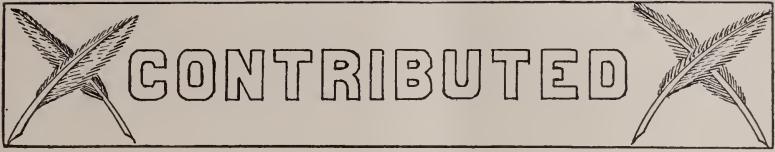


THE APPENDICITIS OPERATION.—At the recent meeting of the International Medical Congress in Buda Pesth one of the most interesting discussions was that concerning the advisability of operating in appendicitis. In this discussion a large number of eminent physicians and surgeons participated. It is stated that the speakers were divided into three groups: Those favoring operation in all cases, those for operation in selected cases, and those for no operation at all.

Among those strongly opposed to operation in any case were Drs. Lenhartz, of Hamburg, and Bourget, of Lausanne, who asserted that by proper hygiene, diet and nursing a lower mortality could be obtained than by operation. On the other hand those favoring immediate operation in every case failed to receive the highest support that has been extended to them in past years. In short, the consensus of opinion was against the radical measures. The majority of the speakers are also reported to have been strongly opposed to the practice of making a puncture to determine whether an abscess has formed or not.—*New England Medical Gazette.*



SABAL SERRULATA.—General and Sexual Debility. In the Saw Palmetto we have a remedy with valuable properties for promoting nutrition and tissue building. In sexual neurotics—those debilitated from sexual excesses, natural or from pernicious practices—it is of positive service. The appetite is increased and digestion and nutrition promoted. The languor, apathy and indifference, with appearance of debility, give way to vigor and alertness under the spur of its positive tonic properties. It is of especial value in young female neurotics, who from suppressed or perverted sexual inclinations, become anemic and run down. Often a valuable remedy in supplementing the good work of phosphoric acid in these cases. 15 to 20 drops of the tincture are given two or three times a day. Larger doses should not be given.—*North American Journal of Homoeopathy for August.*



CONTRIBUTED

AN EMASCULATED PROPOSITION.



ON THE CRITIQUE: In the title that Institute journal is referred to!

“Kaleidoscopic” hardly defines the transformation from what those friends of the journal idea who had dreamed dreams about it for ten years wanted, to that which the trustees have decided to give us. They who accouched the varmint at Kansas City named it a great weekly publication, a veritable wheel-horse promulgator of the faith, a sort of a (Simmons) *Journal of the American Medical Association*; whereas the trustees, by a shrewd podalic version, have turned the infant into a simple serial story of the Institute’s proceedings, our “transactions” in monthly form, embellished with a few news-notes about the Institute only, and signed editorials by whoever will write them. Woe will be wailed in the late Journal camp, while at least a modicum of joy will be bonfired in the circles of those who opposed the eight thousand five hundred dollar journalistic fiasco.

Taking account of stock, the Institute has suffered a diversion from its treasury, already depleted, of exactly the above-named number of hard-collected plunkets for someone’s foolishness. The “contract” which the Medical Century Company worked upon the all too easy committee, at that memorable meeting at Cleveland a year ago, called for \$5,000 per year, and the trustees, evidently considering it a bargain at any price to get rid of the elephant, paid another \$3,500 to said company for laying down that which everybody except a few had already decided should be shuffled off. To the company it has been a genuine snap, to the Institute not worth a stewed prune. Clap the two sums together and the dear old Institute, feeble-minded in its financial management, has surrendered to one of its loyal friends and, in many ways, beneficiaries, the goodly sum they aggregate for publishing its journal under a different name for one year—one hundred and twenty-five Institute papers at the rate of \$68.00 per paper.

Returning to the milk in the cocoanut, we are now to have an emasculated proposition, a journal neither a journal nor yet the valuable volume of "transactions." This emasculation was accomplished in the very proper interests of the independent medical journals, who had previously done a great deal for homeopathy and the Institute, but will hardly meet with the hearty approval of the Kansas City eloquents who plead for and succeeded in having ordered for them a great weekly magazine to do battle for our cause. The new serial is to publish nothing but Institute papers and news. No State Society papers or proceedings, no general medical news, no homeopathic happenings, no nothing but Institute doings are to be given place. True, it is to be called "*The Journal of the American Institute of Homeopathy*," and is to have the secretary for its editor. But just wherein its journalism is to lie, just how and where it is to propagate the faith, defend the cause, belabor us into line, and keep the pot boiling is not yet depicted. It is opined that the talents and resourcefulness of the editor will be taxed to the uttermost if he is to try to make a "journal" of it with these restrictions thrown about him.

The fact of the matter is, that after a waste of \$8,500 we are again back to the Institute "transactions," in another style. Whether the form will be pleasing remains to be seen. That the trustees will endeavor to make it so is certain. Its Journal Committee, consisting of Drs. Sutherland, Hobson, Jones, Porter and Horner, will do their best; but with the Institute again tied up in a contract with the Medical Century Company it is doubtful if their efforts will be very successful. The company tweedle-deed the Journal Committee last year, and it seems to have somewhat tweedle-dummed the Institute again this year. Keenly ready for the doughnuts, even for the holes in them, so long as any were in sight, the doughty field-secretary has now come back into the fold of a no-Institute journal party, where he had previously befuddled himself at Atlantic City, Norfolk and Kansas City, editorially and otherwise, and has thus befuddled his friends, the former Journal Committee, by everlastingly tying the trustees and Institute in a contract which specifies the kind of a "journal" it may issue. That committee seems to have been caught between the upper and nether millstones.

Just why any member has a right to dictate any such form deponent knoweth not. Just why the trustees, however properly willing they might correctly have been to have agreed

to issuing for the Institute a serial form of the transactions, should have entered into any kind of a contract with any one member is not understood. It is feared, without criticising, that in this a serious mistake may have been made, in that now, no matter what the Institute may in the future wish to try in this matter, it is bound by contract so it cannot do it.

Under the conditions, let us all submissively, aye, cheerfully, try the new form of "transactions" for a year or two and see how we like it. It can hardly be less interesting and valuable than was our late and expensive venture. Perhaps it may be just what we stand in need of. If it proves otherwise, we can then go back to our old and valued volumes, which have brought us so much credit and have added so much of merit to our literature for the past sixty years.

As to who "did it"—the profession knows!

Long live the trustees!

C. E. FISHER.

Chicago, Illinois, December 10, 1909.



AMERICAN INSTITUTE MEETING.

THE SIXTY-SIXTH ANNUAL SESSION of the American Institute of Homeopathy will hold its meeting at Hotel Virginia, Long Beach, Los Angeles County, California, July 11 to 16, 1910.

California has invited the American Institute of Homeopathy at intervals during the past thirty-six years. It has never held a session west of the Rocky Mountains. Now that the Institute has accepted our invitation, we are making preparations for what we are sure will be the most successful Institute meeting ever held any place.

Exceptionally reasonable rates on railroads and at the hotels are assured us.

THE TIME.

July 11 to 16 was chosen as we are assured that it will be more convenient for the greatest number. We expect you to take your vacation at this time and spend at least a month from your office in enjoying yourself and giving your family the trip you have always looked forward to, and the one of which your patients have oft detailed the many enjoyable features.

THE PLACE—THE COUNTRY.

See America, your own country, first, and then foreign countries later if you must. They have none of the grandeur of the Grand Canyon, none of the wonders of the Yellowstone, none of the sublimity of the Yosemite, and its giant trees, and no climate anywhere in the world is equal in comfort to a California *coast* climate in July. A blue sky, surpassing the Venetian, a rainless month without humidity, and cool enough every night to require blankets.

THE HOTEL.

At Hotel Virginia, situated as it is in Long Beach, a most beautiful seaside suburb of Los Angeles, the American Institute of Homeopathy will have its headquarters, its meeting rooms, and its entertainments. This million-dollar marvel of the twentieth century is a masterpiece of reinforced concrete, steel, cement, tile and marble. In taste and in elegance, in detail, in decoration, and in appointments and furnishing, it is a symposium of quiet refinement, of luxury and of culture.

Long Beach has no "season." The only difference is that people from the Middle West and the East go there at one time of the year to be relieved from the severe cold and sudden changes of their winter and spring months at home, and those from the far West, from the valleys of Arizona, New Mexico, Nevada, Utah and inland California towns go there in the summer and fall to cool off. This is the history of the utility of California coast towns in general.

The local Committee of Arrangements, consisting of Drs. W. J. Hawkes, F. S. Barnard, H. M. Bishop, E. C. Buel, W. E. Waddell, T. C. Low, Eleanor F. Martin and Walter E. Nichols, is doing everything in its power to provide every comfort, convenience and entertainment for you, and all they desire is the opportunity to give you the most pleasurable and profitable meeting in the history of the American Institute.

Fraternally yours, WALTER E. NICHOLS,
Chairman of Local Press Committee.

Pasadena California, November 15, 1909.



AMERICAN INSTITUTE 1911.

IN ACCORD with the By-Laws, Art. X., Section 9, Invitations for the place of meeting of the American Institute of Homeopathy in 1911 must be in the hands of the trustees April 10, 1910. Members of the Institute interested in the

place of meeting in 1911 are requested to present their invitations as early as practicable to some member of the committee.

SARAH M. HOBSON, M. D., 700 Marshall Field Bldg., Chicago.

J. B. GREGG CURTIS, M. D., 912 Fifteenth Street, Washington, D. C.

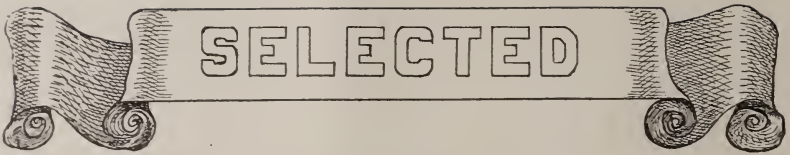
WILLIAM O. FORBES, M. D., Hot Springs, Ark.

By-Laws, Art. X., Section 9:

"The determination of the next place of meeting shall take place as follows: All invitations for places of meeting shall be forwarded to the Board of Trustees at least ninety days before the date of the annual session, whereupon the Board shall investigate the various places, with reference to accommodations, hotel rates, railroad facilities, and obtain all necessary information. The Board's report shall be made to the Institute, when the location shall be determined."



THE THERAPEUTICS OF APPENDICITIS.—The October 23 number of the *Journal of the A. M. A.* devotes four pages to the therapeutics of appendicitis. The writer of this paper seems to be at sea in the matter. Here is an abstract of the treatment: 1st. Rest is imperative; on this there is no dispute. 2nd. Catharsis comes next in importance, though "there is a wide variance of opinion as to the advisability, value or necessity of purging." 3rd. Many cases are really "an irritation and inflammation of the cæcum;" which should be washed out. 4th. There is a difference of opinion as to the advisability of using the ice bag. 5th. Some believe in giving *morphine*; others do not; the writer of the article believes in it. 6th. "There is a great variation in the opinion of physicians and surgeons" as to whether food should be given. 7th. "It seems advisable to operate if, in from 24 to 36 hours the pain has increased, the temperature gone up, the pulse also; or if there is a sudden subsidence of pain. From 8th to 14th the directions are concerned with what is to be done in certain events. 15th reads "After complete recovery from a severe attack of appendicitis a child surely, and an adult generally should be operated on" because then "the mortality is, perhaps, less than one per cent." This is a summary of the therapeutics of appendicitis with the "regulars" today. It cannot be very satisfactory to them.—*Homœopathic Envoy.*



SELECTED

SAVE THE INSTITUTE.



THE "SETTLED QUESTION" is a fact. The Institute Trustees have met the journal question and have settled it in the only possible way under the circumstances. We say "under the circumstances" because we have always felt that these "circumstances" never should have arisen.

In their meeting at Washington, October 6th, the matter of issuing a journal was decided in the affirmative, but it was also decided that the journal should conform to the suggestions in the Porter resolution which was presented at Detroit last summer. This was, in effect, to issue a monthly bulletin giving the Institute news and the papers which were read before it. In other words the Institute is to publish its transactions each month in the form of a monthly bulletin. Only homœopathic advertising is to be accepted and thus the Institute will not be in competition with the established journals in that which gives them their only opportunity to live.

This decision meets the approval of all the journals and their friends who were not considered before. It gives us the privilege of existence which would have been impossible had the official journal continued as it was started. The editor of *The Clinique* does not change the views he has always held regarding the journal. We do not believe it was just or wise for the Institute to go into this business and we feel a terrible blunder was made in starting it. We fought it with all our might and in this respect all the journals were a unit. The terms made with the *Medical Century* were not right, and we still believe the Institute was impoverished financially by the journal contract. The trustees have paid the editor of the *Medical Century* the sum of \$3,500.00 to quit a job which never should have been given to him. Add to this what has already been given to him and it will be easy to see where the money has gone and why the Institute is poor.

We however accept the alternative of the trustees have given us; we will make the best of it and go ahead for the sake of our National Association. We must save the Institute and to do this we must all work hard. Let everyone who has

not paid his dues attend to this matter at once. Let every homœopath join the Institute and stand by it. This is our duty and the journals will be in the front ranks fighting for the cause.

Dr. Ward, our President, deserves our support; he is working hard and is handling every delicate issue with tact and decision. Help him swell our ranks. If you are not a member of the Institute, send your name to *The Clinique* and we will see that it gets into the right place. Our profession has done much for all of us, so let us do our duty by our organization.

H. V. H., *The Clinique*.



FLOOD-TIDE OF SURGERY SAID TO HAVE BEEN REACHED.—The *Monthly Homœopathic Review*, October, notes that there is the beginning of a strong revolt among the people of England against the surgical craze in that country. They see so many “of those whose physique has been wrecked by surgical interference.” They feel the pinch of the big fees, and the heavy after expenses so much that they are beginning to look about for some other means of treatment than that of the knife. The *Review* rightly thinks that now is the golden moment for propaganda work for Homœopathy, else the discontented ones will drift off into Christian Science “and other quasi-religious delusions which germinate so freely in America.” If the revolt starts in England it will spread to this country and the general practitioner may come to the fore again as in the olden times.—*The Homœopathic Recorder*.



A PREDICTION.—“I believe that before another fifteen years have passed we shall see the treatment of diphtheria by antitoxin practically abandoned, and if I am alive in twenty-five years I shall expect to see our friends, the allopaths, ‘right about face,’ again, as they have so many times in the past, and saying that ‘anyone using antitoxin as we use it for the treatment of diphtheria should be prosecuted for malpractice.’”—*Dr. E. S. Abbott; New England Medical Gazette, October*.



EDITORIAL SECTION



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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.



WITH COMPLIMENTS OF THE SEASON—

It is with no slight degree of satisfaction that I present in this issue a much improved CRITIQUE from a mechanical standpoint.

While the change in paper may lead some to surmise we have reduced its size, a close observation will disclose a decidedly contrary state of affairs. Our type pages have been lengthened and most of the matter set "solid" so, in the long run, THE CRITIQUE will give, with each issue this year, about 20 per cent more reading matter than it did last.

During the year just past THE CRITIQUE has added more *cash* subscribers to its list than any other medical journal in the West; its activity in Institute and other affairs has been amply repaid in ultimate results obtained, besides which it has acquired a standing possessed by but few publications, inasmuch as in the case of a majority of medical journals, local conditions have been drawn upon very heavily in order

to furnish an excuse for their existence. THE CRITIQUE has passed the "local condition" stage.

With this issue it enters upon the seventeenth year of its publication, during which time it has adhered strictly to the purposes of its inception, *i. e.*, the promotion of *homeopathy* and *homeopathic affairs*; how well it has accomplished the purposes aforesaid can be very readily ascertained; it has no regrets for the position it has taken upon any question. Its past policy, exposing the preachers of homeopathic doctrine who practice rank heresy in direct opposition to the established faith, will be closely adhered to in the future.

A position of this kind partakes of the peculiarity of applying a remedy where it is likely to do the most good, and while the one taking the medicine usually vociferously cries "knocker," it is not necessary that one should be classed among such, inasmuch as were it not for the so-called "knocker," many easily corrected faults would remain to menace the peace and prosperity not only of associations but the community as well.

The atmosphere of good fellowship which prevades all countries and conditions at this particular time is sufficient reason for wishing every one a happy and prosperous New Year; to our contributors especially do I extend felicitations over the fact of their having upheld the cause of homeopathy in their contributions. To all such I feel a debt of obligation on which it is altogether likely I will be unable to pay anything adequate, unless this public acknowledgment is considered sufficient.

May health, happiness and homeopathy be the portion of all. M.



COLORADO'S STATE BOARD OF MEDICAL EXAMINERS. Auditor Kenehan of Colorado, is a reformer of that rough and rugged type who plays no favorites, neither does he allow himself to overlook speculations, even though practiced by members of a profession to whom peculiarities of this sort are not often attributed.

The latest combination to come in for a share of the auditor's condemnation is the State Board of Medical Examiners and there really appears some good reason for this rough and rugged reformer's remarkable activity in this direction, that is, providing, of course, it can be proved the funds of this branch of the state economy are being handled as he claims.

An audit of the board's books covering a period from 1905 to the end of the present year, shows a system of book-keeping which almost places that art among the exact sciences. Notwithstanding \$22,002.70 were collected during this period, not one penny, according to Auditor Kenehan, has ever found its way to the state treasury, as the secretary treasurer, at the end of each year, drew a voucher covering the unexpended balance, which amount, it is claimed by this watchful official, was deposited to the secretary treasurer's own account, *for use of the board in pending litigation and other contingencies that might arise.*

The statutes provide that, "all moneys *collected* by the board shall be turned over to the state treasurer *every month* and shall be kept by him in a separate fund. At the end of the biennial period all money in the fund shall be turned over to the general fund for general state purposes."

Inasmuch as one of the "contingencies" mentioned in a previous paragraph, comprised expense bills in attending conventions of the American Medical Association and that other questionable acts are some of the "irregular practices" charged by the rough and rugged state guardian of the people's money, there arises a suspicion in my mind it was not only a political but providential circumstance as well, that placed such a man as Kenehan in a position where he could be of some service in a case of this kind.

I have a very distinct recollection of a certain court clerk who manipulated funds entrusted to his care, and, unless the Honorable Augustus Buchtel saw fit to pardon him on one of his numerous visits paid the state penitentiary, the said party is still sojourning in that institution.

And now Auditor Kenehan says: "Every voucher from the Board of Medical Examiners will be held up from now on. The board has violated the law in a number of instances, and, unless it makes a satisfactory explanation and restitution, it will get no more money out of the state treasury."

While the foregoing may appear rather to the disadvantage of the professional gentlemen composing the board, one must take into consideration the fact that the law makes no provision for adequate reimbursement of members serving on this council, and while this of itself is no reason why the receipts of the commission should be misapplied, if reputable members of the profession were to decline such honors as are unaccompanied by suitable financial compensations, such, at least, as is provided nearly all other professions and occupations serving the state on different boards, there would, at all events, be no occasion for criticism in case of an affair of this sort coming to the surface.

I was asked some time ago "what special inducement, besides the honor, was there for a man to serve on the State Board of Medical Examiners?" In view of the foregoing disclosures am inclined to think I have another guess coming and that I gave the wrong answer.

M.



STILL SLIGHTLY UNSETTLED—Affairs surrounding the much-discussed Institute Journal question seem in a position described by some as "being up in the air," if recent reports are to be taken at all seriously.

The *very latest* regarding this *remarkable* affair is that, owing to the absence of one of the trustees from the Washington meeting, it was found imperative the minutes of that session be sent around for approval of the absentees, as well as of those who failed to "touch the pen" at the time. Just why this is so I am unable to state, but my informant avers such is the case, and further declares one of the trustees has positively refused to affix his sign of approval to the docu-

ment, and that up to the present time but three signatures decorate the same.

Now isn't that a pretty pickle? and more especially so as THE CRITIQUE and other independent journals had decided upon a life of absolute quiet, with great chunks of loyalty to the trustees in every edition?

My information is incomplete inasmuch as I am unable to furnish the names of the refractory members, nor am I able to give their reasons for objecting to the minutes, the approval of which would give Dr. Dewey some thirty-five hundred dollars of Institute money, besides depriving the Institute of its right, as one correspondent puts it, of doing as it "d——d pleases, in this as in other matters."

It strikes me, no matter whom it may be, they are doing the right thing by the Institute and themselves.

In another part of THE CRITIQUE will be found a letter from Dr. C. E. Fisher, *re* the Institute journal, which covers the ground very cleverly, and I will let the subject rest until more definite developments develop.

M.



PRESS COMMITTEE FOR THE CALIFORNIA MEETING—Elsewhere I am printing a pleasing bit of propagandistic literature from the Press Committee of the American Institute meeting, which convenes at Los Angeles, Cal., the 11th to 16th of July, 1910.

The foregathering of forces which is calculated to enhance the chances for success of this meeting, is evidenced by this letter, which, in connection with the enthusiastic efforts of the transportation committee, makes "failure" an absolutely unheard-of word, insofar as it might be applied to this event.

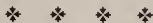
THE CRITIQUE will keep its readers thoroughly posted as to the proposed program of events attending this meeting, so that those contemplating the trip will know just where they are "at" before starting on their vacation.

Hunt up some friends or patients, and make it a point to secure their company on the "special" which will be scheduled over the *very best route*, all the way from Chicago to the place of meeting.

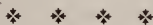
M.

MISCELLANEOUS

Keep the Los Angeles meeting of the A. I. H. in mind. The date will be July 11-16, 1910.



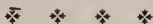
What has become of that \$15,000 addition which was to be made to the Park Avenue hospital?



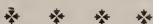
Dr. W. F. Burg has opened offices at his residence, 336 Cherokee Street; telephone South 1801



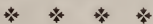
Dr. Rupert O. Butterfield, a homeopathic physician of this city, has given up practice and will move west.



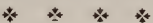
A woman in New York "tells how to be unhappy spending \$30,000 yearly." She ought to be ashamed of herself



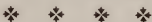
A. Kent's repertory should be on every homeopathic physician's desk. It is an absolute key to successful prescribing.



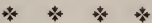
Dr. F. K. Dabney, formerly of Denver, has opened temporary offices in Los Angeles, Cal., at 736 West Seventh Street.



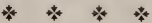
Dr. J. D. Mitchell was elected president of the Texas State Homeopathic Medical Society at a recent meeting held at Dallas.



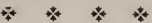
The Italian government has knighted a prominent homeopath of Rome, Italy, Dr. Agostino Mattoli by name. That will help some.



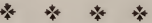
A man committed suicide in Cheyenne recently, and left his body to the coroner that he might study drink's effect on the nerves and tissues.



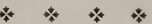
The city of Rocky Ford, Colorado, discontinued its hospital the latter part of last year, on account of failure to pay operating expenses.



Now that the holidays are over, "let's" all get down to business and start things going. 1910 is bound to be the banner year for us all. Get busy!

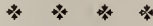


The United States Marine hospital, Cleveland, is *anxious* to learn of a case of pellagra in Northern Ohio, says *Medical and Surgical Reporter*. It's anxiety should be directed in a more pleasant channel.



George Crocker, formerly of New York City, left \$1,500,000 to Columbia University, to be used for the investigation of cancer—the malady which caused his death. While the scientific gentlemen to whom

this delicate task has been assigned may make no headway against the dread disease, there is no doubt but what the million and a half will be disposed of with neatness and dispatch. Will some other philanthropist please step forward and touch the pen?



Stovaine is the name of the "wonderful new anaesthetic" which the inventor and several *prominent physicians* declare will make child bearing a regular lark. It is too bad the experiment cannot be tried on the promoters in such cases.



Dr. Edwin B. Dimond, 426 Majestic Building, is the proud papa for fair. A young son and heir was presented him Thanksgiving day, and THE CRITIQUE is pleased to say both mother and son are thriving. As to the doctor? Well, he is able to sit up and observe the scenery.



According to the secular press, King Leopold's last words were, "I am suffocating," so the doctors in attendance gave him a shot of morphine. Crown Prince Albert, who succeeds the late king, can thank the doctors for hurrying matters, that is, of course, if he feels that way about it.



THE CRITIQUE hopes members of the American Institute of Homeopathy will decide to come Colorado way *en route* to Los Angeles. Insofar as the railroad accommodations are concerned there are none better than those afforded by either of the numerous lines diverging from Denver.



Dr. A. E. Bonesteel ran over H. C. Hill at the corner of Broadway and Sixteenth the 15th of last month. The doctor was driving in his automobile at the time and at the coroner's inquest held after the man died at the County hospital, it was shown that the deceased was entirely to blame.



At the request of the public prosecutor of Burlington County, N. J., a man and wife who were indicted for manslaughter in May, 1908, for refusing to summon a physician for their seven-year-old son, who was ill with pneumonia—preferring to rely upon Christian Science—were discharged.



At the close of the big game season in New England it is figured thirty-four lost their lives. Besides this a score or more have been seriously injured and are not expected to recover; two will lose their sight, while a half-dozen more will be maimed for life. Why not try working in a powder factory instead of being so gamey?



Colorado can furnish most anything. The latest demand upon its resourcefulness is for a superintendent of the insane asylum at La Porte, Indiana. R. F. Darnell, of Pueblo, is the aspirant for this position, and as he has "strong backing," there is some show of his landing the plum, provided the board of trustees elects to go outside the state to fill the position.



George J. Kindel, the rate buster of Colorado, takes a crack at other nuisances occasionally. The direct manner in which he expressed his opinion of the recent "Tuberculosis Exhibit" which held forth in Denver, leads one to think that the aforesaid exhibit needed a good formaldehyde

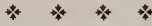
bath. Isn't it funny that these alleged protectors of the public need something besides a bodyguard?



Mrs. John H. Fertig died in Milwaukee, Wis., December 8th, owing to the carelessness of surgeons, some two years ago, in leaving a sponge sewed up in her body following an operation. Owing to the forgetfulness on part of the surgeons, a second operation was performed. One year later portions of the sponge worked out through the woman's side, and a third operation was considered necessary. It was a case of three times and out, as the woman died. The only redeeming feature connected with the demise is the fact of its no doubt eliminating the necessity for *another* operation.



If the *Pacific Coast Journal of Homeopathy* is to be taken seriously, and we have always found it so, Oregon doctors are placing a much greater dependence upon apple raising for a future financial fortification against want than the active practice of medicine. Wisenheimers!



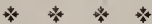
That entertainment committee for the A. I. H. meeting in Los Angeles, July of this year, is not allowing any grass to grow under its members' feet. They have "commenced to begin" business at this early stage of the game, and members from the effete east and elsewhere may expect full returns for any outlay they make in getting to the aforesaid meeting. A communication in this issue tells the tale to a limited extent.



Dr. David H. Beckwith, one of the best known homeopathic physicians in the state of Ohio, and who for fifty years was a professor in Cleveland Homeopathic Medical College, died in his home town November 19th, at the age of eighty-five. He was an ex-president of the American Institute, having held that position in 1871, and was a member of that organization since 1865. He was beloved and honored by all who were fortunate to know him. Peace to his ashes.



Dr. W. C. Lucas, formerly interne at the Park Avenue, *nee* Denver Homeopathic hospital, has been elected resident physician of the Maryland Homeopathic hospital, Baltimore Maryland. Dr. Lucas retired from the Park Avenue institution nearly a year ago, and started a practice in one of the mining towns of this state, where he worked up a good business, and was much respected in the community. THE CRITIQUE wishes him all manner of success in his new position.



The plush cushions in Pullman cars are again receiving just (?) condemnation as germ breeders. This is mostly from the secular press and certain members of the medical profession who are constantly on the lookout for a little free advertising. If half the hospitals in the country were cleaned as often and as thoroughly as the average plush seated Pullman car, there would be less comment regarding these institutions, and the Pullman fare would be just about the same. Don't worry!



Several Denver physicians have incorporated themselves into a dispensary association to be known as the "Denver Polyclinic Association." The object is humanitarian, the incorporation papers state, to provide treatment for those who are unable to pay for the private services of a physician, and to give postgraduate and other instruction by teaching and training doctors and medical and dental students. Drs. Peck, Locke and Worth, well known homeopaths of this city, are members of the association.



CHICAGO LETTER.

Dr. Lewis C. Dick, Hahn. '09, has located at Creton, Iowa.

Dr. Susan F. Laird has completed her service as interne in Hahnemann hospital.

Dr. R. L. Barr, Hahn. '08, is located in Rochester, N. Y. He was formerly in Holly, N. Y.

Dr. Paul Pollock, of the Hering College faculty, is spending some time in the European clinics.

Dr. C. S. Tisdale, Hahn. '09, is now located in Chicago Heights, Ill., and reports a good beginning.

Dr. R. J. Ives, Hahn. '08, has changed his location from Bently, Kansas, to his home town, Stuttgart, Ark.

Dr. Nellie G. Harter, Hahn. '08, is now an interne in the Anna May Memorial hospital, Spring Lake, N. J.

Dr. B. Thurber Guild, Hahn. '08, is now located at Shelburne Falls, Mass., having recently moved there from Ridgewood, N. J.

Dr. Harry C. Wright, Hahn. '07, DeKalb, Ill., was a recent visitor at the Hahnemann hospital, bringing a surgical case with him.

Dr. Vance Rawson, of Danville, Ky., was a recent Chicago visitor, renewing old acquaintances. The doctor likes his Kentucky location.

The nurses of Hahnemann hospital gave a dance on Thursday evening, December 16, which was enjoyed by their many friends who attended.

Dr. E. E. Wilcox, Hahn. '08, after serving a year as interne in Hahnemann hospital Chicago, has located on the corner of Forty-third Street and Calumet Avenue, Chicago.

Dr. A. E. Austin, of New York City, was a recent visitor in Chicago. Dr. Austin took special work here in 1905, and returns occasionally to see his friends and get more homeopathic teaching.

The December meeting of the Englewood Homeopathic Medical Society was held at the home of Dr. Gurney on Tuesday evening, December 14th. A very interesting paper was presented by Dr. Guy Cushing.

On Thursday, November 18th, the meeting of the Chicago Homeopathic Medical Society was held. Dr. C. G. Fellows' paper, "Some Medical Frauds," and Dr. H. Farrington's paper, "Cure vs. Recovery," were very interesting and instructive.

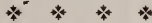
On Thursday, December 16th, at the meeting of the Chicago Homeopathic Medical Society, a paper by Dr. C. E. Kalke, "Recent Discoveries in Surgery," and one by Dr. J. B. S. King, "Dangers Following Suppression," were presented. Both were interesting and instructive.

Dr. J. J. Thompson, for many years a member of the faculty of the Hering Medical College, died on November 22nd, following a short illness. He was a graduate of the Chicago Homeopathic Medical College, 1888. Hering College and the profession have lost a valuable worker from their ranks.

The December meeting of the Regular Homeopathic Medical Society was held Tuesday, December 7th. A paper by Dr. G. E. Dienst, of Aurora, Ill., "The Medical and Surgical Phases of Tuberculosis," was presented and discussed. Also a paper by Dr. H. R. Chislett, "Medical and Surgical Aspect of Cancer."

READING NOTICES

"DR. GIVENS' SANITARIUM." Another year and the eighteenth has passed at Dr. Givens' Sanitarium for Nervous and Mental Diseases at Stamford Connecticut. Another year of good results in the way of cures commends this sanitarium to physicians who have patients desiring the special treatment and advantages offered.



THE SOOTHING OF A RASPING COUGH. The soothing of the rasping cough of bronchitis, without resorting to some form of opium, is one of the features of daily practice that will contribute to a doctor's success. For relieving this harassing cough, Cordial of the Extract of Cod Liver Oil Compound (Hagee) is being largely prescribed, and with the fullest measure of success. It is particularly adapted for use in these bronchial catarrhs, not alone for its relief of the urgent symptoms, but also by reason of its protecting influence against further extension of the bronchial inflammation and chronicity.

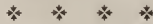


BROMIDIA. Of all the many hypnotics at the command of the medical profession there is none that gives as uniform satisfaction under all conditions as Bromidia. As has been previously stated, the sleep produced is of a true physiological character. It is dreamless, and the patient awakes refreshed and vigorous. In proper dosage, bromidia is perfectly safe and does not depress the heart. A teaspoonful should be given in water and, if necessary, repeated hourly until four doses have been administered. It is needless to state that, in order that maximum effect may be obtained from the initial dose, the patient should be placed under conditions favorable to the induction of sleep.



CONSTANTLY FAVORABLE RESULTS. Dr. John Arthur Diggle, Med. Ref. Globe Accident Assur. Soc. of London, England, in writing of antikamnia tablets, says: I may state at the outset that they satisfied me well and the constantly recurring favorable reports prove that most who have given them a fair and thorough trial are quite satisfied with the results which have followed. They seem to be absolutely safe in exhibition and to have no effect whatever on the healthy human organism. Such a safe analgesic and antipyretic is a perfect God-send in these days of "nerves," and all the resultant neuralgias developed under our civilization. In the cases in which I have used antikamnia tablets I have never noticed any ill effects. As an analgesic, in my experience, the sooner the remedy is administered after the onset of pain, the quicker the relief, and the smaller the amount of the drug required; this would follow almost of course, but I think the oftener the dose is repeated in judiciously small doses, the better the result, as compared with larger doses less frequently given. Given in such doses, and at such intervals, I have found antikamnia tablets most useful in neuralgic cases and acute rheumatic attacks, and in sudden nervous attacks with severe pain. In case of paraplegia, in which the suffering from pain in the paralyzed limbs was agonizing, and had only yielded before, to gradually increasing doses of morphine hypodermically, their effect was, and continued to be, good. In a case of typhlitis both the analgesic and antipyretic properties were signally shown. In some cases of dysmennorrhoea one or two tablets relieved the pain, and the after use of caulcorea for a while, prevented its return. The rapidity with which they acted in some cases of migraine, seemed simply marvelous.

THE "PERSONALLY CONDUCTED" SCHOOL GIRL. In a recent issue of one of our prominent medical journals appeared an article from the pen of a well known pediatricist, entitled "The Personally Conducted Baby." While the importance of a sedulous and careful attention to the needs of the growing infant cannot be overestimated, it is equally important that the physical requirements of the adolescent school girl should be carefully looked after during the impressionable and formative period of life incident to the initiation of the menstrual epoch, "The Personally Conducted School Girl" is more likely to successfully weather the stress and strain of the modern educational system than one who is not so carefully guarded. Regularity and system are the essential requisites of success. Hurried and irregular meals, the eating of an undue amount of pickles and condiments, too frequent indulgence in candies and sweets, should not be allowed. Habitual constipation should not be allowed to continue, and sufficient exercise in the open air should be insisted upon. The bedroom window should always be freely opened at night, and late hours and exciting entertainments should be avoided. In spite of all hygienic precautions, however, the school girl is likely to become more or less chlor-anemic. In such cases the irritant forms of iron are worse than useless, because of their disturbing effect upon digestion and their constipating action. Pepto-Mangan (Gude) is free from these disadvantages and can be given as long as necessary without producing intolerance or gastrointestinal derangement. Periodical blood examinations will evidence the prompt and progressive increase of red cells and hemoglobin, and the gradual return of color will show the general improvement of the patient.



DOUBLE PNEUMONIA Mrs. E. D., aged 74 years, of New Durham, N. J., was taken ill in February, 1905. A local physician diagnosed the case as one of acute lobar pneumonia (both lungs) with grave complications. The third day found the patient much worse, and her attending physician and a consultant said there was no possible chance for recovery. At this critical moment, I was called in after the other medical men were out of the case.

I found the patient unconscious with marked consolidation of both lungs, stertorous breathing, temperature 105-3/5°, pulse 142—feeble and irregular, respiration 35, and every indication of complete prostration. The previous treatment had consisted of an ordinary fever and cough mixture. French brandy at frequent intervals, and the local application of flaxseed to the chest. Little or no nourishment had been taken.

I suggested the immediate discontinuance of the flaxseed, which apparently had no effect, but was merely sapping the little vitality which remained.

My treatment was as follows:

The immediate substitution of Antiphlogistine in place of flaxseed to the thorax, front, back and sides at intervals of eight to ten hours, and hypodermics of digitaline and whiskey at proper intervals.

The following morning found the patient slightly improved, fever 104°, respiration 28, pulse 132, and still unconscious. I was delighted, however, to find that ten hours afterward she had regained consciousness and that the general symptoms were still further improved.

I then ordered nourishment in the form of milk, broths, etc., and the addition of aconite to the treatment. From that time on the patient continued to improve daily with no further aggravation of the symptoms, and at the expiration of two weeks she had quite recovered.

While I am willing to give the digitaline, whiskey, aconite and nourishment proper credit for their part of the work, I am thoroughly convinced, and do not believe I could not be persuaded to the contrary, that the persistent and proper use of Antiphlogistine was responsible for the woman's recovery.—H. S. Emerson, M. D., of Paterson, N. J.



ORIGINAL
ARTICLES

THE KEY TO SUCCESSFUL PRESCRIBING.

LETTERS TO A YOUNG HOMEOPATH.—LETTER NO. 4.

Adaptation—Finding the Indicated Medicine.



MY DEAR DOCTOR: Hahnemann says: “If he knows how to adapt, according to clearly defined principles, what is curative in medicines to what he has discovered to be undoubtedly morbid in the patient, so that the recovery must ensue—to adapt it, as well in respect to the suitability of the medicine most appropriate according to its mode of action to the case before him (choice of the remedy, the medicine indicated), as also in respect to the exact mode of preparation and quantity of it required (proper dose), and the proper period for repeating the dose.”

I now call your attention to *adaptation*. Observe the master was careful to say: “If he knows how to adapt, according to clearly defined principles, what is curative in medicine to what he has discovered to be undoubtedly morbid in the patient.” Not to that which he has *imagined* to be morbid; not that which is morbid as modified by a doubt, but that which is “*undoubtedly*” morbid, and which he has “*discovered*.” Of course, such discovery is only possible because of the symptoms. They are the outward portrait of the spiritual man; and it is the *spiritual man* who says, “I am sick.”

We are to adapt the curative principle of the indicated medicine to what we have “*discovered*” to be morbid; and not only so, but to that which we have discovered to be “*undoubtedly* morbid.” I bear down hard with my pencil here, because I fear you do not realize how much this means. Empty speculation and hypotheses concerning the vital processes in the invisible interior; the physiological “*cause*” and the pathological “*seat*” of a symptom, can not always be “*discovered*.” A physician only wastes his time and his energy in pursuing such theoretical speculations; an *ignis fatuus*.

In former letters I quoted from two writers who misrepresented pure homeopathy at this point; and now, again,

I call your particular attention to this traditional doctrine. Even if doctors could agree upon the pathology of a given case, they would be no better off as to a cure; for the totality of the symptoms, which we never have to guess, is the *true unfailing outward reflection* of disease within. A pathological condition which can be seen should be classed among the objective symptoms; and pathology which cannot be seen cannot interest the true homeopathic prescriber in the least. If the theory I am exposing were only held by one here and there, then we could afford to pass it by in silence; but the truth is it is old-school doctrine and borrowed by the great mass of doctors who speak of Hahnemannians with a sneer and a curl of the lip—that is to say, by the *mixed breed*. Only last evening I received my *Medical Advance* for September. Now the *Advance* is, in the main, a homeopathic journal and usually contains some mighty good stuff. But in this number a writer who is given a conspicuous place has this to say: “Objective symptoms, when of proper quality, are always most reliable because they can seldom be feigned or exaggerated and are never imaginary.” Note his old-school tendency to ignore *what the patient says*. Remember Hahnemann says: “We should listen particularly to the patient’s description of his sufferings and sensations, and attach credence especially to *his own expressions* wherewith he endeavors to make us understand his ailments—because in the mouths of his friends and attendants they are usually altered and erroneously stated.” Whenever a physician betrays that “regular” trait of disregarding *what the patient says*, or at the best, writing it down with suspicion as being “feigned or exaggerated,” you can depend upon it he is a long way from Hahnemannian Homeopathy. Hahnemann did not talk that way. However, he did warn us that in the investigation of the “true, complete picture and its peculiarities, especial circumspection, tact, knowledge of human nature, caution in conducting the inquiry and patience in an eminent degree,” are required. (Par. 98.)

This *Advance* writer says: “Careful inspection, thorough physical examination, and accurate diagnosis, are essential requisites of a complete totality of symptoms, and without such we can never thoroughly understand the case nor intelligently analyse, group, and rank the symptoms.” The latter business—analysing, grouping and ranking symptoms, is just where we go astray. Such is necessary in order to a diagnosis, but not in order to a correct homeopathic pre-

scription. *A safe and scientific homeopathic prescription is never contingent upon theoretical speculation,*" and we can rank symptoms, as did Bonninghausen, without this.

Physicians differ greatly in analysing, grouping and ranking symptoms, and in the same ratio they differ in "diagnosis." I will concede that a diagnosis is necessary in order to decide whether a case of sickness should be classified in the field of medicine, the province of manual surgery, or the domain of hygiene. In cases of spasms and certain nervous disorders, there should be instituted a searching examination for phimosis, adhesions about the clitoris, cicatricial cervical plug, rectal complications, retroflexion below the promontory, etc. Errors in diet are the source of much of the medical man's practice, and a great many serious cases may be successfully disposed of by correcting those errors—without the aid of therapeutics at all. These come under the head of *hygiene*. So the competent homeopathic physician stands as censor, and he says: "You belong in the department of *hygiene*;" and, "You would better consult a surgeon;" and, "You can be cured by careful homeopathic therapeutics, and in no other way." All physicians will agree to this division, but "regulars" and *mongrels* go further than this. They seek the pathology in order to make a diagnosis, and on the diagnosis base their prescriptions. This I deny with all the vehemence of my nature.

The science of *pathology* is in no sense the basis or foundation of the science of *therapeutics*. That is what I want you to understand. The doctor last quoted is a stranger to me. He is a good writer and no doubt a good man. I am making no attack upon any man, but upon *doctrines*—doctrines which I conceive to be incompatible with pure homeopathy. While I wish to teach you to recognize the genuine, I would also have you learn to detect the *spurious*.

I have spoken of "ear-marks." Quoting from the same writer, permit me to point out a few: "The simillimum for certain heart lesions is crude digitalis and failure to recognize this fact will result in failure to relieve the patient." Note, please: "*Crude digitalis*," and note what he says about "failure." Now, my young doctor, let me say to you that no true homeopath from Hahnemann down *talks that way*. Again, "The same remedy failed in all potencies higher than 4 x—the tincture in water giving the quickest curative effect." He says this was a chronic case of several years' standing. "*The tincture in water*"! Did you ever read any-

thing like that from Hahnemann, Bonninghausen, Gross, Dunham, Hering, Kent, *et al?* Never! When Hahnemann refers to the time he even used *low potencies*, he says it was "from not knowing any better." If he could but know that his professed adherents are now using "*the tincture*," he would turn over in his grave! But here is another one: "A lady whose only discoverable symptoms, after repeated examination, were such as are common to thyroid atrophy—gross obesity following soon after cessation of menses in her thirty-fifth year, weakness, dyspnoea on exertion, mental dullness, etc., secured immediate relief of all symptoms and began to gradually lose weight after the administration of thyroid extract, *five grains daily*, prescribed *on the diagnosis* because there was absolutely nothing uncommon or individualistic upon which to base any other prescription." (A homeopath would have developed the case.) Why these apologetic words if "thyroid extract five grains daily," was the *simillium*! Isopathy is not homeopathy.

A chronic recurrent liver congestion will have to have a better remedy than liver! The *Medical Advance* will have to trot out something more homeopathic than the article from which these extracts are taken, if it is to perpetuate the memory of old Dr. Allen and the homeopathy he taught.

Now, my dear doctor, I have gone somewhat into detail to show you where prescribing on the diagnosis leads. It always points to pathology, to the "seat" of symptoms and to crude medicines and low potencies; and it always involves speculation and mysticism. Such doctors want to be *profound* and get down deeper than the mere symptoms, know the "seat" and the "cause" and the "*pathological condition*." In contrast to all this it will be refreshing to hear Hahnemann: "When a patient has been cured of his disease" (observe, "*his disease*") "by a true physician, in such a manner that no trace of the disease, no morbid symptom, remains, and all the signs of health have permanently returned, how can any one, without offering an insult to common sense, affirm that in such an individual the whole bodily disease still remains in the interior? And yet the chief of the old-school, Hufeland, asserts this in the following words: "Homeopathy can remove the symptoms, but the disease remains." Again: "The physician whose researches are directed towards the hidden relations in the interior of the organism, may daily err; but the homeopathist who grasps with requisite carefulness the whole group of symptoms, pos-

sesses a sure guide; and if he succeeds in removing the whole group of symptoms he has likewise most assuredly destroyed the internal, hidden cause of the disease." Again: "Is not, then, that which is cognizable by the senses in diseases through the phenomena it displays, the disease itself in the eyes of the physician, since he never can see the spiritual being that produces the disease, the vital force? Nor is it necessary that he should see it, but only that he should ascertain its morbid actions, in order that he may thereby be enabled to cure the disease. What else will the old-school search for in the hidden interior of the organism, as a *prima causa morbi*, whilst they reject as an object of cure and contemptuously despise the sensible and manifest representation of the disease, the symptoms that so plainly address themselves to us? What else do they wish to cure in disease, but these?" So you will observe that our task, as homeopathic physicians, consists in adapting what is curative in medicine to *the totality of the symptoms, the "pure picture," the image, as a true, unerring and complete representation of the patient's disease in the hidden interior of his organism.*

This is one of the most important lessons which the beginner has to learn; and if you thoroughly understand this and make it a governing principle in your daily practice, you can congratulate yourself that you are on the highway to the citadel of homeopathy.

What is curative in an individual medicine, is seen in the image of artificial sickness which it has produced. What is to be cured in the patient to be treated, is seen in the totality of the symptoms, in the image of natural sickness displayed in the case. Now comes the adaptation. This adaptation Hahnemann divides into the following parts: (1) The medicine indicated. (2) Mode of preparation. (3) Quantity required. (4) Proper period for repeating the dose. All this is comprehended in the word *adaptation*. We will now examine these one by one.

1—The Medicine Indicated, Choice of the Remedy.

After clearly perceiving what is to be cured in an individual case of disease, and after clearly perceiving what is curative in each individual medicine, having viewed the whole list of well tested drugs, the first essential to successful prescribing is *to make proper choice of the remedy*. This is not all that is to be considered at that juncture, as some imagine, but it is most vital. As before intimated, no man can cure

with the wrong remedy. He cannot give it strong enough, crude enough, repeat it often enough, or prescribe it in quantities large enough, to cure. No use in talking about "potency," size of the dose, or the proper interval for repeating, until you are *sure* you have chosen the right remedy.

To discover a "keynote" of some remedy, and hit upon that drug only because of that fact, is a very slipshod, unscientific and disappointing method. It is rare, indeed, that only one drug has such keynote. Let us suppose a case: Patient has chill *with great thirst*. "Ah," you say, "Natrum mur." But you seem to forget that other remedies have that. Then you proceed: *Heat, without thirst*. Now you say, "That can not be Natrum mur; it must be Nux vomica." Again you forget that other remedies have *heat without thirst*, besides Nux vomica. So you investigate again: *During heat, external warmth is intolerable*. "Well! well!" you say, "It can not be Nux vomica, for Nux must be covered up as much during the heat as during the cold stage; at its highest degree, if he lifts the cover or turns under the cover, it makes him shudder. *That is Nux vomica*. So you look again and sum it up this way: Chill, *with great thirst. Relieved at once in warm room or by a hot stove. Intense heat, mostly external, without thirst. External warmth is intolerable. Tongue, clean. Sweat, without thirst.*

Now you draw the picture, the image: *Thirst, during chill and in no other stage. Chill relieved by external heat. Heat without thirst and aggravated by external covering. Sweat without thirst. Tongue clean.*

Now you ask, "What drug produced a similar image when tested in the healthy human body?" The answer is, Ignatia. And let me assure, my dear doctor, when you find that image in natural sickness, *Ignatia will cure, however small the dose*; and it will cure radically and permanently. Moreover, you will not have to follow up the seventh, fourteenth and twenty-first days and keep pouring in this medicine as you would have to do if you were only *suppressing* the chill. When the curative remedy has been chosen and the patient misses his chill, *that is the end of it*. He needs no more medicine to "keep off" the chill. *Art has displayed its skill and science her power*. And you straighten up with an importance and a dignity and a satisfaction which equip you for the next case. But as you begin to note the symptoms of the next case, *do not let Ignatia enter your head!* Ninety-nine chances in a hundred it will be some other

remedy this time; but what remedy, no man can tell *a priori*.

Get your *image*, then find the *drug image* to match it. That is the way to cure, and the *only way*. That is a part of the key to successful prescribing, a very essential part, too, but still only a *part*. But you ask: "How can I find the right remedy for each case, when every medicine in the *materia medica* seems to have some of the symptoms?" I answer: You find the indicated medicine for each patient, and for the same patient at different times, by using a reliable repertory, Kent's or Knerr's, *as an index*. By the process of *exclusion* you sift the *materia medica* down to two or three remedies. Then, take Gross' Comparative *Materia Medica* and compare them. He will make the lines between them look like ten-acre fields. Then, when you think you have found the indicated remedy, take a reliable *materia medica*—Hahnemann, Kent or Hering, and read the proving *most critically* and see if you can perceive the *image* of your patient's sickness. Now I imagine you say, right out in meein': "That takes too much time." Well, my dear young doctor, I am not giving you instructions in commercial business, but telling you *how to cure your patients*; and there is *no other way!* When you learn how to cure your patients, judiciously and rationally, then you can name your own fee. To illustrate: I positively know that true Hahnemannian physicians get \$100.00 for properly curing a syphilitic chancre, and hence the whole disease, by merely "putting a little sugar on the tongue," when at the same time there are fifty hungry allopaths and many *mongrels* who would *promise* a cure for \$10.00. Why is this? Because the people are not all fools, and such patients have learned the difference between a *cure* and a suppression. So do not let them fool you by their old assertion—their stock in trade—that "Hahnemannian physicians have nothing to do." They are the only physicians in the several communities who have an *abiding* individuality; who have something to offer the public which *no one else can give*. So let your life work, your constant thought and your undivided study be to "restore the sick to health, to cure, as it is termed." Hahnemann says this is your *only* mission. Once you become proficient in this, glory and money and due recognition will follow.

How to Make Choice of the Remedy.

That is the important matter which we are now considering. No two patients are sick alike, and no two medi-

cines produce the same pathogenesis. In each individual disease there is *something* characteristic, *individualizing*; and in the proving of each drug there is something characteristic, *individualizing*. Now that which is individualizing in the drug must be *similar* to that which is individualizing in the patient. In each case the odd, peculiar, uncommon symptoms form the *image*; and when image and image, likeness and likeness, the pure picture and pure picture are matched by the law of similars, the right remedy has been chosen.

Listen to the great teacher: "In this search for a homeopathic specific remedy, that is to say, in this comparison of the collective symptoms of the natural disease with the list of symptoms of known medicines, in order to find among these an artificial morbid agent corresponding by similarity to the disease to be cured, the *more striking, singular, uncommon and peculiar* (characteristic) signs and symptoms of the case of disease are chiefly and most solely to be kept in view; for it is more particularly these that very similar ones in the list of symptoms of the selected medicine must correspond to, in order to constitute it the most suitable for effecting the cure. The more general and undefined symptoms: Loss of appetite, headache, debility, restless sleep, discomfort, and so forth, demand but little attention when that vague and indefinite character, if they can not be more accurately described, as symptoms of such a general nature are observed in almost every disease and from almost every drug." (Par. 153.)

Again he says: "If the antitype constructed from the list of symptoms of the most suitable medicine contain those peculiar, uncommon, singular and distinguishing (characteristic) symptoms, which are to be met with in the disease to be cured in the greatest number and in the greatest similarity, *this* medicine is the most appropriate homeopathic specific remedy for *this* morbid state."

Here the master of healing art places before us the *image* of individual sickness, composed of the "*more striking, singular, uncommon and peculiar* signs and symptoms; and this he regards as a *type*. Then, out of the proving of the indicated medicine, the symptoms of artificial sickness which it has produced in the healthy human body, he asks us to construct "the antitype;" and he assures us that this antitype must consist of "*those peculiar, uncommon, singular and distinguishing* symptoms" characteristic of the drug selected, and "which are to be met with in the disease to be cured."

Now, my dear doctor, the key to successful prescribing, so far as the choice of the medicine is concerned, is nowhere more beautifully, accurately and plainly revealed than in the foregoing. In "taking the case;" in perceiving what is to be cured in an individual patient, *construct the image of his sickness out of those individual symptoms which are distinguishing*; and in *constructing the image of artificial sickness* out of the symptoms of the drug, choose those signs and symptoms which are *distinguishing*. If you ever saw the nut called homeopathy, *this is the kernel*. This is the key which unlocks the secret of the homeopathic healing art, so far as finding the right medicine is concerned.

Another point I call your attention to in this connection: Hahnemann affirms that when a remedy is chosen by the foregoing method, that medicine "is the most appropriate homeopathic specific remedy for *this morbid state*."

The idea of any medicine or combination of medicines being a "specific" for a disease *per se*, like anti-toxin for diphtheria, is the boldest affrontery, the most bald-headed quackery that ever deceived a sick public. The "specific" remedy can only be chosen for each individual patient; for "*this morbid state*" as found in each patient and in the same patient at different times. Until you are rooted and grounded in *this truth*, my dear doctor, you will never be a homeopath of the Hahnemannian type, and you never can enjoy the satisfaction of possessing the key to successful prescribing. If a so-called disease were like the iron bedstead—just so long, so wide, so high and never deviated, always possessing the same image, the same characteristics in all patients wherever found; and you knew of a medicine or combination of medicines, which, when tested in the healthy human organism, produced a *similar* image, then such preparation would become *the specific* for that disease in all patients. How easy the practice of medicine would then be.

But such is not true of any so-called disease. On the contrary we have to sift and cull and differentiate in each individual sickness until the *singular, uncommon and distinguishing* symptoms are found which constitute *the image* of that case of natural sickness; and then we have to pick up the provings of drugs and sift and cull and differentiate in each individual medicine until the *peculiar, uncommon, singular and distinguishing* symptoms are found which constitute *the image* of that artificial sickness. Then we must see to

it that the two images are *similar*. And let me assure you, my dear doctor; let me fill your soul with the conviction; let me impress upon your mind this truth so indelibly that you will never forget it—*there is no other way*. The “short cuts” to homeopathy were all made by Hahnemann’s “new mongrel sect;” and they will make mongrels of all who follow them. But brain power coupled with drug power, skill linked with science, and patience, perseverance and loyalty to Hahnemann, will bring you out more than conqueror. I repeat: *There is no other way*—no other way of perceiving what is morbid in each individual case of disease except by the totality of the symptoms; no other way of perceiving the curative power of medicines except to test them in the healthy human body; no other way of finding the indicated medicine except by constructing the image of natural disease by culling out those symptoms which “are chiefly and most solely to be kept in view,” namely, the *more striking, singular, uncommon and peculiar* signs and symptoms of the case to be cured; and then by building the antitype out of the *peculiar, uncommon, singular and distinguishing* symptoms of the drug proving which shall form the image of artificial disease, in each individual drug, and then adapt the one to the other by the unfailing law of *similars*. No other way, sir; positively *no other way*.

The importance of this subject impels me to continue the investigation in my next letter.

The subhead shall be: *Finding the Indicated Medicine. Illustrative Cases*. Believing in you as a growing homeopath, I am,

Yours faithfully,

J. C. HOLLOWAY, M. D. Galesburg, Ill.



THE MEDICAL AND SURGICAL PHASES OF TUBERCULOSIS.

By G. E. DIENST, M. D.

MEDICINE has to do, in great part, with disease; surgery has to do in great part, with the *products* of disease. The individual and his disease becomes medical as soon as symptoms appear, and surgical when disease has produced pathology. Tuberculosis being a disease expressed in various ways long before pathology is produced it comes, therefore, predominantly in the sphere of medicine. Medicine and its

adjuncts are imperative from the first expression of the disease; surgery is of no value until products of disease are formed. The proper employment of medicine and its adjuncts often prevents products. Hence, it naturally follows that, the proper and timely employment of medicine and its adjuncts necessarily prevents the employment of surgery. At all events, the predominant sphere of surgery in tuberculosis is to remove pathology or change its form; the sphere of medicine is to remove disease and prevent pathology.

To make our subject and all that it involves intelligible, it is necessary to ask—*what is tuberculosis?* Tuberculosis is a constitutional disease, characterized by constitutional symptoms and changes. Its etiology is multiform, for heredity, environment, food, clothing, atmospheric conditions, infection, drugs, vocations, suppression of exanthema, etc., play an important role in the realm of causation. It is not necessary, in the brief time allotted this paper, to discuss these several etiological facts.

The basilar elements of tuberculosis are: (1) LANGUOR; (2) EMACIATION; (3) TEMPERATURE.

Together with these basilar elements there are other symptoms, more or less pronounced, according to the idiosyncrasy of the individual, his psychical and physical self.

The medical phase is interrogative by inference, and asks—what has medicine to do with tuberculosis? Almost everything. Adjuncts are useful, medicine is imperative. Why? Once we get the symptoms, the causes, the contributing agencies, the peculiarities of the individual afflicted, we have the base for the selection of a remedy, commonly called the indicated remedy, and this remedy, indicated by the totality of symptoms and the conditions present, administered in proper form and frequency, given in proper time, corrects the morbidity present and restores the individual to health.

Waiting for the development of the tubercular deposits, the incubation of tubercular bacilli, the production of pathological lesions and other visible products before making a physical or therapeutic diagnosis is a most dangerous procrastination, inexcusable neglect, and, in many instances an evidence of profound ignorance. Remedies are given for the cure of disease, and nowhere in life, is the use of the properly indicated remedy more necessary than in the prodromes and progress of tuberculosis. The argument against medicine

and reliance on adjuncts only in a true case of tuberculosis is a fraud.

To repeat, surgery can but remove the products of tuberculosis, which, at times is doubtless a rational procedure. Great care, however, is necessary; for in many apparent surgical cases, operative procedure has lowered the vital forces and hastened dissolution.

N. B. These are no quotations, no arguments, but are simple statements of facts as we see them, and we challenge contradiction.

81 Fox Street, Aurora, Ill.

(Read before the Regular and Chicago Homeopathic Societies, December 7, 1909.)



DEFECTIVE VISION IN SCHOOL CHILDREN.

BY E. G. WHINNA, M. D.

(Medical Inspector of Schools, Philadelphia, Pa.; Assistant Ophthalmologist to the West Philadelphia Homeopathic Hospital and Dispensary; Physician in Charge of the Philadelphia Home for Infants.)

YOUR CHILD cannot do good work in the school and be advanced as he should be, if he is unable to hear distinctly what the teacher says to the class, or if his vision is so poor that he is unable to see the work on the blackboard, or the letters in his books. Frequently the teacher has occasion to send a note home recommending that Johnnie have his eyes examined for glasses, as his vision is so poor that he cannot prepare his lessons properly, and she gets a reply like this, "There is nothing the matter with Johnnie's eyes. If he can't see, move his seat nearer the blackboard. If he does not learn his lessons, keep him in after school until he does learn them, that's what you are paid for."

I had occasion to examine two boys, who had been referred to me by the principal on account of defective vision. Upon examination I found that one of them could only see the first line on the card, and the other one could see only the second, whereas they should be able to see the eighth line at a distance of fifteen feet. I sent a note home stating the conditions as I found them, and the father sent word back that the boys could see well enough. It was only after my threatening to exclude them both from school that he consented to have their eyes examined for glasses, and then instead of sending them to an oculist or a hospital, he sent

them to an optician's store where the glasses were prescribed. Their vision, however, even after this inadequate treatment, was so much improved that they could read the sixth line from the top on the card, and their work in the classroom has improved accordingly. Sometime glasses are needed, even where the vision appears to be normal. This condition is known as eyestrain, and can only be detected and corrected by using a mydriatic to put the ciliary muscle at rest, so we can measure the latent refractive error. You know that some persons are made dizzy by looking from a height or inspecting a water fall; you have seen people made "sick at the stomach" by trying on glasses which gave relief to a friend. A "squint" in the eye is often due to some defect in the refraction, and will frequently disappear when the proper glasses are prescribed, without recourse to cutting the muscle. Did it ever occur to you that sight is the only special sense which we use constantly except during sleep? There is not a moment of the day when we are not acquiring visual impressions of some kind. Parents will frequently tell you how the child can see things with distinctness, which possibly they themselves cannot see at all; the idea seems absurd to them that the vision of the child is defective. The use of glasses seems unnecessary to them as long as the child can get along without them. In some cases no amount of explanation will persuade the parents to have a mydriatic used upon the child's eyes in order to decide the question of the existence of latent refractive error. There is a prejudice among some people against glasses because "a person becomes so dependent upon them when he once puts them on." This argument should be exactly reversed. Because nature becomes dependent upon a glass which gives relief and corrects an existing strain upon the eye, no time should be lost in affording this relief. Should a hip joint splint be avoided because the patient feels his dependence upon the splint? Should a child be allowed to go through life with a deformed eye simply because the defect is not apparent to himself or his friends? More harm is being done today to the community at large by this fallacious argument than is possible to compute. Thousands of sufferers from sick headache are today struggling along through life with an optical defect uncorrected, and in many instances, after costly experimentation with drugs, are left in despair of cure.

Philadelphia, Pa.

REMOVAL OF THE HEALTHY APPENDIX. In the discussion of a paper on appendicitis, presented at the meeting of the American Gynecological Society this past winter, many physicians objected to removing the appendix, unless it was diseased. Courier, of New York, said: "We should remove nothing but diseased tissues; that which is not diseased should be left." Peterson of Ann Arbor, said, "earlier in his practice in two hundred cases where he had opened the abdomen, the appendix was removed. In half of these cases only, the appendix was diseased." Later he refused to remove the appendix, except when it was plainly diseased, and in not one case in some years, in which he has adopted this course, has there been any subsequent disease in the appendix.

Baldy of Philadelphia invariably examines the appendix when the abdomen is opened, but has rarely found it diseased. Johnson of Washington lets a healthy appendix entirely alone. He sees no excuse for nor any ethical right to remove a healthy appendix.—*Ellingwood's Therapist*.



THE HOMEOPATHIC CARD SERIES FOR THE FAMILY.

VOLUME I.

GALESBURG, ILLINOIS.

NUMBER I.

January, 1910.

NOTICE: THE HOMEOPATHIC CARD SERIES will appear monthly. These cards are designed to promote the education of my patrons in homeopathy as taught and practiced by its founder, Samuel Hahnemann. Motto: *Imitate the founder with exactness.*

Fellow physicians will be supplied with any number desired for any given month, at one cent each, postage prepaid. Orders must be in by the last day of preceding month.

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151 E. Main St., Galesburg, Illinois.

**Hand this to your neighbor and ask him to do likewise.*

The foregoing is the exact heading of all the series; then follows a special topic for each month. For January: "HOMEOPATHY AND HOMEOPATHISTS." Any doctor who orders 200 any given month may have the word "over" and his name and office address on the other side, for 75 cents extra—actual cost. Enclose two cent stamp for January issue.



SELECTED



IRIS VERSICOLOR. A. McNEIL, M. D., (*Homeopathic Physician*). This drug has been lauded as a specific for sick headache. Beware of this and all such delusions. There is no specific for disease, but every drug is a specific for a certain group of symptoms, and I will endeavor to show those that are curable by iris.

It is indicated in sick headache which begins with a blur before the eyes. Kali bichrom. cures blindness followed by violent headache; the vision returns as the headache increases. Gelsemium also has headache preceded by blindness. It cures another form of headache, in which there is dull throbbing or shooting in the right side of forehead, attended by nausea, is worse toward evening, from rest, cold air, and coughing, and is ameliorated by moderate motion. Ferrum aceticum is somewhat like it, being aggravated by moderate motion and relieved by continued hard exercise in its headaches and other forms and complaints, as, for instance, asthma relieved by dancing is cured by it. Iris has a headache of sharp, cutting pains of short duration, and changing location often.

Iris is to be thought of when the mouth and tongue feel as though they had been scalded; apis and sepia also; while with sanguinaria the tongue alone feels as if scalded. Iris, with many other remedies, has salivation, but it has a symptom accompanying which differentiates it from that of all other drugs—viz: the gums and tongue feel as if covered with a greasy substance. This peculiar feeling should be borne in mind in gastric conditions, including sick headaches.

Iris is indicated in any of the diseases of the throat, including diphtheria, when it burns and smarts, with a feeling of enlargement, as if it were a burning cavern.

We should remember this remedy when milk disagrees, it becomes sour and is thrown up. In aethusa, the milk comes up in clots, and the vomiting of milk which is characteristic of mercurius is, like that of iris, sour.

Iris has a large field of usefulness in gastric derangements. It is useful in nausea and vomiting of sour food (calc. carb. and chamom.), the whole person smells sour.

Hyperic., magnesia carb., rheum and sulphuric acid all have the sour smell of the person. It is indicated in vomiting of thin, watery fluid of an exceedingly sour taste.

Iris is curative in diarrhea of watery stools, the anus feels on fire; this burning may be either at the anus, or it may extend through the whole alimentary canal, from the mouth. Arsenicum is also characterized by this burning at the anus, but the other symptoms of these drugs are too different to embarrass you in your selection.—*The Hahnemannian Monthly*.



PULSATILLA. Let me call to your attention a peculiar personage, namely, a pulsatilla patient. Most likely the first thought that enters your mind is that there is a woman in the case. This is true, but this one is different from most women. She is mild and tearful, she has sandy hair and a very light complexion, she is young, just about the age of puberty, she is a great believer in fresh air, in fact she is always out of doors and always walking.

This is one of those nervous changeable women and as a rule she is mild and tearful, but at times she can be very cross and irritable, she is easily led to do right or wrong.

If you should call on her during attacks of any kind, you will most likely find her sitting in one corner brooding over her trouble and if you should happen to ask her a question, it is not likely that you will get an answer, this is one of those religious freaks, that will tell you she has sinned away her day of grace.

This very same woman objects very seriously to getting married, she says it is wrong, but if by chance she does get married and becomes pregnant she will have all kinds of puerperal symptoms especially those of insanity, she weeps and bemoans her fate by the hour and nothing will pacify her.

It may seem strange but every complaint that she falls heir to, no matter of what nature, will be accompanied by either some stomach or menstrual disorder, and she will say that fresh air and slow motion give her great relief.

She is subject to severe nervous chills especially when in an overheated room, she is one person that can not stand heat of any kind, even when eating she always selects cold food for she has learned from experience that as soon as hot foods are taken she will vomit, but cold foods agree with her.

She has all of her stomach complaints, no matter what they are in the morning, but these symptoms are replaced towards evening by more marked nervous symptoms, she will not eat fats or butter for she knows that they are hard on her stomach, she will tell you that if she eats any of these things, she has a feeling of lump in the stomach for hours after eating.

Look at her skin, you will find it hot and feverish, but when you take her temperature you will find it normal, next I would ask you to notice the clothing she wears, you will find it to be very light even in the coldest of weather, now question her as to the medicines she has been taking and invariably she will tell you she takes sulphur every spring to purify her blood, she is troubled a great deal with small patches of psoriasis which itch severely and the skin burns and becomes mottled.

This woman is one of those puffy kind, she has puffy swellings in all parts, her face is swollen and puff, abdomen and feet are also greatly swollen, often keeping her from walking. Now she will complain of these swellings mostly at or before her menstruation and they generally disappear as soon as the flow is well started.

Speaking of ulcers this woman has them and they are rather peculiar, for they do not bleed but only exude a small amount of black looking fluid which becomes hard and forms a dirty looking crust on the surface, giving off an awfully offensive odor.

Catarrhal affections she has too, they involve all the mucous surfaces of the body. It starts with dry purplish spots and involves great areas giving a typical appearance of erysipelas.

This woman has another favor to ask and that is to cure that awful offensive leucorrhœa, it is bland and does not irritate but the odor is so objectional that she does not care to go out in company.

In going back over her history she will tell you that at the age of puberty she was troubled a great deal with the most violent headaches through the temples and throbbing in character, these headaches would always come on before the time for her menstruation and would last until the flow was well established, she will wonder why all her complaints are always one-sided—she has aches and pains on one side only, and if she perspires it is only on the one side; this seems to be her nature, to be one-sided.

How about the husband. He is rather peculiar also. If he should eat ice cream he is sure to develop a severe headache and stomach complaints, he is troubled with his eyes which are granular and usually fill up with that dirty yellow pus. Or again it may involve the ear instead, and here we have the chronic running ear.

Another thing about these people is that every time there is the slightest change in the weather they develop a fresh cold, they will sneeze and cough, their noses are stopped and as a rule they start with a slight chilly sensation after which they have a fever and sweat and very likely you will be looking for some malarial history. This nose of his sometimes gives quite a little trouble, for it gets very painful and sore across the bridge, and sometimes will discharge that characteristic yellow pus. Not only does this come from the nose but from the throat as well, for he will spit up large lumps at a time, these colds are followed for some time by complete loss of smell.

This fellow is an easy bleeder, for it seems that every time he turns around he bleeds from some place or other and this blood is always dark.

Two other cases come in, one has hay fever and the other epilepsy. They are both very obstinate. They want their disease cured without you asking any questions, they know what their disease is and will not talk of any other diseases they have had that might in some way influence the present condition.

Let us look at the face of this patient, it is yellow, dirty, she has dark rings beneath her eyes, it is mottled and has the appearance of erysipelas, she will not allow you to touch it, for it is so very sensitive and sore.

Going farther into this woman's history you will find that in her younger days she had mumps and by exposing herself she took cold, the mumps were suppressed and settled into the mammary glands which have given her trouble ever since.

Rheumatism is another stronghold of this man. He has that type that resembles so many of our renters of today, that is, it is constantly moving from place to place. This changeableness is found in other conditions as well as the rheumatism, such as disease of the glands, joints and other tissues, but it always goes to like tissue, that is from gland to gland and from bone to bone, etc.

For hours after meals this man will feel the bad effects of butter or fat foods, he spits up mouthfuls of bitter, rancid undigested food, his digestion is very slow and he will often get up in the morning with that dirty, slimy, bad taste in the mouth. Considering these things you would think that he would drink large quantities of water, but he does not, he is usually thirstless. Another thing is his desire for all articles of food that disagree with him.

He is subject to many attacks of catarrhal jaundice which is due to catarrhal conditions of the liver and ducts.

Next in order is the flatulent colic that they are so often subjected to. They seem to think that if they could only get that fermentation stopped they would get well and they will often come to you with that plea, and if you will inquire farther into their history you will get a history of an accompanying diarrhea or menstrual disorder, they complain of being so terribly bloated, they will throw off all tight clothing, they are also subject to bearing down pain in the abdomen and this woman will tell you these pains resemble labor.

This patient is very peculiar; she does not believe in doing any two things alike, when she has diarrhea no two stools are alike, or again she may become constipated suddenly after a long spell of diarrhea; with her stool she resembles her brother *nux v.* in the ineffectual desires. These patients complain a great deal from the itching and burning of blind hemorrhoids.

This patient does not drink much water, so consequently his urine is scanty and passed with great difficulty, at night when he lies on his back the desire to urinate comes on and is not relieved until he rolls on his side, he, like causticum loses his urine while coughing or sneezing. The child in this same family is constantly wetting the bed at night, it does not seem to have any control over its bladder.

Let us ask these people what relieves them they will say fresh air and slow motion, and you will ask why not fast motion and they will again tell you that fast motion creates a heat in the body and heat always aggravates their conditions.

Let us examine the generative organs of this man and we find, a large, aching, burning, testicle from gonorrhoea that he had a number of years ago, or it may be that he has just contracted a new case and then we find, a very foul, yellowish, green, bland, discharge. You ask him why he is so restless and he will tell you it gives him relief to move about.

Let us again refer to the female side of the house. She goes out and gets her feet wet and in a very short time her menses are suppressed, and all the pelvic organs are congested, these conditions will often lead her to believe that she is pregnant and she becomes very anxious. Look at her general appearance, her face is sallow, yellow and muddy looking, she is thin and weak and has anything but a healthy look. All her life she has been troubled with menstrual colic and suffers a great deal at these times.

The battle ground for bronchitis, pneumonia, and that sort of chest conditions, seems to find its place in this patient, he will complain of that dry tickling cough and he will have a hard time getting his breath, he will ask that the windows be opened to allow more air to enter, he spits up that yellow, foul, tenacious, secretion, especially in the morning, for his cough grows tight towards evening. When he lies down you can hear the rattle in his chest across the room.

He complains a great deal of drawing pains in the limbs, of sciatic and of varicose veins, his feet are always hot and burning and if you should go to his bed at night you will find them out from under the cover, he also sleeps with his hands above his head.

In closing let me again call your attention to the marked characteristics of this patient, namely, the mildness of their disposition, the ease with which they can be moved to tears, and most of all the aggravations and ameliorations such as the relief from all forms of cold and from slow motion and the aggravation from heat, and fast motion or rest; I believe with but few exceptions you will find these things well marked in all cases of this nature that come under your observation.—DR. A. H. SIEBERT. *Cleveland Medical and Surgical Reporter*.



THE CENTENARY OF THE ORGANON.—A hundred years ago this year was published the *Organon*, and with its publication the principles of homeopathy were established upon a stable basis. However much the nomenclature of medicine may vary in the future, however far future physicians may be able to analyse the phenomena of life and of disease, it is incredible that the *Organon* shall not remain the first great statement of a curative relation between drugs

and diseases, the enunciation of a law of life with which every unprejudiced observer must reckon. It is the greatest contribution ever yet made by any one man to the Art of Medicine, and if the general recognition of this fact be delayed, yet daily experience has shown us that it is on the lines indicated by Hahnemann that medical science advances with certainty. Surgery during the last forty years has made such progress that the change has been almost revolutionary, but surgery to all intents and purposes has now surveyed its kingdom. Its pretensions to certain provinces tend more and more to be challenged, and enormous as are its potentialities for good, its powers have nevertheless definite limits, and medicine must strive to conquer the great kingdom of disease wherein surgery has no power. In this struggle the *Organon* is the most potent weapon yet forged by man, and he who neglects it wilfully deprives himself of his best ally.

It will be interesting briefly to review our positions at the end of the first century of homeopathy. The decay of our beliefs is frequently proclaimed, but in the main the wish is father to that thought. At any rate, from Pasteur to Sir A. E. Wright, the bacteriologists have approached nearer to Hahnemann than could have been believed possible fifty years ago. Not only is there a definite approach to the main principle of homeopathy in the deductions from the investigations into Immunity, but side by side with that, the study of physics has revolutionised conceptions of matter to such a degree, that many of the great stumbling blocks in the path of homeopathy in the shape of the infinitesimal dose and the possibilities of dilution are in a fair way to be removed. It was always possible by the path of personal experiment to test the truth of these assertions, but it is idle to deny that they afforded good standing ground for prejudiced minds, and independent testimony on the subject is of the highest value. Therefore, a century of astounding scientific advance finds homeopathy in a stronger, not in a weaker, position, and testifies to the marvellous insight and prescience of Hahnemann.

What now of the Future? As far as homeopathy is concerned the next century, nay, the next fifty years will

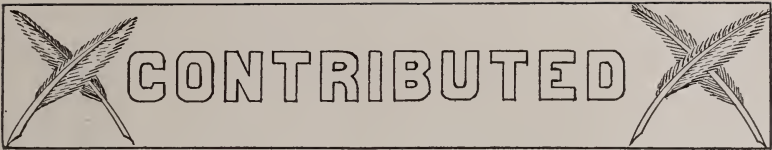
decide it. Our orthodox friends have (independently in the main, let us do them that justice) got upon the track of the main principle that inspires our endeavor. They will almost certainly be compelled to go further, and if we were to hold our hands altogether it is quite possible that some kind of leaven of homeopathy would, under other nomenclature, become a part of orthodox doctrine. Dr. Hugo Schulz, Dr. Huchard, Dr. Cabot, Dr. Gimeno, are all striking examples of the tendency to come to terms with Hahnemann. But, should homeopathy come thus by a back way into its kingdom, few of us can doubt that it would fail to bring with it many of its most powerful weapons, the result of all the century's work and experience. The labors of the actual homeopathist would be largely ignored, and much knowledge painfully acquired would be forgotten, to be rediscovered no doubt by degrees, but with great loss of time and of power to deal with disease, in the interval that would precede the rediscovery. Therefore, we wish to see homeopathy strong enough to compel those who tend independently toward it, to take account of its practitioners and profit by their experience. To maintain such a position must be the aim of all homeopathists. The New Year is the traditional time for good resolutions. Let every one of us determine that 1910, the Centenary of the *Organon*, shall be a year of constant effort to improve the position of homeopathy and bring nearer the day when full justice shall at last be done to its great originator.—*The Homeopathic World*.—London, Eng.



COLCHICUM seems to paralyze and render powerless the parts affected, and when we find with this condition edematous swelling occurring in a leuco-phlegmatic constitution, we may expect a cure by the administration of this drug.—B. SIMMONS, M. D., Sydney, N. E. W.—*Homeopathic Physician*, 1889.



SYMPHORICARPUS.—In July *Recorder*, Dr. H. D. Baldwin says: "I have used *Symphoricarpus Racemosa* with great satisfaction in many cases of nausea accompanying pregnancy."



A. I. H., 1911.

IN ACCORD with the By-Laws, Art. X., Section 9, invitations for the place of meeting of the American Institute of Homeopathy in 1911 must be in the hands of the trustees April 10, 1910. Members of the Institute interested in the place of meeting in 1911 are requested to present their invitations as early as practicable to some member of the committee.

SARAH M. HOBSON, M. D., 700 Marshall Field Bld., Chicago.

J. B. GREGG CURTIS, M. D., 912 Fifteenth Street, Washington, D. C.

WILLIAM O. FORBES, M. D., Hot Springs, Ark.

By-Laws, Art. X., Section 9:

"The determination of the next place of meeting shall take place as follows: All invitations for places of meeting shall be forwarded to the Board of Trustees at least ninety days before the date of the annual session, whereupon the board shall investigate the various places, with reference to accommodations, hotel rates, railroad facilities, and obtain all necessary information. The board's report shall be made to the Institute, when the location shall be determined."



CHICAGO LETTER.

DR. S. MATH, Hahn., '05, was a recent visitor to Chicago. Dr. Math is located in New Orleans, La.

Dr. C. A. Harkness, C. H. M. C., '04, and now a member of the Hanhneman faculty, was married on December 30th. He begins 1910 O. K.

Dr. H. T. Watkins, Hahn., '83, has removed from Olney, Ill., to 100 Washington street, Chicago, where he is a life insurance examiner.

Dr. J. P. McCormick, Hahn., '07, was recently married to Miss Math, of Chicago. Dr. McCormick is located in Canada.

The January meeting of the regular Homeopathic Medical society was held on the 4th. Cases from practice were presented and discussion followed.

On Saturday, December 18th, the Alpha Sigma fraternity held a social and dance, which those in attendance enjoyed.

Chicago, Illinois, January 17, '10.



EDITORIAL SECTION



THE CRITIQUE is entered at Denver Postoffice as Second Class Matter.

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

THE OFFICIAL ROUTE.



WHILE an unusual amount of activity has been displayed in certain circles relative the choice of an "official route" to the forthcoming meeting of the American Institute of Homeopathy at Los Angeles in July, there is no doubt but what the unwarranted assumption of authority displayed by those issuing the postal card canvass favoring the Santa Fe route, and doing so over the heads of Dr. Fisher and Dr. Costain, chairman and secretary of the transportation committee, will act as sort of boomerang to those who have been

both hasty and discourteous in the matter.

That the transportation committee thus far has displayed unusual activity and interest in its work needs no particular picturing at this particular time. One example of this concern came under our personal observation during a recent visit of Dr. Fisher in Denver. Notwithstanding his time was pretty thoroughly taken, he found opportunity of conferring with the local member of the committee, Dr. Grant S. Peck, besides making a personal visit to nearly every railroad office in the city, during which he secured much information of a

nature likely to be of benefit to members of the American Institute should they decide upon a short side trip to Colorado *en route* to Los Angeles or upon their homeward journey.

THE CRITIQUE believes the profession of Colorado to be unanimous in the hope that Institute members pay a short (or long) visit to Denver and Colorado points either on their going or returning trip to the meeting in question.

During the past few years many new show places have been discovered in Colorado and we shall take great pleasure, in our next issue, of presenting a profusely pictured edition which we hope to place in the hands of every member of the American Institute of Homeopathy. This will not be in the nature of an *advertisement*, but a bit of enterprise on our part for which we will be amply repaid in case the comfort and convenience of the membership be added to thereby.

While "speed" and "scenery" may be desirable to members on this trip, and these two features are too often made the chief attractions by transportation companies, and transportation committees, there is nothing enters so largely into the details or which adds so much to the comfort and pleasure of those whom the latter are endeavoring to surround with every convenience, than the highly important question of *safety*.



The Lo: Angeles Limited on the Union Pacific, Obeying "Stop" Signal on Lane Cutoff, near Omaha, Nebraska.

In our March issue we will enlarge upon this topic, besides presenting other facts, and endeavor to show a route that will combine not only all the requirements of speed, safety and scenery, but add thereto the additional delights of security and satisfactory service.



THE PASSING OF MEDICAL COLLEGES. Under the foregoing caption Editor Dewey, of the resurrected *Medical Century*, takes occasion to pay his respects to Denver institutions, some of which are no more. Had he displayed one-tenth the temper while drawing salary as editor of the *Journal of the American Institute of Homeopathy*, that publication, under his passive guidance, might still be remembered in the realm of medical literature; just at present, however, it can only be recalled by the resemblance it bore its immediate predecessor, while the product of the grave which succeeded the Institute incubus will be alluded to, if at all, as the offspring of that organization's folly, with the additional distinction also of having been, almost, its financial finish.

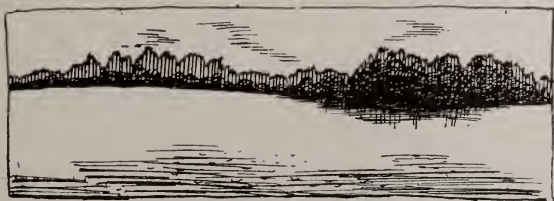
"The passing of medical colleges" was not the irritating cause which provoked the graveyard product's peevishness. What caused his gorge to rise, as it were, was the fact that one of the periodicals "not noticed beyond the confines of Arapahoe county," THE CRITIQUE, had been instrumental in bringing about a state of affairs which called for the revival of *Medical Century*. Just whether, in the years to come, we will view this achievement with as much satisfaction as we do at the present time, or whether blessings be showered upon us by the limited number of patrons he will have at that period remains to be demonstrated; but if the limitations displayed by Dr. Dewey as a medical magazine manager in the past are to serve as criterion for what may be expected of him in the future, it is altogether probable we will be decidedly short on both satisfaction and shower.

The following is Dr. Dewey's first effort along pugilistic lines:

"The condition of affairs in Denver is well indexed by the fact that there are two camps, each having as mouth-piece a periodical in which spite, venom and churlishness is vented against each other, fortunately not noticed beyond the confines of Arapahoe County. The total Colorado contributors to both of these periodicals combined will scarcely reach two figures in a year, and this proves that the Colorado profession is awake and can not 'all be fooled all the time.'"

We are not worrying any regarding our inability to attract attention outside *Arapahoe* county, the fact we have been in *Denver* county for several years demonstrates the observing nature of the peeved person who penned the foregoing, and if we are to judge of his standing in Ann Arbor and the state of Michigan by the number of contributions to *his* journal from that territory, it would not require expert experience to determine that doctors of the Wolverine state had been "wise" to him for some time.

The "sting" of the sarcasm intended by Editor Dewey in the little article which we quote above, was drawn by THE CRITIQUE long before it was published; all our readers recall that to this publication, more than any one other in the United States, is the American Institute indebted that the contract with Medical Century Company was cancelled, and that in due season an Institute journal will appear which will represent its members and not the individual who has posed as a sort of Poo Bah of the Homeopathic National organization.

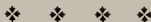


MISCELLANEOUS

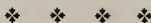
The Homeopathic Recorder tells "what kills in consumptiok." Something new?



THE CRITIQUE is now the only homeopathic publication issued in Denver.



Dr. C. G. S. Austin has removed to Mansfield, Mass. He was formerly located at Nantucket, same state.



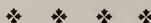
Don't forget the Los Angeles meeting of the American Institute of Homeopathy. It will be held July 11-16, 1910.



The *Iowa Homeopathic Journal* has added "and *The Journal of the Hahnemannian Medical Association of Iowa*," to its title.



The March issue of THE CRITIQUE will be 5,000 copies. Advertisers and contributors alike are asked to have their "copy" in early.



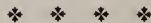
Many highly appreciated compliments have been received over the improved appearance of last issue of THE CRITIQUE. Thanks.



The Homeopathic Recorder says: "Dr. P. W. Shedd has added another remedy to the list from his laboratory—namely, *Staphlyocin*."



There are over 3,000 colored physicians in the United States and Booker T. Washington says there is room for 4,000 more in the South, provided they are properly equipped.



The building occupied by the first homeopathic medical college in the world, located at Allentown, Pa., was torn down recently to make room for more modern improvements.

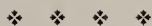


During the past month all previous records regarding requests for sample copies of THE CRITIQUE have been shattered several times over. New subscriptions, too, have been numerous. Some one must have been reading the last issue of *Medical Century* and caught on to us that way.

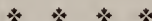
Never mind that last sentence; it could not be enumerated even among the near jokes.



Mr. B. N. Tanner is the new business manager of *Medical and Surgical Reporter*, Cleveland, Ohio. By-the-way this was the first journal to reach our office with 1910 stamped in the date line. On time; that's business



Dr. J. H. McClelland, of Pittsburg, Pa., one of the best known and most successful homeopaths in the country, has but recently recovered from a severe attack of pneumonia. THE CRITIQUE congratulates him on this fact.



Medical Century, volume xvii, number 1, has' been received. It is, so it asserts, "The National Journal of Homeopathic Medicine and Surgery." It contains all the ear-marks of the late *Journal of the Institute of Homeopathy*.



According to the *Iowa Homeopathic Journal* President J. W. Ward, of A. I. H., has promised to attend the annual meeting of the Iowa homeopaths next May. As a consequence, our good brethren to the east of us are happy. Serves 'em right



Dr. F. A. Faust, Colorado Springs, was a visitor to the metropolis during holiday week. We are pleased to say that the good doctor is in fine physical condition and is making arrangements, at this early day, to join the crowd at the Los Angeles meeting



Mary Baker Eddy, founder and leader of the Christian Science faith, sent out the following notice, December 24 1909: "Christian Science practitioners should make their charges for treatment equal to those of reputable physicians in their respective localities."

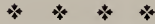


Dr. Kramer, one of the successful men in the profession and at present located at Loveland, Colorado, was a visitor in the City of Lights during holiday week. We are always glad to meet men of the Kramer style of beauty and business ability. Come often.



Among the many flattering letters received relative the change in dress of THE CRITIQUE, none hit us harder "where we live" than the following: "I am so pleased to see THE CRITIQUE in a *brown* dress, for I have long thought it had outgrown the *green* age or dress. The January number is fine—like it very much; not only that *it is valuable*, but there is something tangible, usable, profitable. My hearty congratulations

on improvements and best wishes for this and all subsequent years." That listens good to us.



A Colorado Springs doctor gave a banquet to his professional brethren in that city the fore part of last month, which cost \$1,000. Understand, please, this was in *Colorado Springs*.



Dr. Howard R. Chislett succeeds the late Dr. G. F. Shears as president of Hahnemann Medical College and Hospital of Chicago. Dr. C. F. Kahlke succeeds Dr. Chislett as dean of the faculty.



Dr. P. Hall Smith, Northwold, Stanley Road, Sutton Surry, England, and W. A. L. Merritt, M. B. Ch. B., The Grange, Brinton Bringham, S. O., Norfolk, England, are among the goodly number of new names added to our mailing list during the past month.



Someone has written us recently asking that we make known the fact of there being a good opening for a homeopathic physician in a city of 12,000 inhabitants. Will the same party please put us next to their name and address, as we have carelessly mislaid both.



Dr. Willoughby W. Sherwood, our esteemed and energetic Chicago correspondent, never misses an opportunity of placing THE CRITIQUE where it will do the most good. It is wholly unnecessary for us to say we appreciate his thoughtfulness, but we shall say so, just the same.



"Rexall" remedies are to be taken seriously at last. A Polo (Illinois) woman combined four ounces of this brand with some laudanum and succeeded in shuffling off, just previous to the close of last year. The question is: "What had the 'Rexall' dope to do with the demise?"

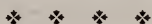


The *Shannon (Ill.) Express* says: "A Rockford concern is manufacturing cement burial caskets said to be absolutely water and germ proof." Nothing startling about that. The one to catch the trade will be the ingenious individual who can guarantee a fire-proof product.

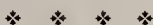


Both business manager and editor of THE CRITIQUE are indebted to the Denver Chemical Manufacturing Company, of New York City, for the gift of a beautiful and reliable fountain pen as a Christmas souvenir. It is needless to add they were of the Waterman variety as no product of "Antiphlogistine" standing would associate itself with anything but the best. The cordial sentiments expressed in the letter accompanying the gifts are most heartily reciprocated by both members of this com-

pany; may The Denver Chemical Company's output of Antiphlogistine never grow less and continue in popularity with the progressing years.



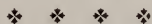
THE CRITIQUE must apologise for the few days' delay in its January issue. The fault was of the editor, as the printers were Johnny-on-the-spot with their end of the game.



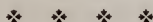
"Homeopathy: a System of Rational Therapeutics; its Right to Survive," by J. H. McClelland, M. D., Sc. D., Pittsburg, Pa., is the subject of an interesting pamphlet received at this office last month.



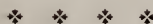
A negro woman of Oyster Bay, L. I., is slowly turning white, much to the astonishment of physicians and other supposedly learned men. During the period of change she became the mother of a son who sports a fine crop of *red hair*. From a scientific standpoint isn't that simply marvellous?



Auditor Kenehan is after the state board of health and wants it to disgorge a few plunks which he claims to have been illegally squandered by that body. It will soon be so that someone will construct a ditty which will wind up with "And Kenehan will get you, if—you—don't watch—out!"



An extra supply of Antikamnia calendars are acknowledged, the courtesy being extended by President Frank Ruf of that company. THE CRITIQUE has made a few additional friends by "passing them along;" they are not only artistic, but of such shape and size as to be extremely useful and practical.



Editor of THE CRITIQUE as well as members of the A. I. H. in this immediate vicinity, received a very handsome Christmas card from President Ward, to commemorate the season and remind us all that a real live man is at the head of Institute affairs. Success to the President, as well as the Institute is our wish.

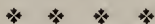


Dr. T. Griswold Comstock, honorary president of the American Institute, died at his home in St. Louis, Mo., on December 1st. He lived to be 84 years of age, sixty-four of which were spent in the practice of homeopathic medicine. He was a graduate of Hahnemann College, Philadelphia, class of 1853. He was beloved by all fortunate to know him.



According to the secular press, Drs Van Meter and Preston, of the state board of medical examiners, were both temporarily removed from serving on that body during the trial of an old physician for whom, it was charged, both entertained feelings which would incapacitate them from giving the aforesaid physician a square deal. The old gentleman in

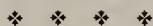
question came up with too strong backing to be pleasant for anyone engaged in the "getting even" game



THE CRITIQUE will be pleased to receive personal and news items for this department. If you know anything coming under this head, drop us a postal card stating the facts and we will do the rest.



Mr. Mitchell Valentine, deceased, has left his estate, valued at nearly two million dollars, to be divided between the Hahnemannian hospital of New York, and the Presbyterian hospital of the same city.



The many friends of Dr. William F. Burg will regret to learn of the serious accident which befell him during the holiday week, whereby he broke the left arm. The fracture extended into the surgical neck of the humerus and will put the doctor out of commission for some time. THE CRITIQUE hopes no serious after results will follow the fracture.



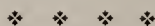
Although a trifle tardy the *Journal of the American Institute of Homeopathy*, January, was well worth waiting for and notwithstanding the many handicaps the editor and committee have been working under, the new *Journal* is worthy the support and encouragement of every homeopath in the United States, or the world for that matter. Editor Horner, especially is to be congratulated upon the decided improvement over old methods.



Dr. H. Sheridan Beketel, formerly advertising manager of Denver Chemical Manufacturing Company, New York City, resigned that position the first of the year to become vice president and general manager of the Thermo-Chemicals Company. THE CRITIQUE wishes him equal success in his new field of human endeavor as that achieved while with 'Antiphlogistine.' That is good enough for any one.



Henry Pennywit, weather forecaster of Pittsburg, Pa., says the people of that town have something to fear in a new disease which he calls "poganip." He excuses his assertion by explaining the meaning of the word, which is Indian for "white death," a form of pneumonia usually fatal. He further declares it saturates the atmosphere and is far more dangerous than soft-coal smoke. Just think of *anything* being able to saturate the Pittsburg atmosphere, or being more dangerous!



The many friends and acquaintances of Dr. W. D. Kinloe, formerly of this city and professor in the old Denver Homeopathic Medical College, will be pleased to learn of his continued prosperity, 'way back in

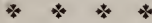
old Pennsylvania. A copy of recent edition of the *Daily New-Era*, Huntington, Pa., has some very flattering things to say about William on the strength of his having assumed charge of a large milling plant in that city. THE CRITIQUE wishes him continued and abundant success in his new undertaking. Dr. Kinsloe was formerly located at Newton Hamilton, Pa., and is one of THE CRITIQUE's many subscribers whose name appears on the paid-in-advance list.



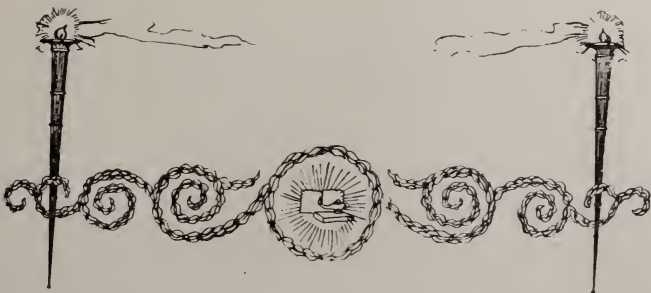
What has been termed "hook worm" disease, for which Rockefeller and other scientific searchers are willing to squander one million dollars in securing a germ, has been known for the past thirty years, and one doctor claims to be able to cure it with a nickel's worth of epsom salts. Thirty years ago the disease was called "ankylostimiyasis." To think all that could be gotten rid of for a nickle, half-a-dime, five cents.



According to *The Express* of recent date, the state board of medical examiners of Colorado, returned \$500.00 to the state treasury the early part of last month. This was a portion of the fund which it had put aside for use of the board in pending litigation and other contingencies that might arise, but which Auditor Kenehan discovered was to the credit of a member's private account. Well, that \$500.00 will help out some.



Dr. E. B. Swerdfeger has been selected correspondent for the *Journal of the American Institute of Homeopathy*. Denver and Colorado in general. The iron-clad contract whereby the *Journal* is prevented from publishing anything outside absolutely Institute affairs, will make his task somewhat difficult, but THE CRITIQUE predicts he will make his contributions readable, to say the least. He asks that members of the profession hereabouts assist, by placing at his disposal such items of interests as may come within the foregoing restrictions.



READING NOTICES

RELIEF OF ACUTE NASAL CATARRHS. Few minor diseased conditions are provocative of such inconvenience as an acute nasal catarrh, and an agent that will check it and bring about a cure is worthy the widest use. Douches of *Katharmon* in diluted strength will accomplish this end by reducing the turgescence of the mucosa and checking the inflammatory process.

CHART ON DISLOCATIONS. Battle & Co., of St. Louis, have just issued No. 11 of their series of charts on dislocations. This series forms a most valuable and interesting addition to any physician's library. They will be sent you free of charge on application, and back numbers will also be supplied. If you have missed any of these numbers, better write Battle & Co. for them before the supply is exhausted.

AFTER OPERATIONS. After even simple surgical operations patients are almost always menaced by the manifold complications that are superinduced by the nervous or more or less debilitated state that is inevitable. Tonic treatment is always indicated, and nothing at a surgeon's command will give more substantial satisfaction to all concerned than Gray's Glycerine Tonic Comp. Under its tonic and reconstructive influence the vital functions are restored to normal activity and the nerve balance coincidentally re-established. Thus does a patient receive the fullest benefits from surgical treatment and without the delay that so often is the despair of surgeon as well as patient. The lesson to every medical man doing surgical work is obvious, and the aid he can always secure from Gray's Glycerine Tonic Comp. after operations imposes an obligation not to be ignored.

THE REMEDIAL VALUE OF IRON. Amid all the doubt that modern skepticism and therapeutic nihilism have aroused in the professional mind, in regard to the medicinal or drug treatment of disease, we have yet to hear any question as to the distinct value of iron in anemic, chlorotic and generally devitalized conditions. This metal is, indeed, the physician's mainstay in such cases, and can not successfully be omitted or replaced. There does exist, however, considerable difference of opinion as to the method of administering iron and as to the most generally eligible preparation of same. The tincture of the olden times, prepared from iron filings, has in these later days, been superseded by the less irritant and more tolerable preparations introduced into modern pharmacy. Among such products none has seemed to be so generally acceptable and promptly assimilable as the organo-plastic form represented by Pepto-Mangan (Gude). The ferruginous element in this preparation exists as a true peptonate, in combination with organic manganese, iron's side-partner in reconstructive blood therapy. It is palatable, readily tolerable, quickly

absorbable and assimilable and entirely free from irritant or constipating effect. Pepto-Mangan (Gude) rapidly restores vigor to the circulating fluid and because of its blandness and ready tolerability is especially valuable in pediatric practice.

BROMALBIN IN EPILEPSY. The defects of the inorganic bromides in the treatment of epilepsy and other convulsive disorders have long been recognized by medical practitioners. While the bromides have been extensively prescribed—because nothing better had been devised to take their place—their proneness to derange the stomach and to produce systemic disturbances has militated against their usefulness.

The "something better" appears now to be at hand. Reference is made to Bromalbin, an organic compound in which bromide is chemically combined with albumen. Bromalbin contains approximately 15 per cent. of bromine. It is in the form of a light-yellow powder and is odorless and practically tasteless. It is insoluble in water, alcohol, acids and the ordinary solvents, but is slowly soluble in alkaline solutions.

Bromalbin was evolved in the chemical laboratories of Parke, Davis & Co. Before being offered to the medical profession at large it was subjected to thorough clinical test by leading practitioners throughout the country in a large number of cases in which bromide medication was indicated. Reports of its use in the treatment of epilepsy were highly encouraging, and the belief is expressed that it will prove equally efficacious in hysteria, neurasthenia, reflex headache, insomnia, migraine, and other nervous affections.

The chief advantage of Bromalbin over the inorganic bromides appears to be in its adaptation to long-continued treatment. It passes through the stomach practically unchanged, consequently does not produce the gastric irritation common to the alkaline bromides. Slowly dissolving in the intestinal secretions, it is then absorbed, producing a gentle, prolonged systemic effect. Other advantages are: its more complete absorption, its comparative tastelessness, and the small likelihood that it will produce acne, dizziness, or other symptoms of bromism. It is marketed in powder form (ounce vials) and may be given in water, coffee, chocolate, syrups, wines or any beverage not alkaline in character. It is also supplied in five-grain capsules (bottles of 100), in which form, perhaps, it is likely to be most commonly used. There is wide need of a sedative such as Bromalbin promises to be, and fuller reports on the new agent will be awaited with interest by the profession.

RELAXED CONDITION OF UTERUS OR APPENDAGES. Physicians are frequently consulted in regard to various disorders, largely dependent upon a relaxed condition of the uterus or appendages, which is frequently accompanied with neurasthenic symptoms and are in a congested and engorged state, rendering these organs painful and by their pathological condition very detrimental to the general health of the patient. Many women thus effected object to local treatment, which frequently places the physician in an embarrassing attitude, and he is perplexed to inaugurate a treatment satisfactory both to himself and patient. He feels the necessity of certain drugs which are known to exercise a beneficial, soothing tonic effect on the female reproductive organs. In many cases of dysmenorrhea, uterine leucorrhea, menorrhoea or urethritis, before he can confidently rely upon permanent beneficial results from any local treatment it is necessary to control by the administration of certain internal remedies, those symptoms which are neurasthenic in character and which are insidiously but surely undermining the constitution. For the purpose of at least soothing and controlling these pelvic neuralgias the most satisfactory results in such cases can be obtained by the adminis-

tration of Dioburnia, two parts combined with Neurosine one part. You can depend upon your patient's returning and express themselves that the medicine you dispensed caused their nervousness, etc., to abate and request of you some more of the same. Doctor, give this combination a trial. See advertisement first page, next to original article.

ADRENALIN IN A NEW PACKAGE. In addition to the ounce vials in which it has hitherto been supplied, Adrenalin Chloride Solution is now being marketed in hermetically sealed glass containers of one cubic centimeter capacity. "Adrenalin Ampoule" is the name used to designate the new package, and the solution is of the strength of 1 to 10,000 (one part Adrenalin chloride to 10,000 parts physiologic salt solution). In their announcement of the ampoule Parke, Davis & Company have this to say:

"Adrenalin Chloride Solution has become a necessity in medical and surgical practice. The most powerful of astringents and hemostatics, it lends itself to many practical uses and at little risk of injury in reasonably careful hands. Since the time of its introduction it has been marketed in ounce vials, and of the strength of 1:1000. Experience has shown, however, that a weaker solution is much more frequently required than the 'full strength;' and while it is generally an easy matter to dilute with water or normal saline solution, in certain emergencies an already fully diluted preparation is to be preferred. While the danger of deterioration from occasionally opening a vial containing a solution of Adrenalin chloride is not great, still, in consideration of the fact that a dose is needed now and then for hypodermatic injection, it is believed that the small hermetically sealed package will be welcomed because of its greater convenience and security."

As will be apparent from the foregoing, the Adrenalin Ampoule is intended for hypodermatic use. It should be of great value in such emergencies as shock, collapse, hemorrhage, asthma, etc., or where prompt heart-stimulation is desired.

VALUABLE CONCLUSIONS. The case of G. H. is reported by J. S. Norwell, M. B., C. M. B. Sc., of Edinburgh, Scotland, as follows: "Suffered from headaches, which proceeded from errors in diet. I arranged a table of diet for him which proved beneficial. I prescribed antikamnia tablets and with the very best results. His headaches were kept under until his changed dietary had time to effect more permanent relief. This year he went to Bisley. In case he should be troubled there with his *bete noir*, I gave him some antikamnia tablets as a stand-by. On his return, he told me he had no headache, but that he had used all the tablets. Headaches, it seems, are no uncommon accompaniments of camp life. He has dispensed the antikamnia tablets to some of his suffering companions, and they (the tablets) 'hit the bull's-eye every time.' Who knows but that they had something to do with the phenomenal scoring at the last meeting!"

One could multiply similar cases, but this may suffice to illustrate the effects of antikamnia tablets in the treatment of headaches, and to warrant the following conclusions I have come to with regard to their use:

- (a) They are a specific for almost any kind of headache.
- (b) They act with startling rapidity.
- (c) The dosage is small.
- (d) The unpleasant after-effects, so commonly attendant on the use of many of the other analgesics, are entirely absent.
- (e) They can, therefore, be safely put into the hands of patients for use without personal supervision.

Another point worth noting is that they can be very easily taken, being practically tasteless.



THE KEY TO SUCCESSFUL PRESCRIBING.

LETTERS TO A YOUNG HOMEOPATH. LETTER No. 5.

Finding the Indicated Remedy—Illustrative Cases.

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MY DEAR DOCTOR: I must call your attention to the pernicious, though popular and general external mode of treatment, whether by medicinal daubing or some scientific machine. The young homeopath who has not had the advantages of a homeopathic training, may conclude that his office will not impress the people with the dignity of an M. D. unless their eyes are made to look wonderingly at various and strange machines, and their nostrils forced to inhale the evidences of an old-school *stink-shop*. Be not deceived. The almost unlimited devices for local treatment, such as electricity, a vibrator, a high power lamp, an ozone generating machine, a hot air baking apparatus, certain combinations of oil of pine needles and eucalyptus, etc., together with all the no-medicine cults, were invented for those doctors who *do not know how to find the indicated remedy. A real homeopath does not need them.*

In spite of all the so-called "helps," it is admitted by high medical authority that there are 17,600,000 Americans who now patronize drugless healing. This vast number represents the public disgust for the unscientific and senseless habit of *drugging*, notwithstanding the "helps" provided for these doctors that they may *appear* to be "doing something for the patient." That vast number who have openly rebelled against these doctors, "regulars" and mongrels, have also created the greatest *bread and butter alarm* known in this history. They will have to invent a few more machines and suddenly discover a few more microbes!

Let me remind you of the ink and wind and medical energy which have been wasted in booming anti-toxin as *the*

specific for diphtheria. Now it is doomed! Dr. Fritz Meyer, an eminent old-school German physician, after making "an exhaustive investigation of the subject," now recommends "suprarenal extract." But even now he does not question the ability of anti-toxin to cure diphtheria just because it is diphtheria, but his objections to the treatment which he files and boldly announces to the world is, *it kills the patient!* Took them a "right smart spell" to confess the corn. And think *how many* they have killed! And Dr. Fritz Meyer's "suprarenal extract" is awaiting the same destiny. It will be "tried" and finally go over the same road—the road that blood-letting went. The very fact that they are always on the hunt for something new to cure old diseases—something new with which to *daub*, or some new appliance with which to make a show, is proof positive that they have nothing satisfying in medicine. But Professor Meyer says his new "specific" will not kill (!), and that it will cure diphtheria in cases where the disease has "progressed past the point where the heart was affected." That's a joke! When diphtheria reaches a point where the heart is safe, the patient will get along all right without "suprarenal extract," thank God!

The people do not have to be doctors to see the unscientific and bungling feature of giving *any* so-called "specific"—one and the same treatment—to *everybody* because they have diphtheria. Pure homeopathy steps to the front just at this point, respects the individual symptoms of each individual patient; selects the remedy accordingly and thus brings to bear the telling power of *individualization*. All can see that this is a combination of science, and common sense. The chief business of medical experts the past two thousand years, who did not know how to find the indicated remedy, has been to discover some new "specific" for some pathological *name* of disease one year, and knock it out the next. On the contrary the symptom *image* which called for belladonna a hundred years ago, conformably to the homeopathic law, *calls for the same remedy today*. Let the lost, bewildered and disgusted advocates of "drugless healing," read Hahnemann's Organon and Chronic Diseases and thus familiarize themselves with a

system which is harmless, scientific and of universal application in the field of medicine. There never was a more auspicious time to disabuse the public mind and insist upon the fundamental principles of pure homeopathy. A drowning man never would "catch at a straw" if there were anything better in reach. Throw out the lifeline of pure homeopathy, and give the people a chance.

So, my dear doctor, do not imagine that the armamentarium of old-school physicians will give you prestige. Keep your suite of office rooms as clean and sweet and tidy as a parlor; and remember that nothing makes a lasting impression upon your patients like a *homeopathic cure*. This you can accomplish with the law of similars, the single remedy and the minimum dose. Do not hesitate to use your repertory at the bedside and in your office in the presence of your patients. Study Hahnemann, Boenninghausen, Dunham, Gross, Lippe, Hering, Kent and others whose loyalty to homeopathy is unquestioned. When you once catch the spirit of homeopathy, you will grow stronger, more confident and more efficient, and you will make such cures as *no man who tries to utilize allopathic machinery can make*; such as no man can make who uses *topical applications*; as, for instance, chronic leucorrhoea, warts, gonorrhoea, syphilis, psoric eruption, etc., simply and *only* by the indicated medicine on the tongue.

When you once learn that the indicated remedy *does not need the so-called "helps,"* you will have learned one of the big lessons of life. Now I anticipate you: I imagine you are asking, what are the real objections to local treatment? I answer: "Local manifestations are *always* a part of the general disease, and *always* allay the internal ailment. Removing the local manifestations *never* materially diminishes or cures the whole malady; but, on the contrary, tends to destroy the vital organs and the symptom image." This is done daily by those "broad-minded" medical gentlemen, and they get some preacher to say, "Everything was done that could be done." Popular treatment, but hard on the patient! The object of external treatment is to remove local symptoms from the surface of the body; and when this is done by topical applications or mechanical appliances, the internal malady is thereby *roused* and latent symptoms which existed side by side with the local affection, *break forth like a storm*. Those charitable gentlemen who say, "Be broad-minded enough to give those employing you the benefit of all knowledge from every source, no matter what, so far as within you lies," (*North American*

Journal of Homeopathy, January, 1910), *always leave the internal miasmatic disease uncured*. Still, they want to be known as homeopaths! And they meet in convention under the homeopathic name, and they set about flapping their wings with one accord, that they may fan these heresies into a *homeopathic* flame, which sometimes actually happens if our faith could be so strong as to believe it.

As long as the internal syphilis remains uncured, the chancre enlarges. Burning away the chancre by caustics compels nature to seek another outlet in the form of a syphilitic eruption and often a bubo; this pernicious external treatment has been the prolific source of chronic maladies under which the nations groan. I have never heard of a doctor who employs external treatment, medicinal or mechanical, as "helps" for his remedies, who even claimed to be able to cure syphilis simply and *only* by the indicated medicine on the tongue. You will have to send for a Hahnemannian to do that, *every time*. And there is no quack secret about it, either. Hahnemann has unfolded and announced to the medical profession every detail by which such a cure may be accomplished. The only secret connected with it is *in knowing how*.

Now that you may be guarded against the snares which have entangled so many well meaning young homeopaths, I quote from *The North American Journal of Homeopathy*, January, 1910, editorially: "While homeopathy has its limitations and is not all there is to the practice of medicine, it still has a very wide range of usefulness, both in so-called surgical and in medical diseases." The evident purpose here, as in many other instances, is to lay the gap down through which you are to walk out after "strange gods"—after the good (?) things in all other medical systems in a true eclectic style. To make such a course plausible, however, it is first necessary to convince you that the system which you have embraced as a homeopath is about as *rotten* as all others; that "homeopathy has its limitations," "even in medical diseases," and hence "is not all there is to the practice of medicine." Now let me say to you most emphatically, *that is not so*. Homeopathy is as perfect and infallible as the Creator of therapeutic agents who decreed the *law* that in every individual case of disease, we should choose the agent which can "itself produce an affection similar to that sought to be cured."

The weakness of some who fail to apply homeopathic principles, should not be mistaken for the system itself. To impute to homeopathy the ignorant or wilful divergence from

the lines laid down by its founder, is not only a false representation, but *equivalent to slandering the dead!* I know of but *one homeopathy*. If men choose to practice something else, they should *call* it something else; and not mislead the living and defame the dead.

If a man admits he can not practice homeopathy as taught and demonstrated by its founder and scores of his loyal adherents, and must adopt allopathic measures as the next best thing, he ought to recognize the fact that he has missed his calling and seek some avenue in life that is at least *harmless* and equally remunerative. There are enough allopaths now. My advice to you as a young homeopath is, *keep close to Hahnemann*. Make the *Organon* and *Chronic diseases* your daily study. Steer clear of all haphazard and bungling allopathic precedents. Aside from surgery, allopathy does not possess *one single thing* which will enhance your worth or enlarge your success as a homeopathic practitioner. As such, you do not need their substitutes for the indicated remedy, *and cannot afford to borrow them*. The mail carrier just this minute handed me a package—a new one: “Vanishing cream.” One of those “helps” for the indicated remedy. It soon “vanished”—into my waste-basket! I have one receptacle for all such allopathic trash—the waste basket. Thus used, they will be of vastly more service to you as a homeopath, than any other disposition which you could make of them. Nor do you need any of the allopathic appliances for the external treatment of diseases with which to make a show. It is not within your province to emulate Barnum in those things which fool the people. They may like it, as he said, but those who are ever fortunate enough to learn pure homeopathy will despise the *imitation*. To find the indicated remedy for *each individual case of sickness and cure your patients*, is the biggest show you can give in the community where you announce yourself as a homeopath. If you wantonly refuse to do this, and at the solicitation of allopaths agree over your own signature to be known “simply as a doctor,” thus contributing to the accomplishment of that for which they have vainly striven for more than one hundred years, then you are probably beyond redemption. Whatever you may need as a surgeon, as a homeopathic physician you will be thoroughly furnished when you secure a *reliable* stock of potencies, plenty of *reliable* homeopathic literature, and acquire the necessary knowledge to use them. You can then cure where all your enemies fail, if you will but follow *Hahnemann*.

Homeopathy, as seen by the general public today, is a travesty upon the doctrine of Hahnemann. However, there are a few who really practice the system and duplicate the historic cures made by the founder; and the cohesive force that binds these practitioners together is the strongest motive of professional life—to *preserve intact the doctrinal principles and submit them to their successors as the only hope of real success*. Here let me remind you that the unreasonable, unscientific and delusive practice of osteopathy is based on the pretense that diseases are extinguished from *without in*. When you convince your patrons that the true process is just the reverse—from *within out*, you will have dethroned the osteopath!

Illustrative case: More than twenty years ago I cured a young man who had suffered for intermittent fever more than two years, and who had been experimented on for the same length of time by allopaths. They finally pronounced it a case of tuberculosis and gave him up to die. Then, as a *dernier ressort*, the writer was called. He found the patient exhausted from drugs. The chill he once had at nine a. m. without thirst, with the sourest kind of *watery vomiting just as the hot stage set in*, he now had at four p. m., with intense thirst, but with no vomiting at all. I gave him something to antidote the drugs and bring back the original picture—sepia, I think, which was accomplished after two weeks. I then prescribed lyc. 3-m and he never chilled again. Instead of filling a consumptive's grave, he became a robust and willing advertiser of homeopathy. The *time of chill*, with the *time and character of vomiting*, were the distinguishing symptoms.

Another case: Man, aged 35; farmer. Had suffered more than two weeks from syphilis. His chancre was the worst I ever saw. It had eaten the penis half off, that is, half way through. Fortunately he had had no bad treatment. Here is what I noted down when I took his case: Tongue heavily coated and takes imprint of the teeth. Breath horrible. So much saliva that he is kept busy swallowing or spitting, and it runs out of his mouth at night, wetting the pillow. Drenching night-sweats. Very irritable. Always worse after midnight. Now any novice knows that is a picture of mercury. I gave him merc. v., 3-m to be repeated every six hours when awake. He reported in one week and that whole picture of mercury had faded away—but behold! the chancre was eating deeper and looking more angry than ever. Right at this point I can see a mongrel “trying” a high potency on syphilis. I

hear him say, "I knew the d—d thing could not be cured without local treatment!" and he throws up his hands and employs the allopathic cauterization or the knife, suppressing the disease and ruining the patient for life. Now you ask, "Why did mercury, evidently the indicated remedy, remove the whole picture of symptoms except the chancre, *while the latter grew worse?*" Well, my dear doctor, you have propounded the decisive question in the case. The homeopath who can answer that, can cure syphilis without local treatment; and he who can not answer that, must desert homeopathy and in his weakness turn to the cauterization. Here is the answer: Because, like nearly all, if not *all cases* of syphilis today, the man was full of psora; and when psora and syphilis exist together in a case, *the psora must be cured first*. Hahnemann has made this very plain in his Organon. I gave him sulphur, 6-m, one dose and let it work ten days. This checked the eating process, the dipping down deeper and deeper, which is a strong characteristic for sulphur, but the mercury symptoms—coating on the tongue, the ptyalism, the night sweats, etc., returned. Here permit me to say, that mercury is not to be prescribed for syphilis like anti-toxin "for diphtheria," but for the mercury *image*; and this image sometimes develops in syphilis just as it sometimes does in tonsillitis. However, mercury is more often indicated in syphilis than any other medicine. I then followed the sulphur with merc. v., 3-m, 1-m and 50-m as needed, and discharged the patient last week, as "fine as silk." No syphilitic eruption, bubo, falling of the hair, ulcers in the mouth or throat, and never will be. And should he marry, his children will not betray his waywardness. *He is cured*; and he was cured *from within out*.

These lamentable evils, these so-called sequela of syphilis—bubo, ulcers in the buccal cavity, falling of the hair, syphilitic eruption—the greatest curse to the human race, do not belong to the disease, are not a part of it and are not sequela of the disease at all, *but are the sequela of bad treatment, the results of suppression*. The indicated medicine in the proper potency on the tongue, will cure the worst cases in a few months (without psora, in a few weeks), and there will be no scar at the seat of the chancre, no syphilitic eruption, no bubo, no ulcers in the mouth, no falling of the hair, no transmission of the disease. The patient will be free—absolutely free; and his wife will be free, and his children free. The accursed practice of traditional medicine in this disease, which for thousands of years has closed up nature's safety-valve by

cauterizing the chancre and thus suppressing the disease, causing her to seek another outlet in the form of an eruption, the bubo and the ulcers in the mouth, has caused generations to groan and entailed upon the human race physical conditions which are a disgrace and a burning rebuke to the medical profession. And then they will call themselves "regulars" and boast of "scientific medicine!" And, there is no apology. More than one hundred years ago Hahnemann demonstrated these things beyond question, and taught the world a better way. But "regular" ears were "dull of hearing," and their hearts were "waxed gross." And now, to think of it! So-called homeopaths, the supposed adherents of the founder, adopting this allopathic treatment of syphilis *altogether*, while they prate about homeopathy! No wonder so many of them agreed to not be known by any "sectarian name!" and no wonder their leading journal thinks homeopathy "is not all there is to the practice of medicine!" Oh, ye mongrels! Standing up in medical conventions, spluttering about homeopathy and deriding Hahnemannians, will not atone for the sin committed in *suppressing* syphilis, implanting a syphilitic miasm upon generation after generation and causing untold millions to suffer the tortures of the damned. Homeopathy, indeed!

And without borrowing from allopaths they can come no nearer curing *psoric eruption* and *sycotic gonorrhoea*. The disappearance of all external evidence of disease may fool the people; but by no means renders an ex-patient incapable of *innocently murdering his innocent wife*; for the patient believes himself cured, having been so informed by his physician—a so-called homeopath. The only absolute safe procedure is to cure by the gentle and certain measures of pure homeopathy, which extinguishes these diseases *from within out*; and when the external evidences disappear without any local treatment whatsoever, *the disease has been eradicated in its totality*. But no physician in the world can thus effect a cure of these dreaded and destructive diseases, *except the real homeopath*. How often did Hahnemann endeavor to gather the world's physicians together, as a hen gathers her chickens under her wings, and teach them this important lesson, but they would not? In my ignorance I once thought no man could cure syphilis without local treatment. Now I know any man can who will imitate the master with *exactness*; and the difference between *thinking* he can not and *knowing* he can, is only equaled by the distance between the poles!

Now, my dear young doctor, you can do this—any man can do this who will follow Hahnemann. When you learn to cure this disease by the indicated remedy, you will have the bull by the horns; for they cannot gainsay the cure. They can not cry out “mistaken diagnosis,” for any novice knows a chancre; nor can they say it got well of itself; for no such instance is recorded in all the annals of medical history. And those cases which have been suppressed, if curable at all, may be known to be *positively cured* when the old scar fades away—not before. When you learn to cure intermittent fever, uncomplicated haemorrhoids, warts, psoric eruption, sycotic gonorrhoea, chronic leucorrhoea and syphilis merely by administering the indicated remedy on the tongue you will have a higher appreciation of homeopathy, homeopathic remedies and homeopathic physicians.

But over and above and beyond these, you will have the highest appreciation of the immortal Hahnemann, the founder of the only scientific and perfect system of medicine known to man. See to it that no word or deed or influence upon your part shall ever detract from his glory and his name.

Finding the indicated remedy and confidently relying upon it when found, are subjects at once so vital and practical that I shall have to continue the theme in my next letter.

And the echo said: “I know of but *one homeopathy*. If men choose to practice something else, they should *call* it something else, and not mislead the living and defame the dead.”

Yours for Hahnemannian homeopathy,

J. C. HOLLOWAY, M. D., *Galesburg, Ill.*



IMPORTANCE OF DIAGNOSIS AND EFFICACY OF CURE.

BY H. C. KEHOE, M. D.

LAST OCTOBER I was called to see Mrs. H., age 51. She had two good allopathic physicians attending her, but she continued to grow worse. They had diagnosed the case uremic poison and held out no hope. She had not been out of her home for four months and not even to the dining table for two months when I saw her. She was told she would likely die in one of the nightly spells she was having. Of course the family was much distressed. Why not?

I was sent for and found the patient complaining of the following symptoms: Two years ago had a spell in the night, was unconscious; bladder acted involuntarily; no thirst; bowels constipated, belching relieved; feet in constant motion when awake; must move slowly about to get relief; thirstless; better in open air; puffy swelling; tearful, mild disposition; slightly jaundiced; aggravation from eating greasy food. Lately she had spells every night, unconscious and involuntary micturition.

I diagnosed her case nocturnal epilepsy and told her she would not die in the spells she was having, and that was better for her than the fatal diagnosis of my old school friends. She was gratified at this and so expressed herself. I told her I thought I could relieve her nightly spells, and left her *pulsatilla*, 30-x, in half glass water, to be taken every two hours. This patient had never taken any homeopathic medicine, and she was skeptical as to a few drops of medicine in a glass of water doing her any immediate good, and asked me what her husband should do in case she did have a spell, as he was in the habit of using camphor, whiskey and the allopathic drastic dose. I assured her she would not have a spell that night, but the family "set up" to see and the unexpected happened to them. She went through the night without an attack. Some two weeks after I began treatment she had a slight paroxysm, due to over-exertion from shopping during the day, and has not had an attack since. She got two doses of *pulsatilla*, 30-x, a month, one dose every fortnight and *sac lac* between times, and has continued to improve in every way except her bowels, and the constipation troubled her. For this she got one dose *pulsatilla*, 10-M, and has since remained well and bowels normal. She was in my office a few days ago, and her color was fine and general health splendid.

Cases of nocturnal epilepsy are considered incurable by the best authorities in the old school. This case and its cure has made many friends for homeopathy.

The point to be remembered is this: The diagnosis had nothing to do with the cure, but in going up against the dominant school, we must diagnose. The case could have been cured as diagnosed by the old school—*uremic* poison—with the use of *pulsatilla*. Here is where the pathologist loses and the symptom-atologist wins, very often, an easy victory.

Flemingsburg, Kentucky.



THE PATIENT.

BY JULIA C. LOOS, M. D., H. M.



THE FIRST CONSIDERATION, in the practice of homeopathy, is attention to *the patient*. It is necessary to estimate and adjust the remedy, each time, to the individual, as a unit, a living, changing responsive being: responsive to influences of environment but especially responsive to thought and emotional influences. The various parts of the body, the tissues and organs, however important or vital, in their development and their work, are simply parts of this unit and must never be considered and treated as separate from the entire organism.

In determining what is best to be done when the stomach or the lungs or the pelvic or any other organs are affected, we must always consider what is the relation of this part to the organism and what is the relation of the disturbance in this part to the disorder throughout the individual. The disorder is first in the individual and then localized in the tissues. In so-called systemic disorders, consideration must be directed, not to the systemic disturbance, by name, but to this individual who is afflicted with a systemic disorder.

Have you not looked at your patients in this way? Then you have not had successful homeopathic prescribing, whatever the form of your medicines may have been.

To heal the ulcer, dispel the inflammation, ease the pain, remove the sleeplessness, quiet the delirium or nervous excitement, relax the tension and improve the function of any organ are each and all, desirable and proper. These results are most effectively gained by adjusting the remedy (only one at a time), to the entire patient affected by these symptoms. Take into consideration also, what influences occasion and continue these manifestations. Consider first things first. The patient is first in disorder and the disorder in the patient will continue to occasion the same or similar disturbances repeatedly if the remedies are related merely to the tissue condition or used to deaden the sense of pain. When the individual thereby

will suffer loss of power, loss of general comfort and the last condition will be worse than the preceding.

Is there any better satisfaction than we have when the patient confesses that after treatment the internal heaviness has disappeared, there is more ambition felt, business cares are not oppressive, conditions of environment prove less irritating and the disorder which appeared in all the world is perceived not to have been in the world but one's own condition? With this improvement, we know that the bodily disturbances will change to order; the fever, chill, inflammation, pain, etc., will disappear. Is it strange that such internal changes are not realized except when the patient is the basis of the prescription? Such is the truth.

Careful prescribing requires large knowledge of the *ateria medica*, familiarity with good repertories and careful comparison, but most of all, success in prescribing requires attention to and clear perception of, the patient as a unit, as the basis of comparison of remedy and disorder.

Harrisburg, Penna.



A CLINICAL CASE.

BY J. M. S. CHESHIR, M. D.

THE NEW YEAR was little more than an hour old when my telephone called me out of bed and I was summoned to an obstetrical case, ten miles, or more, in the country.

I arrived at the place about 3 a. m., after a cold ride over rough roads and through drifted snow, and on examination found the os slightly dilated and rigid, membranes ruptured, vertex presentation, pains regular but weak and too far apart, frontal headache of throbbing character, and dilated pupils. Gave belladonna, 1-m, and waited.

5 a. m.—Headache much better; patient not so restless, but little change in size of os and character of pains. On account of chronic history given I then gave calcarea carb., 1-m.

9 a. m.—Headache all gone, pains irregular, slight change in size of os. Otherwise no change. Gave pulsatilla, 1-m. Pains soon became regular, closer together and of more force, and at 11:15 a. m. baby No. 1 was born.

On trying to remove the placenta I discovered another head presenting and at 12:40 p. m. baby No. 2 arrived.

The first placenta was then removed without any difficulty, but the second refused to evacuate. I tried the Crede

method, but it still stuck as though it was a permanent tenant. In slang parlance, "I was up against it," and it was a question in my mind whether to adopt old school methods and forcibly deliver the placenta or to prescribe for the patient and await results. I chose the latter course and dissolved a few drops of pulsatilla (mother tincture), in a half glass of water and gave teaspoonful doses every ten minutes and within an hour the placenta came away entire. Patient made a fine recovery.

Superior, Neb.



EPILEPSY.

J. C. FAHNESTOCK, M. D.

I WISH to give the second report of a case I treated in 1883. The first report I made of this case was before a medical society in 1888.

At that time I was politely informed it was a very good paper, fairly well written and very well read.

Another gentleman informed me if I only had given one dose of sul. 30, and given the patient a number of blanks the results would have been much better.

I now give the report as then given, and as to the results you are the judge.

I will here add that I was also advised to wait and see if there should be any further trouble.

I think there has been sufficient time elapsed to make this second report.

Mr. A. M. K., aged 15, light hair, fair complexion, very small for age. Father living. Mother died of consumption. He has two brothers living, both troubled with skin eruptions. One sister very small for age, pale, sickly looking and very thin. One of his uncles died of epilepsy, after having it for years. This boy enjoyed reasonably good health until 1883, when one day while playing with some other boys he had a "peculiar spell" as he termed it, fell down and cut his under lip, it requiring two stitches for its repair. I at once suspected epilepsy and instructed his father to keep watch over him and report if he should have another attack.

About one week from that time his father brought him to me and informed me that he had another attack during the night. He had been awakened suddenly in the night, and at once noticed the boy being very red in the face. Then he began to jerk, froth at the mouth; this lasted seemingly a five minutes, after which he fell asleep and slept for several

hours. Upon waking he complained of feeling badly and having headache.

At this time his appetite was good, bowels regular, seemingly no other trouble except those outbursts of "spasms."

I prescribed belladonna, 3-x, and again gave orders to have him carefully watched in regards to his symptoms. The following week he had three attacks, all of them at night, and reported to be harder than ever. His tongue bore evidence of the trouble, as it was severely bitter. At that time belladonna, 30-x, was given, and for a fortnight had no more attacks, but on the following week they came on again with renewed force and more frequent; belladonna, 30-x, one dose a day; reported next week just the same.

I then gave blanks for one week and studied up the case. Upon his next return found him about the same. He was then given sulphur, 30-x. He was given one powder on his tongue and blanks to be taken every four hours. The next week he had only one attack. Continued placebos.

Next week sulphur, 30-x, one powder, which was repeated the following week. There was no more symptoms of the trouble for six months, when, after eating quite a quantity of peanuts, he had another attack. Nux vomica soon righted up his stomach. Then a powder of sulphur, 30-x, was given, and was repeated two or three times.

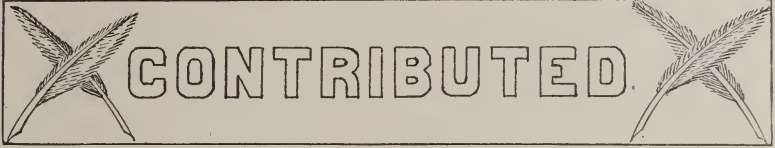
Has had no attack since July 1, 1884, at the time of reporting; he grew rapidly and was well.

As stated at that time we could only wait and see the results.

Results: No attacks since 1884 to 1910—a perfectly well man today.

Piqua, Ohio.





CONTRIBUTED

A REGETTABLE PRONUNCIAMENTO.



HE RECENTLY ISSUED "Statement of the Journal Committee" is believed to have been a serious mistake. Laying aside without prejudice the motives which probably prompted the document, a post-mortem pronunciamento of this nature can hardly be productive of effective results; while on the other hand, it may possibly further intensify personal feeling which became injected into the consideration of the subject last year, boding no good for the Institute and the journal question for the future.

Granted that the late Journal Committee felt a desire for a vindication—no one spoke for them at Detroit nor has written for their action since—this particular effort at a vindication seems to be an open attack upon the trustees. These trustees are nine in number, elected by unanimous vote of the Institute, not created by presidential appointment, as was the case with the Journal Committee, and to the nine are added the elective officers of the Institute, six in number. Thus fifteen of our most prominent and loyal members, including as trustees two members of the late and now complaining Journal Committee, constituted the body to whom the whole journal question was referred, after it had been thoroughly discussed in open session as committee of the whole. For no one can say that Chairman Sutherland did not give the widest possible latitude to the debate. All the trustees but one heard all that was said upon the subject, Dr. McClelland being the one absentee. And it is probable that all of them had read all that had been written upon it in the journals. So there is no reason why the Journal Committee should have been better able to diagnose and interpret the sense of the session, and the meaning of the vote, than the larger number comprising the officers and trustees.

Therefore, leaving out of consideration the question of hasty and ill-timed action at Kansas City, based upon the presentation of the subject by the chairman of the late committee, a presentation now admitted to have been impossible of fulfillment, as foretold at that session on the floor by the writer: passing over whether the contract entered into at Cleveland in 1908 equally protected the Institute and the publishing company; whether in general it was a sane and sound business document; not dwelling upon the thought that not all of our journals were given an equal chance; avoiding a discussion of the wide divergence between what was portrayed at Kansas City as easily and certainly possible and what was tendered instead; and not taking into account the wisdom or unwisdom of the investigation of the whole subject that was started in the open letter of the subscriber in the journals last spring, the question may now be simmered right down to whether it is wise, discreet or necessary to at this time further agitate this subject?

It is not so believed.

In this motion to refer the entire topic to the newly-created Board of Trustees and newly-elected officers, Dr. Runnels, with his usual sagacity and forethought, proclaimed the subject to be one that could not be properly dealt with in mass meeting. He held that it presented legal phases that had to be considered by lawyers. That it possessed a business side that had to be viewed not in the interests of one contracting party alone, but in the interests of both. And with a clear understanding of what they were doing, as members of the Institute who were at least twenty-one years old when they voted upon it, with rare unanimity of action the members sent it to the Trustees for their consideration and solution.

Now that the Trustees have acted, the writer confesses to no little disappointment that the man with the insatiable maw has again raided the treasury, and that a contract has been entered into that limits the Institute in journalistic possibilities. If it was to have gone into journalism at all it should have been with unrestricted hand. But that is neither here nor there. While the original agitator, some have said "disturber," on the subject, and while having felt very keenly upon it, the subscriber nevertheless fully believes that its further discussion will result in further bad feeling, further disruption, further disturbance of peace and good-will in the Institute, and that, therefore, no matter how loudly his great love for

the profession may be proclaimed, no member should now be found willing to cast discredit upon such a well-formed body as our officers and trustees in connection with their work in our behalf upon this vexed question. They had all the light that virile pen and versatile voice could throw upon it. They had the question as deeply at heart as any of us. They were neither previously committed to it nor irrevocably closed against it. They approached its solution with a generous heartedness that has appalled many of us, and with a deep-rooted conviction that grave responsibility rested upon them. To now flippantly criticise, cavil and condemn their action is to violently fracture the equities of the situation and to endanger the peace of the Institute, which many of us at Deroit were brought to realize was imminently at stake.

Not in passion nor with vehemence, but with a kind firmness that everyone should be able to understand, the Institute should quickly decide at Los Angeles to have no more of this. Personal opinions, preferences and predilections must be made to yield to the common weal. The peace which passeth understanding must settle over the Institute very soon, or one grand memorial service may be held over its passing. We are in the midst of crises which every astute member of our profession must see. It is not a time for strife and bickering, but for a settled determination to accept the dicta of the Institute with grace or retire from its deliberations.

Naturally always ready for the gauntlet, by some held to prefer conscientiousness to bread and butter, ever keen for a fair combat with a fair foe, the writer issues no truculent plea for "peace at any price." But personal politics and policies, coerced upon the Institute from time to time because of its grace and disposition to accept almost anybody and anything rather than be disturbed by wars with insistent factions and individuals, have brought grave dangers to the profession it represents and to their national association, and believing that only in harmony and brotherly love can we hope to regain the confidences of the profession at large and perpetuate our usefulness as an organization, the subscriber is of the opinion that all armor had best be laid aside and that the white-winged dove of peace should be unanimously invited to spread her beneficent wings above us.

In other words, let the dead past bury its dead, and in the slogan of the immortal Grant, "Let us have peace!"

C. E. FISHER.

February 14, 1910.

A. I. H.,

WE HAVE BEEN ASKED so frequently by the eastern members of the American Institute "What kind of weather will we have in Southern California in July?" that it seems best to say a word concerning it. Listen to what Uncle Sam says from the Southernmost Pacific Coast Government Weather Bureau Station, where climatological statistics are collected for Southern California, the follow data for 1908 is given:

Temperature, Degrees Fahrenheit.		
Annual mean	Highest during year	Lowest
59.9	84	37

When we consider that the humidity is as low as eighteen to twenty-five per cent when the temperature is highest, during the so-called summer time; and the highest, when the temperature is lowest, you can easily understand why even this variation is not noticed as much as the thermometer indicates. This is just the opposite of the Atlantic Coast climate, where during the hottest parts of the hottest days the humidity is often from eighty-five to ninety per cent, making existence intolerable. This is never feared on the California coast, and there is no place more sought after by those who know than just such a place as the American Institute is going to hold its next session.

The term "winter" and "summer" as commonly used in the eastern states have no application in California. The year is more properly divided into "rainy season" (winter), and "dry season." The dry season is the best of all the year, and July is the best of all the months in the dry season. Since 1884, the twenty-five years records have been kept, not one single drop of rain has fallen during the month of July, during nineteen years, while during the other six years an average of .07 of an inch has fallen, hardly a mist.

So we plan our activities knowing that neither rain nor excessive temperature will interfere with the participation of any one of the "doings."

If you crave an ideal vacation, under ideal circumstances, come along to the American Institute meeting at Long Beach, California, July 11 to 16, 1910.

Faternally yours,

WALTER E. NICHOLS, *Pasadena, Calif.*,

Western Chairman, Press Committee of the A. I. H.

WHY THEY DO IT.

BY C. E. DIENST, M. D.

A FEW DAYS AGO a leading allopathic physician of this city, whose delight is to reflect (?) on my "pill box," said, among many other very good things:

"Doctor, do you know that, if you will ask any regular physician in this town or any other town why he gives a certain remedy or combination of remedies, he has no answer for you?"

No, I did not know that.

"Doctor, do you know that if you will ask a good homeopath the same question, he will have a definite answer for you?"

Yes, I know this.

It makes all the difference in the world with a man who has a reason for what he does.

Aurora, Ill., Feb. 10, 1910.



WE PUBLISH ELSEWHERE a communication from the Transportation Committee concerning the trip to Southern California for the 1910 meeting. We bespeak careful attention of all members of the Institute who purpose going to the meeting. The *Journal* has no preference as to routes, but it certainly does wish to insist on due consideration being given the work of the Transportation Committee. The Institute has entrusted to this committee the making of arrangements with the railroads concerned. In a sense the members of the Institute should accept the results of the work of the committee, and should endorse its decisions as to the best route to take. Few of us know anything about it, and must necessarily be guided by what some one else says. It seems to the *Journal* the parties best qualified to give advice are those who are making a special study of the situation, and that, of course, means the Transportation Committee. Hence, we plead that the members going to California shall all pull together to the end that we may have one train, properly equipped, and an itinerary which would give the greatest satisfaction to the largest number.—*Journal of the American Institute of Homeopathy.*



EDITORIAL SECTION



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No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.



LOOKING FORWARD—Never within the history of the American Institute of Homeopathy, the oldest medical society in the United States, has so much enthusiasm been exhibited by the membership in any of its former gatherings nor has local pride and loyalty been more apparent than that already displayed in the precursory preparations for the sixty-sixth annual assembly of this association which holds forth in Los Angeles, Cal., July 11th to 16th, the present year.

Taking these distinctly favorable features as a guide, combined with the unflagging efforts of the Transportation Committee to look after the Institute's interests along transportation lines, and the added activity of rival roads in presenting favorable features of their respective routes, there remains but slight chance that this meeting will prove other than a record-breaker insofar as attendance is concerned.

THE CRITIQUE is more than pleased with the "official route" plan proposed by the Transportation Committee, but the persistency with which the praises of different routes are being proclaimed, along with conditions which have but recently developed, places the aforesaid committee in a very embarrassing position, and unless the membership look at the matter from a business standpoint there is a possible

chance that the good work already done by this committee will be very much wasted.

So far we have been unable to secure anything resembling a rate to present with this issue, but there is no doubt that a reasonable one will be given by the Transcontinental association, so this feature need not worry any one in particular; what is of the most importance, however, is the securing of a route, which, as we asserted last issue, would afford all the ideal requirements of speed, *safety* and scenery, and to which would be added, for good measure, the additional attractions of security and satisfactory service.

What THE CRITIQUE is specially desirous of suggesting at this time is the advisability of members of the American Institute making a trip either to or through Colorado a part of the proposed transportation program. The profession in Denver have held one meeting already and before the time arrives for action, there is no doubt but what complete arrangements will have been perfected whereby the Institute members may be made to feel that a short stay in Denver would be a real relaxation from the tediousness of a long railroad journey. In addition to the Denver doings we notice in *The Journal of the American Institute of Homeopathy* that the profession of Utah are planning a good time for the Institute should the route west take them through Salt Lake City. A trip to Saltair and a dip in the heaviest, most invigorating water on earth, and an organ recital at the Mormon tabernacle are only two of the things planned. The Utah profession will willingly join with their Colorado brethren in making these two stop-off events, memorable ones.

Besides the novelty it would afford the travelers, the benefit which the cause of homeopathy would derive from their presence in any community would be inestimable. There is a vast amount of missionary work to be done in this vast region which is rapidly becoming populated by a large number of intelligent people, and we can think of nothing else that would be more of a stimulation to the local representatives of homeopathy than to have a large number of high-class men and women of the profession "show" themselves. This very ethical and permissible practice has been in vogue for many years in different locations by different associations, and has proved of great benefit to the cause conducting such crusade.

We need your help here in Colorado; it is needed, also, in Wyoming and Utah, and this can be made a most auspicious

ous occasion to help all three localities and at the same time add to the enjoyment of your trip without adding anything to the cost thereof or taking too much valuable time from your homes and business.

Taking Chicago as a center from which a large number would commence the real journey westward, we are able to realize to a certain extent what this trip would mean to a majority of the members. *Via.* either N.-W. or St. Paul-Union Pacific route, is one of the most direct and at the same time decidedly the most advantageous, as both Denver and Salt Lake would be accessible. It is on the latter line that the great Salt Lake cut-off, the most novel feature of railroad construction in the world, is situated. Besides shortening distance, as well as time of the fastest trains, it adds something *entirely new* to the already wonderful scenic features of the road, a sight of Utah's water marvel from mid-sea, and gives the traveler the novel and interesting experience of being wheeled over the briny waves—"of going to sea on a railroad train."



'Overland Limited' on Salt Lake Cut Off.

While we are aware that the destruction, in part, of the San Pedro line has materially changed conditions in this country, there is a bare possibility that this line will be in operation by the time the Institute members are ready to commence their journey. In case this is not so the Union Pacific will be able to take good care of this business over their own old-established line, which has proved, in times past, superior to others even though somewhat longer. We are not authorized to make a schedule, but taking as a basis the time of one of its regularly established trains, run in connection with the eastern connection out of Chicago, we desire to present the following:

Leaving Chicago,	Monday,	July	4th,	11:30 p. m.	
Leaving Omaha,	Tuesday,	July	5th,	1:00 p. m.	
Arrive Denver,	Wednesday,	July	6th,	6:00 a. m.	(Via. U. P.)
Leaving Denver,	Wednesday,	July	6th,	7:00 p. m.	(Via. U. P.)
Leaving Cheyenne,	Wednesday,	July	6th,	10:30 p. m.	(Via. U. P.)
Arrive Ogden,	Thursday,	July	7th,	2:00 p. m.	(Via. U. P.)
Arrive Salt Lake,	Thursday,	July	7th,	3:30 p. m.	(Via. U. P.)
Leaving Salt Lake,	Friday,	July	8th,	3:00 p. m.	(Via. U. P.)
Leaving Ogden,	Friday,	July	8th,	4:20 p. m.	(Via. S. P.)
Arrive Sacramento,	Saturday,	July	9th,	3:00 p. m.	(Via. S. P.)
Arrive Fresno, Cal.,	Saturday,	July	9th,	11:00 p. m.	(Via. S. P.)
Arrive Los Angeles,	Sunday,	July	10th,	7:00 a. m.	(Via. S. P.)

This would be by what is known as the "Valley" route into Los Angeles, and would allow full opportunity for inspection of a most fertile portion of this wonderful commonwealth. Inasmuch as preparations are under way for entertainment of the Institute in San Francisco, the return trip to that city would be made over what is known as the "Coast" line, affording ample chance for contemplation of a decidedly different prospectus.

Reverting to the Denver end of the entertainment we desire to say that in conceding rates heretofore, it has been customary to allow privilege of side-trips through this state, which were great drawing cards to tourists and travelers in search of scenery and other pleasures. It is almost an absolute certainty these side issues will be a part of the attractions offered Institute members to secure their patronage. Over the route we have outlined above, should the special or other train reach Denver in the morning of 6 o'clock and leave at 7 o'clock in the evening, ample opportunity would be afforded the membership of choosing between a trip over the "Moffat Road," a day's trip to Cripple Creek and Colorado Springs, a trip over the famous "Loop," or the pleasures incident a short stay in Denver. The stop-off suggested at Salt Lake would give every one opportunity of participating in the program there to the fullest, and these two interruptions in the itinerary would prove welcome reliefs from the tedious monotony of travel over any other route. No

other line can cover such a wide range of scenic possibilities and the Transportation Committee's attention is called particularly to this fact.

The disposition of a certain line to "hog" all Southern California business, and refusing to accept car lots or special trains from other lines out of Denver, owing to misfortunes which have befallen the San Pedro line, is not a healthy one and should set the membership to thinking of some way out of the dilemma without humbling themselves to any particular person or corporation. We believe the Transportation Committee will see daylight ahead in the foregoing suggestions as to route and time, and trust they will give the proposition careful consideration before compromising the Institute by selecting an "official route" under protest.

The Union Pacific, as well as its connections east of the Missouri river are double-tracked and protected by automatic danger-signals and other modern devices calculated to reduce the chance for accidents, delays and other annoyances to a minimum. It is impossible, in an article of this kind, to outline the entire list of scenic attractions to be encountered in a trip of this kind, but of all lines west there are none where so little that is monotonous is to be found. The road bed is the best; heavy rails, rock ballast and steel bridges; the motive power and rolling stock the best that money can provide; the dining car service of superior quality and, taking everything into consideration, no better choice could be made than the Union Pacific as the "official route."



WE are more anxious, however, to make public the many new show places that have been discovered and developed in Colorado within the past two or three years than to tell of old scenes so familiar to the traveling public. The pictured part of this articles represents entirely new developments and we assure our readers that what we have reproduced in this issue is a very limited portion of what has been opened up by the building of new lines and the extension of old. The famous Georgetown "Loop" is still one of the drawing cards, to which has been added several miles of sky-climbing by the building of the Argentine Central. By this new attraction a very decided advantage has been given the old standby and there will be many who will, no doubt, be anxious to see it. The "Seeing Denver" program is one which adds much to the pleasures of a day's sojourn

in this city. The company operating the cars and automobiles has indicated a willingness to aid in the entertainment of the guests during their stay in this city, and THE CRITIQUE considers this a very decided advance in the entertainment arrangements.

No enterprise of recent years, however, has added so much to Colorado's attractiveness as has the construction of the "Moffat Road." Running as it does through one of the most delightfully rugged and, until recently, almost undeveloped countries, it has uncovered a most marvelous panorama of natural grandeur. We are indebted to Mr. Jones, traffic manager of the line, for use of some specially prepared scenes to be encountered in a day's ride over this line and as they are solely for the purpose of showing some of the more recent additions to our scenic wonders and have never been used even in the advertising literature issued by this company, we believe even a casual glance at the same will convince the most skeptical there is, at least, something new under the sun so far as scenery is concerned. We have taken the liberty of re-christening one scene, however, and shall call this



The Hay Fever Victim's Haven

Of course, that is not what the Moffat people call this, and the fact of the matter is it is only one of the many sights to be seen on most any summer day within a little more than two hours' ride from Denver. The banks of snow on either side of the track are a sure and almost instantaneous relief for the torments of hay fever, and as many of the profession are afflicted thus and make long journeys to different resorts for the purpose of finding even temporary relief from this terrible affliction, we are printing this bit of information in the belief it will induce many thus afflicted to try Colorado in preference to any other place.

All along this line is one continuous surprise even for those familiar with mountain scenery in this and other lands; old residents of the state, accustomed as they are to startling revelations, which are being uncovered in the rapid development of new localities, marvel at the magnitude and magnificence of the many new show places to be found on the "Moffat Line."



"Yankee Doodle" Lake, on Moffat Line.

This road runs out of Denver, Colo., toward the west, climbing the great range of the Continental Divide, sixty miles west of the Colorado metropolis, and passing through

some of the most marvelous scenery, upon which the traveler's eye has ever rested. The line has been surveyed from Denver to Salt Lake City, over a route which is almost exactly 500 miles in length. This is 200 miles shorter than any of the other roads between Denver and Salt Lake City, for the reason that these roads must go to the north, cross the plains of Wyoming and then turn southward again to reach the Mormon capital, or wind through the mountains by a southern route and turn northward into Utah's chief city. The "Moffat Road" scorns the expedient practiced by the early railroad engineers of crossing the mountain ranges at some of the infrequent passes, which make gaps in the huge ridge of the Continental Divide. This new line begins to climb the long slopes of the mountains almost immediately upon leaving Denver and winds on and up the rugged slopes of the great divide, crossing it at an elevation of 11,660 feet, and winding down its western slope by the easy grade secured by a series of loops and curves.



Byers Canon, on Moffat Line.

The "Moffat Road" is 214 miles long, and on its route there are fifty-five tunnels, some of them being but mere reaches of rock above the tracks, while others are several

hundred feet long. The novelty of winding in and out of these tunnels and climbing by loops and curves up the side of the mountains, high above the lakes and streams, which appear like flecks of silver below, lends a charm to this trip which hitherto no other scenic line has been able to provide. On the crest of the Continental Divide, at an elevation so high that trees do not grow, the snows of winter endure until winter comes again, and the snow banks of one frigid season, partially melted in the rays of the summer sun, are covered by the pearly precipitation that heralds the coming of another winter. This region of perpetual snow is only a three hours' ride from Denver and tourists marvel at this feature of the trip, which gives them an opportunity to engage in snowballing in mid summer a few hours distant by rail from a city of more than 200,000 people.

The first forty-seven miles of the "Moffat Road" has a grade of 2 per cent. The next fifteen miles is a 4 per cent grade, which brings the train to the crest of the Continental Divide, and from this point on the course of the track is downward on the western slope of the mountains, passing through deep canons on its way to the west.



Grand Lake, on Moffat Line.

These canons were apparently formed as outlets to an inland sea. An old ocean was receding from the heights of land ages ago. Geologists who have prospected the Rocky Mountain region for evidences which would prove the existence of these bodies of water, say that the shore line of immense lakes may be traced by the rock formations which show vegetation and bugs imbedded in the stone in practically the same form as that in which they existed before the water receded through the great canons and left the dry beds of these lakes to be known as immensely fertile valleys.

Gore Canon, in the ancient days, was the outlet for what is now Middle Park. The action of the water passing through this narrow defile in the mountains wore a great gap in the range, along the bed of which the Grand River now passes on its way to the sea. This is the only natural outlet for the immense water shed of Middle Park. During the early spring when the abundance of snow upon the mountains feeds with a thousand tributaries this peculiar river, Gore Canon roars a thunderous chorus as the muddy waters of the Grand tear through the five miles of its stoney bed.

To build a railroad through this canon a shelf had to be blasted from the rocky wall to provide a pathway for the trains. This task followed that of surveying the line, which was in itself one of peculiar danger and extreme difficulty. In order to establish the grade through the canon man and instruments had to be lowered by ropes for hundreds of feet on the face of the beetling cliffs. The walls of the canon rise sheer 3,000 feet in places and the engineers worked in constant danger, for a misstep on the precarious foothold they were able to obtain in the crevice in the rocks would dash them to death in the torrent below.

The "Moffat Road" derives its name from its builder, D. H. Moffat, the banker philanthropist of Colorado, who came to the state in the early days and amassed a fortune of many millions. A glance at the map of the State of Colorado will show that its northwestern section contains a vast area of agricultural land into which none of the transcontinental lines penetrate. It has been the ambition of Mr. Moffat to build his road through this vast undeveloped territory that this rich region might provide homes for thousands of families who, in after years would speak his name to praise him. It has cost an immense sum of money to construct a railway over the rocky path marked out for it in crossing the great Continental Divide, traversing the deep

canons on this route to the new land of opportunity. Those who are familiar with railway operations say that vast as have been the sums expended, they are not nearly as vast as will be the profit gained by the daring builder, who contrary to the advice and tradition of railway construction, undertook and achieved this notable feat of building a railway across a mountain range in such a manner that it can be successfully operated as if its rails were laid on level ground.



FOR MANY YEARS PAST the Denver & Rio Grande railroad has furnished transportation facilities to seekers after the beautiful in nature, with some of the most sublime and awe-inspiring mountain scenery found any where in this wide world. So accustomed is one of associating this line with "scenery" that much which is of a more practical purpose has been overlooked.



Black Canon of the Gunnison Where Water is Diverted from the Gunnison River.
On Line of D. & R. G.

Inasmuch as nearly everyone is familiar with the oft-produced pictures of scenes along this line, we are omitting much that would add to the artistic atmosphere of the edition, and present something that we hope will attract the attention of a certain class, which will be represented on this trip, to the wonderful development of this wonderful country by one of the most gigantic irrigation and reclamation propositions ever undertaken.



Valley or West Portal of the Gunnison Tunnel, on Line of D. & R. G.

On September 23rd of last year, the president of the United States, "by a simple twist of the wrist," opened the great gates of the Gunnison tunnel. By this act of the government a whole river has been drained from its granite-bound channel, in which it has flowed almost since time began, and carried through *six miles of tunnel* 2,500 feet below the granite crest, to the head of one of the most beautiful and fertile valleys which lie under the smiling sun of Colorado.

Before this marvelous accomplishment there was one acre of orchard land for which there was water, while there stretched away, bare and brown, *ten acres of land just as good*, for which there was no water and which was, in consequence, practically useless. Now all is changed and the Uncompahgre valley "blossoms as the rose" from one extremity to the other.

It will pay members of the Institute who are interested in fruit growing and other agricultural pursuits, to take a day or two off and investigate this feature to be found in such abundance on the line of the D. & R. G.

The scenery, so famed in song and story along this well known and well beloved route, is still there in all its magnificent grandeur, we simply digress in this manner in hopes of giving all tastes ample information concerning the many-sided features to be found in what we hope to bring about, either a trip to or through Colorado by members of the American Institute during their visit west.



MISCELLANEOUS

Remember the date: Saturday, March 5th, 6:30 p. m.

What good would come from joining a meat boycott with hay \$14.00 the ton?

Think Union Pacific when you consider the "official route" to the Institute meeting.

Denver should have a strictly homeopathic hospital. Will some one please produce the funds?

There are several new advertisements in this issue to which we desire to call attention of our readers.

Did you attend the meeting of the Homeopathic "host" at the Albany hotel, the 19th of last month. If not, why not?

Dr. Willard believes in having the Club meetings proceed with some "snap." That sounds good, and we believe the members will profit by the suggestion.

Don't forget that the sixty-sixth annual session of American Institute of Homeopathy will be held in Los Angeles, Cal., July 11th to 16th inclusive. Get in line.

The Pennsylvania Railroad Company has in its employ thirteen-hundred and fifty men who have been in its service forty years and over. Pretty good record for all concerned.

Get your paper ready for the State Society meeting. Resolve to attend the next meeting of the Denver Homeopathic Club. There are lots of good things ahead for all in both of these events.

Dr. Ella Griffith, Denver, Colo., has been "grandma" for some time. No one would ever suspect such a thing unless the smile she usually wears were to give the snap away. But she always wore that, you know.

During the past month the business manager of THE CRITIQUE has been very much on the retired list on account of a severe siege of sickness. We are pleased to say, however, at this writing, he is on the mend.

THE CRITIQUE publishes elsewhere a full list of officers and bureau chairmen for the forthcoming meeting of the Colorado Homeopathic State Society. Get your paper ready and make this meeting a good one.

Oh, women, you were made to please,
And bag men's trousers at the knees;
While man, poor man, was made, alack!
To button women up the back.—*Stolen.*

The first pardon issued by the present executive of Colorado was to a preacher. The preacher governor who preceded him passed them out on the slightest provocation regardless of one's profession. But that is past history.

Beginning with the January, 1910, issue the old established *Medical Review of Reviews* will be edited by Dr. William J. Robinson, editor and founder of the famous *Critic and Guide*, *Therapeutic Medicine*, and *The*

American Journal of Urology. The editorial offices of the *Medical Review of Reviews* have been removed to 12 Mt. Morris Park W., New York City. The scope of the journal will be enlarged and every department will be strengthened. The subscription price remains the same, namely, \$2.00 per annum.

Dr. Charles Gatchell, former secretary of the A. I. H., died in Los Angeles, Cal., January 19th, 1910. He was located in Chicago for many years and was well and favorably known to the homeopathic profession throughout the country.

Dr. W. R. Tubbs, formerly of New York City, is one of the most recent additions to the homeopathic ranks of Denver. He has taken Dr. R. O. Butterfield's offices in the Tabor Opera House block. THE CRITIQUE extends cordial greetings to the doctor.

THE CRITIQUE has been informed that the Physicians' Casualty company of Omaha is the only company inclined to contest the claim of Dr. J. B. Kinley's heirs. If this is a fact it would not be at all unwise for members of the profession to investigate this concern.

WANTED—A location by a homeopath, with hospital and sanitarium training, contract and private practice experience. Best of references; married; age 29. Will consider contract work, partnership or independent practice. Any part of country. Give proposition in detail. Answer, "L," care THE CRITIQUE.

There will be eighteen vacancies to be filled on the interne staff at the Metropolitan Hospital, New York City, on June 15th. Examinations for the positions will be held on April 1st at the hospital. Applications should be addressed to Edward P. Swift, M. D., Chairman Examining Committee, 170 West 88th street, New York.

The Children's hospital of Denver, finances of which were juggled by one of its officers several years ago, and which resulted in her receiving a penitentiary sentence, was opened for business the latter part of last month. From present indications this institution will be of vast benefit to the profession as well as the children.

Dr. Laura E. Stockdale, a prominent member of the Homeopathic profession of Colorado, died in Denver the 27th of January, of Bright's disease. She was a graduate of Hahnemann, Chicago; was 67 years of age at the time of her death and leaves one son and a wide circle of friends to mourn her demise. THE CRITIQUE chronicles this occurrence with deepest regret.

One of the largest attended meetings held by homeopathic physicians in this city for several years, occurred at the Albany hotel, Saturday evening, February 10th, 1910. It was for the purpose of reviving the old Denver Homeopathic Club and how well the object was accomplished need no further mention than that there was an almost unanimous sentiment expressed favoring the "standing together" of homeopathic physicians of this city, and it was further agreed to continue the club under the *old name*. Some thirty men and women of the profession sat down to a bountifully burdened board and enjoyed an hour of social intercourse; as a result everyone was in prime good humor so that when the business end of the proposition was reached the things promised on all sides for homeopathy were "a-plenty." Dr. Clinton Enos presided, Dr. Vinland being detained from the meeting by pressing business engagements. Several of the older members of the profession, notably Doctors Burnham, Smythe, Hoag, Willard, E. H. King and others, gave some rousing remarks, all bringing out the necessity for uniform action and support of *homeopathy*. It was pretty generally agreed that the Colorado members would be only too happy to

see the A. I. H. members in July, and there is no doubt but what preparations for their entertainment will be made in case they conclude to come our way. A committee, consisting of Drs. Dake, Smythe, Fisher, J. B. Brown, Pollock and Mastin, was chosen to prepare details for the future conductment of the club. The next meeting will be held Saturday evening, March 5th, and it is hoped that every homeopathic physician in the city will be present at that time.

COLORADO HOMEOPATHIC SOCIETY.

Officers, Committees and Chairmen of Bureaus for 1910.

PRESIDENT—S. S. Smythe, M. D.

FIRST VICE PRESIDENT—L. E. Bartz, M. D.

SECOND VICE PRESIDENT—George C. Lamb, M. D.

SECRETARY—C. M. Worth, M. D., 620 Fourteenth St., Denver, Colo.

TREASURER—James B. Brown, M. D.

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James W. Craig, Chairman, Ault, Colo.; P. D. Russell, Walter M. Dake, N. A. Cramer, Jeanette Osborn, S. B. McFarland, R. D. P. Brown.

Board of Censors.

Walter J. King, Golden, Colo., Chairman; O. S. Vinland, E. B. Swerdfeger, Clinton Enos, George E. Osborn, Margaret H. Beeler.

Legislative Committee.

David A. Strickler, Chairman; C. D. Fisher, Frederick A. Faust.

Publication Committee.

J. G. Locke, Chairman; J. P. Willard, George E. Brown.

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MATERIA MEDICA: James W. Craig, M. D., Chairman, Ault, Colo.

DERMATOLOGY: Margaret H. Beeler, M. D., Chairman, Denver.

GYNECOLOGY: L. E. Bartz, M. D., Chairman, New Windsor, Colo.

SANITARY SCIENCE: George C. Lamb, M. D., Chairman, Canon City, Colo.

MENTAL AND NERVOUS DISEASES: Carl D. Fisher, M. D., Chairman, Denver.

THEORY AND PRACTICE: James P. Willard, M. D., Chairman, Denver.

OPHTHALMOLOGY AND OTOTOLOGY: David A. Strickler, M. D., Chairman, Denver.

SURGERY: William R. Welch, M. D., Chairman, Denver.

TUBERCULOSIS: Walter J. King, M. D., Chairman, Golden, Colo.

PATHOLOGY AND BACTERIOLOGY: James B. Brown, M. D., Chairman, Denver.

OBSTETRICS: James W. Mastin, M. D., Chairman, Denver.

PEDIATRICS: W. A. Jones, M. D., Denver, Colo.

CHICAGO LETTER.

Dr. D. M. Snell, Hahn. '05, is now located at Kalamo, Mich.

Dr. S. W. Murphy, Hahn. '09, has opened a Chicago office in the Venetian building.

Dr. O. D. Critchfield, Hahn. '10, is a patient in the hospital, having undergone a surgical operation.

The dance given by the Sophomore Class in Hahnemann Medical College, Monday, Feb. 14th, was largely attended and every one had a good time.

Dr. McNeisch, president of the London Homeopathic Medical Society, is taking a post-graduate course in *Materia Medica* at Hahnemann Medical College.

Dr. L. C. Bassett, Hahn. '10, recently made a trip to his home in New York and brought his mother back to Chicago. She is now a patient in the Hahnemann hospital.

The Usticon Fraternity recently held their annual convention in Chicago, several Eastern colleges being represented. A good time was enjoyed by those in attendance.

Announcement is received of the marriage, on Feb. 2nd, of Dr. V. Taber Carr, Hahn. '07, to Miss Lacy, of Penn Yan, N. Y. Dr. Carr has been located in Greenville, Ohio.

The February meeting of the Chicago Homeopathic Medical Society was held Thursday evening, February 17th. A paper by Dr. S. H. Aurand on "The Therapeutic Lamp," was presented and discussed.

The January meeting of the Chicago Homeopathic Medical Society was held on the 20th. A paper by Dr. Tenney on "The Opsonic Index," and one by Dr. E. A. Taylor, "Our Standard." Both were interesting and thoroughly appreciated.

Dr. Charles Gatchell, former professor of practice in the Chicago Homeopathic and Hahnemann Medical Colleges, died in Los Angeles, Cal. Burial took place at Hudson, Wis., Jan. 31st. Dr. Gatchell had been living in California for the past few years.

The meeting of the Regular Homeopathic Medical Society was held Feb. 1st. A paper by Dr. Gilbert Fitzpatrick, "The Mammary Gland and Its Relation to Infant Mortality," and one by Dr. J. P. Cobb on "Epilepsy," were instructive to those who attended the meeting.

The trustees of the Chicago Public Library have given to the Regular Homeopathic Medical Society the use of their lecture room for the purpose of public lectures to the laity on "Homeopathy." The following are the subjects for the month of February: February 4th, "Our Dual Minds (Organon Sec. 9); February 11th, "The Art of Self-Control;" February 18th, "Homeopathy—Our Standard;" February 25th, "Why Homeopathy is Superior to Every Other Form of Mental Healing." The meetings are well attended and audiences interested.

Chicago, Ill., February 18th, 1910.



THE KEY TO SUCCESSFUL PRESCRIBING.

LETTERS TO A YOUNG HOMEOPATH. LETTER No. 6.

Finding the Indicated Medicine—Illustrative Cases.

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MY DEAR DOCTOR: Experience will teach you to recognize much in the facial contour of your patient. You will learn to see what is hard to explain in words—that which tells you at a glance your patient is going to die; and if his vital force has become so overpowered by disease that it can not afford a reaction, he will die. Likewise you will learn to gather in from his facial expression certain objective symptoms which will be of great value in constructing the type of his individual sickness, or, which forms the *image*. So in the study of provings or pathogeneses of drugs, you will learn to distinguish the different artificial images as you distinguish one neighbor from another. The symptoms which two remedies have in common may lead you to choose the wrong one, for a given case, if you fail to institute that differential examination which separates them. And for this purpose, I know of no work so practical and so valuable as Gross' Comparative Materia Medica. This book was not written for *generalizing* physicians, nor will they ever devote to it that time and earnest study which would enable them to utilize it in the differential diagnosis of such remedies as are similar in their effects; nor are they at all competent to judge of its merits. But ask any *real* homeopath and he will speak in its praise. It is *analytical* and reliable; and it will enable the true homeopath to combat "the total features of the disease with the total *character* of the remedy."

Aconite and belladonna look as much alike as two men approaching at a distance; and yet there is as much difference

between them as between Smith and his neighbor. They both have fever, thirst, congestion, throbbing caroteds, blood-shot eyes, etc. Now let us separate them: Aconite, left side, especially the lower left and upper right; belladonna, right side, especially the lower right and upper left; aconite, arterial system dominant; belladonna, venous system dominant. Aconite, the suffering parts are hot; belladonna, the suffering parts are *often cold*. (Still, the heat of belladonna is so intense that the examiner *carries it away in the ends of his fingers*.) So in a case where the suffering parts are *cold*, we would not think of aconite, but belladonna. Aconite, cold creeping upwards; belladonna, cold creeping downward. Aconite, thirst in all stages for large quantities; belladonna, thirst not frequent during the chill; generally not constant, and for small quantities. Aconite, sleeplessness after midnight; belladonna, sleeplessness before midnight. Aconite, mental ecstasies; belladonna, mental dullness more frequent than ecstasies. Aconite, fear of loss of reason or of death; belladonna, fear of poisoning or apoplexy. Aconite, ailments following fright, or vexation with fright, with fear, or with vehemence; belladonna, ailments following fright, anger, mortification or vexation. Aconite, pupils first *contracted* then dilated; belladonna, pupils first *dilated* then contracted. Aconite, aversion to light, particularly sunlight; belladonna, aversion to light, particularly artificial light. Aconite, retention of urine, more frequent than incontinence; belladonna, involuntary discharge of urine, more frequently than retention. Aconite, catamenia generally too late; belladonna, catamenia prevalently too soon. Aconite, remission during the *day* and before midnight; belladonna, remission during the *forenoon* and after midnight. Aconite, worse when standing; belladonna, predominantly better when standing. Aconite, predominantly worse when stooping and sitting bent forward, after lying down, in bed, being wrapped up, from change of position, in the room (congestive and catarrhal complaints), and when opening the eyes; belladonna is predominantly better from all the foregoing. Aconite, predominantly better when sitting erect, from being

uncovered, when walking in the open air, and when closing the eyes, and belladonna is predominantly *worse* from the same.

During a high fever aconite skin is dry, while belladonna skin is usually moist. It will be apparent how the inevitable characteristics of medicinal powers rest on just such a difference as the foregoing shows, which is chiefly quoted from Gross. The homeopathic physician must be a close observer, and a splendid judge of human nature. And while he must study the provings of drugs so critically that he is able to perceive the *nature* of each, he must, at the same time, be able to write out those symptoms of each drug which *distinguishes* it from all others; that is, out of each proving he must construct the *image* of that artificial sickness, the "pure picture," the portrait; and these must consist of the *odd, peculiar, unusual, distinguishing* symptoms.

Now some of these images become so familiar that we recognize them in natural sickness at once, just as we do old friends whom we have known for a long time; but there are other persons with whom we have had a "speaking acquaintance" and with whom we come in contact unexpectedly, and we say: "Your face looks familiar, but I declare I can not call your name or remember where I met you." But by and by you observe a *mole on his neck*, and that brings up the past in great vividness and you shake his hand in a way that convinces the onlookers that you fully recognize your old friend. So in our very extended acquaintance with drugs, it is not surprising that there are a *great many* with whom we have but a "speaking acquaintance"; and some who are perfect strangers; and others again whom we recognize after observing the "mole on the neck," the crooked finger, the club foot, etc. Now these peculiarities are the *key-notes*, and it is a good thing to know them. Every drug has them; but you may be puzzled over a case of serious sickness, sitting there with one hand on your jaw and racking your brain to know what to prescribe, when the "mole on the neck" is in plain view, but you do not see it. If you could but see *that*, then you would recognize his big feet, curley hair,

prominent teeth and squeaky voice—in a word, you would recognize your old friend who is locked up in your medicine case and ready for effective service at your bidding. But you do not recognize him; and you do not even observe the “mole on the neck.” Now right here is the *imperative* need of a good repertory. It is *indispensible*, whether consulted at the bedside or in your office. It will point you to one with whom you have had a “speaking acquaintance,” but whom you had entirely forgotten; or introduce you to a perfect stranger who is able and ready to step in and save a human life.

But the habit is all too common, especially with beginners, of committing a few key-notes of a few remedies, and then approach the bedside of natural sickness in this fashion: the patient gives the first outline of his sickness, during which he mentions a key-note with which the doctor is very familiar. The doctor then begins to ply his questions, with that key-note and its remedy in his head, and exercises his utmost skill in trying to *bend* the case of sickness to suit that remedy. If he had better judgment, more experience and a *familiar* acquaintance with the polycrests, he would know soon as he tried the shoe on that it *would not fit*.

I doubt very seriously whether any physician ever reaches the degree of proficiency in which he can make a safe and careful prescription by *intuition*; but I feel sure I am giving good advice when I say to all beginners: “For the first few years of your practice, *rely wholly upon a good repertory, carry it with you, and use it at the bedside and in your office*. By and by those drug-traits for which you used to have to search, come to your mind readily and you know what the repertory says without opening it; but you will never become so perfect that you will not need it at times.”

One of the most interesting and profitable studies in the world, is the study of a drug-proving with a view of ascertaining what its real *image* is; of learning those symptoms which *distinguish* that drug. But, though you thus become familiar with ever so many drugs, you should dismiss them all from your mind as you enter the patient's room. *Get the image, the “pure picture” of the patient's*

individual sickness first; then call up the army of volunteers, either from memory or by aid of a repertory, and choose that drug which has produced an image of artificial sickness *most similar*. Another matter I must not forget to call your attention to: in many cases of chancre, skin eruption, etc., you can not find the indicated remedy until you give a dose of sulphur high, and let it work; just as in many cases of chills and fever you can not find the indicated medicine until you give one dose of cinchona and let it work. Hahnemann teaches this, and every true homeopath of any considerable experience knows how true it is.

And another thing you ought to know: a lady comes to you complaining of leucorrhoea, and employs you to treat her. Now you are not to institute a search for the indicated medicine for *leucorrhoea*, but your first task is to secure the totality of her symptoms, the image of her sickness, and find the indicated medicine for your patient. Even if she has a dislocated uterus, you should not resort to any local treatment, unless that organ should be below the promontory of the sacrum. You will need no suppositories, tampons, or any other old-school make-shifts. In questioning her, when you reach that part of the general outline of her case which she has given and which you have noted, headed "*Leucorrhoea*," propound these questions: "How long has this leucorrhoea existed? Is it bland or acrid? What is the color of the discharge? What color does it stain the linen? Will you give me an idea as to how profuse it is? When is it worse with reference to menstruation? With reference to position? With reference to day or night? You say daytime. Do you mean daytime *only*? What part of the day is it worse? Is it intermittent or continuous? Painful or painless? Describe the odor, if any. Is the discharge coagulated or of a thin consistency? When or under what circumstances do you observe those clots or lumps dropping out? How is this leucorrhoeal flow affected by coition? By excitement? By active exercise? By exposure to cold or dampness? By micturition? By rising from a seat? By stool? Have you ever had a skin eruption? Was that treated by local applications? Have you pains in the abdomen? Describe the character of those pains. Where do they begin and to what point do they extend? When do these pains occur?" And so in this fashion you question your patient with reference to every complaint which she has mentioned. Remember, while she applied to you for a

cure of the leucorrhoea, your aim must be to cure the *patient*. In doing this, the leucorrhoea will disappear incidentally.

Suppose another lady steps into your office and, extending her left hand which is covered with big, ugly, bleeding warts, says: "Can you cure those without local application?" Of course you can (if you know how!) but while she expects you to merely cure the warts, your purpose as a true homeopathic physician will be to cure *her*. As you accomplish this *desideratum*, the warts, as by magic, will disappear *de tempore*. No true homeopathic physician has a remedy "for warts," but he has the indicated medicine for the *patient*. He prescribes by the totality of the symptoms as the *true representation of her internal, hidden disease*, and the warts are a part of that representation. In prescribing, you pay far less attention to the warts than to those *striking, peculiar, unusual and distinguishing* symptoms which always exist in such a case, either developed or latent. If developed, use them; and if latent, develop them.

Now let me give you the picture of a case in my practice of about two years ago. A lady of about thirty years, a blonde and married. She applied to me for a cure of seven large warts on the right hand and fingers. They were of the bleeding variety and would get very sore. They were a source of great embarrassment to her as every one who would shake hands with her would remark about her warts. Here is the pure picture of her individual sickness which I secured: Low-spirited, very nervous, *corroding* leucorrhoea with much itching of the vulva; menstruation always too late; great sadness *before menstruation*, also *distention of the abdomen*; great hunger, but *she experiences a sensation of fullness after eating a small quantity*, and must desist; coldness and swelling of the feet *before menstruation, particularly the left foot* and ankle, the left ankle would always puff up first; the character of swelling was *oedematous*, and continued *during* the menstrual flow. She had always looked on the bright side of life, but for several months had been very sad without any known cause, and this symptom was always aggravated *before* the monthly flux. After spending about one hour and a half, the foregoing was all I could learn of her case, but this was enough. Now, to make it easy for you I will show you how I went about the important business of finding the indicated remedy: first, I opened Kent's repertory, page 79, and noted the fact that some two hundred medicines are given in the general rubric, "*Sadness and mental*

depression.” The image of her sickness, said I, does not contain a more important symptom than that mental one. So instead of writing down this extensive rubric, at each step of the investigation I shall glance at this rubric and see if the remedy in question is there.

Second, I turned to page 930 and found: “Cold feet before menses—calc., hyper. lyc. Thus I reduced the list of some two hundred remedies in the first rubric (sadness), to *three*; and one of these three in italics—*lyc.* Now I began to feel like the boy who, when fishing, got a “nibble.” I was about to land my indicated medicine, for I knew it must be one of these three. Then I turned to page 1140, and in the rubric, “*Oedematous swelling of ankle,*” found that of the three only one was in the list—*lyc.* Now lycopodium has the *sadness*, the sensation of fullness after eating but a small quantity, the acrid leucorrhoea, distention of the abdomen, cold feet before menstruation, oedematous swelling of ankle—and as *lyc.* is a right-sided remedy in the upper extremities, we might expect it to affect especially the *left foot*, and, as a final *clincher*, I turned to page 1160, and under, “*Warts, hand,*” *lyc.* was in the rubric. Then I opened Hering’s Guiding Symptoms and read a more beautiful and exact description of my patient’s sickness than she herself was able to give. I gave her a few doses of *lyc.*, 3-M, and the whole disorder disappeared—warts and all. *Wasn’t that easy?* Now, my dear doctor, anybody can do that who will follow Hahnemann. And the best of it is, you will feel *entitled* to the proud distinction—*homeopathic physician!* Nobody, let me assure you, but a real homeopath can make such cures. The doctor who, having graduated in a so-called homeopathic college, agrees by written contract to be known “*simply as a doctor,*” evidently has an inward consciousness of the fact that he *does not know how* to practice homeopathy.

Now let us take another case out of my individual practice of a few months since. This time a lady suffering from skin eruption. Of course, she insisted upon a name for the thing, and I called it *herpes zoster*. But that did not help me in the task of finding the indicated medicine for that individual sickness, not in the least; for no work on theory and practice in my library gives or even mentions the remedy that cured her, in the treatment of this disease. Situated on a reddened base, were small transparent vesicals filled with clear serum on the left side of her face, and this would ooze enough to wet the pillow at night; but on her forehead, right

side of face, back, neck and chest, the skin was swollen quite thick, rough and dry and would *itch intensely*, also *burn* after scratching or rubbing. She would take her apron and rub frantically. Her eyes would also *itch* and *burn*; the itching and burning were always much worse about nine or ten o'clock at night, when becoming warm from exercise, when near a hot stove and when bathing in warm water; relieved by keeping cool and by bathing in cold water. *She always felt worse every morning*. In disposition she was naturally very amiable, but now very cross and irritable. Her tongue was coated a thick, yellowish-white—what I often call a *dirty tongue*; she often had *ineffectual efforts to stool*; had a *yellow appearance* around the nose and mouth, and an *earthy, yellow face*; *accumulation of saliva in the mouth*—would run out on the pillow at night; skin and hair *very dry*; leucorrhoea which *stained yellow*. This is the image which I noted. Now instead of working out the remedy here, I will tell you what it was and let you see if you can ascertain why I gave that medicine. That is what Hahnemann did with his student when he told him he cured that woman who had the warts with *Chamomilla*. Well, I cured this woman, a splendid wife and mother in a splendid home, with *nux vomica*, 1-M. But here is a peculiarity I must give you. After deciding that *nux v.* was the indicated remedy, I gave her one dose of the 1-M, but got no results whatever. I then gave her one dose of sulphur 6-M, and let it work a week. This aggravated the skin symptoms very much, but not her case in general. I then gave her one dose of *nux v.*, 1-M, which gave her general relief, and repeated a few times cured her completely and permanently. Now you ask, "Why did you give the dose of sulphur?" Because I was *sure* of my remedy. Still it brought no results. This convinced me that there was a want of sensitiveness of her nervous system, a deficient reaction of the vital force. In such cases the trouble is overcome by sulphur, *carbo. veg.*, *lauroc.*, *opium*, or *mosch.*—whichever is best indicated, next to the chosen remedy. On the other hand, there are some cases in which the nervous irritability is too great, and you will have to administer, at suitable intervals, a dose of *pulsatilla*, *nux*, *chamom.*, *leucriu.*, or *valeriana*—applied by the same rule, that is, whichever is more suitable, next to the *similimum*, for the entire condition. In either case, such a medicine disposes nature to allow the indicated medicine to act gently and favorably. Hahnemann, Bonning-

hausen, Kent and that class of homeopaths will tell you all about this. But regarding the two cases just cited, I want to impress upon your mind the fact that the *warts* and the *skin eruption* were matters of secondary consideration. Treat the *patient*; that is the lesson you must learn, ere you can cure as Hahnemann cured.

Another item or two I wish to notice, and then I shall close this letter. First, I would have you make the proper distinction between *acute* disease and *chronic*, conformably to homeopathic doctrine. "Acute diseases comprehend only those which have a time period, within which, all their symptoms gradually disappear and they terminate favorably without medication, provided, the life force is not overwhelmed." To prevent the latter, keep down complications and cut short the disease, is the function of pure homeopathy. On the contrary, *chronic diseases never cease of themselves without curative medicines*. They change their form, but *never their essence*. I shall have more to say about this toward the close of the series. I shall also explain how the physician may know his *remedies* are curing, and not kind Nature unassisted.

Second, I wish to speak of a point that always bothers beginners, and some who are not beginners, viz., the fact that in some cases there are some symptoms of the selected medicine which are antipathic to some of the symptoms of the disease. Now this need not worry you in the least. "If a few of the medicinal symptoms are antipathic to some of the *minor and less important* symptoms of the disease, while the *well marked, peculiar and distinguishing* symptoms are matched by the same medicine with similarity of symptoms, the few opposite symptoms also disappear of themselves, without retarding the cure in the least. But we must see to it that no *odd, peculiar, unusual and distinguishing* symptoms in the case of individual sickness finds its *opposite* in the pathogenesis of the medicine chosen as the most similar."—(Hahnemann.)

Another illustrative case: Suppose a gentleman comes into your office complaining of his back, or his hip. You get him to tell in his own way all he knows about his case. In the meantime you write down what he says and as nearly as you can in his own words. With a little prompting now and then you soon have two or three sheets filled. You have spaced the different subjects and now that he can tell no more, you are ready to fill in. Item by item you draw out

the particulars and the *distinguishing* features. Here I must remind you that patients are very accommodating; and if you frame any given question so as to convey to your man the least suggestion as to how you would like for him to answer, he is sure to answer just that way. Such an answer, as a rule, is worthless. If you are a real homeopath, you do not care how he answers, just so he tells the truth; for you are not holding a half image in your mind and endeavoring to get him to supply the other half. Pathological gentlemen do that, but not homeopaths.

If you propound a question, and you observe he hesitates and evidently does not know how to answer, *drop it right there*. Better have no answer than a wrong one.

Now in running over the record you observe this: "Better by continued motion." The average *so-called* homeopath would jump at a conclusion at once—*rhus tox*. Not so with the follower of Hahnemann. That is not distinguishing of *rhus*. Some thirty-three remedies have that symptom. The *distinguishing* thing about *rhus tox*. is this: The pain in affected part *compels him to move; keeps him shifting and changing position, whether sitting or lying. On rising from a seat he feels stiff and is worse on beginning to move, but CONTINUED motion relieves until worse again by exhaustion.* Again sitting or lying down he has an irresistible desire to change his position often, *as each change is followed by temporary relief*. Thus the pain *compels him to move*. Now, if his complaint originated in *getting thoroughly drenched*, whether of recent occurrence or long-standing; if it is always aggravated *before a rain storm*, and there is present *anxiety and apprehensiveness*, worse at twilight, you have the pure picture of *rhus tox*. In all cases of disease the state of the disposition and mind is *always* altered and must be particularly noted, together with the totality of the symptoms, if one would trace an accurate picture of the individual disease and treat it homeopathically—hence, with success.

"You would not expect *nux vomica* to cure where the disposition is mild; nor *pulsatilla* where it is happy, nor *aconite* where it is quiet and calm."

In searching for the indicated medicine in chronic diseases, you must not have in mind the primary symptoms and secondary affections as the chief things to be cured, and proceed to blot these out by local agents, medicinal or mechanical, as "helps" for your internal treatment, but remove the great *miasm* on which these depend, then the primary and

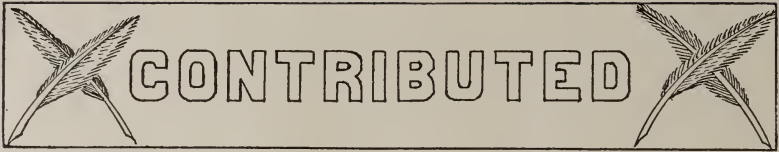
secondary symptoms will spontaneously disappear. When a chronic miasmatic disease is deprived of its local symptoms by local treatment, whether medicinal or mechanical, it will inevitably develop and *burst forth sooner* or later and bring a harvest of misery for that poor patient. Those broad-minded, liberal doctors who insist that it is their homeopathic right to graft on to the law of similars all of the traditional trash known to the field of medical learning, would find themselves somewhat puzzled to discover a suitable machine or effective local measures of any kind for removing the miasms! Knowing they can not do this, they lop off the branches and leave the tree standing! The real homeopath with the single remedy and minimum dose, without any adjuvants whatsoever, goes after the *tap root*.

One more case: Lady, aged 42. Complained of a chronic leucorrhoea of several years standing—very acrid; vulva much swollen and very sensitive; much *burning* and *itching, biting between the labia and thighs*. I cured this lady with kreosotum, 1-M. To be brief, will tell you why: I found that she always menstruated *too early*; that the flow would almost cease, *then freshen up again*; she would think she was almost well, *when the discharge returned again*. The leucorrhoea also had this peculiarity. Was *inclined to be intermittent*; the discharge would almost cease, *then reappear as bad as ever*. Now this is very guiding. No remedy in the materia medica has this like kreosotum. The discharge may be bland, but to be *acrid* and *biting and excoriating* is more characteristic. If physicians would remember this *intermittent* character of leucorrhoea or the menses or both, they would accord to kreosotum the attention it so richly deserves. Then, all her uterine complaints were always aggravated *after* menstruation; this is also a *clincher*. To know how to draw out these odd, peculiar, guiding symptoms, or to develop them when latent, and to know or to be able to find the remedy which corresponds to them in similarity, constitute a large part of “the key to successful prescribing.”

Now, my dear doctor, if you have grasped what I have tried to make plain so far, you are well qualified to enter upon the study of our next subdivision, namely, “Mode of Preparation of the Indicated Remedy.”

Yours for pure homeopathy,

J. C. HOLLOWAY, M. D., Galesburg, Ill.



CONTRIBUTED



EDITOR CRITIQUE: Having just noticed in your February issue several quotations from my article on "Symptomatic Nomenclature," in the September *Medical Advance*, with criticisms by Dr. Holloway, I would like the privilege of replying partly because some of the inferences drawn are unwarranted; and partly, because of the undue prominence given several matters of treatment, it seems advisable to correct the impression that they were advocated by me as routine measures frequently necessary in practice. As a matter of fact, they were given as examples of the exceptional case in which ordinary methods did not apply, were unsuccessful and often resulted in the death of the patient.

The first quotation: "*Objective symptoms when of proper quality are always most reliable because they can seldom be figured or exaggerated and are more imaginary,*" is commented on as follows: "Note his old school tendency to ignore *what the patient says,*" an interpretation wholly unwarranted by the wording of the paragraph, or by anything else in the article when read as a whole. Only when the patient is untruthful, careless, hysterical, or otherwise unreliable, is it recommended not to rely implicitly on everything said without careful verification of symptoms at different examinations before prescribing.

Quotation No. 2, "*Careful inspection, through physical examination, and accurate diagnosis are essential requisites of a complete totality and without such we can never thoroughly understand the case, nor intelligently analyze, group and rank the symptoms,*" to the original of which might have been added with profit: "*As did Hahnemann, Bonninghausen and other great prescribers past and present,*" for the benefit of those who are unable to recognize an old idea in new form without it being properly labeled.

To explain that *nearly* every case can be prescribed for correctly without diagnosis or pathological knowledge is to become platitudinous; but to contend that without such the totality is complete; or that a knowledge of pathology is useless to the prescriber; or that it is unnecessary to group and rank symptoms preparatory to choosing the curative remedy, is ridiculous and contrary to the facts. Only laymen and mere symptom chasers are qualified to hold such views.

Quotation No. 3: "*The simillinum for certain heart lesions is crude digitalis and failure to recognize this fact will result in failure to relieve the patient.*" Contrary to Dr. H.'s statement, many of our best Hahnemannians *do talk this way*, and there is plenty of warrant for believing that Hahnemann also thought and practiced this way when necessary for the good of his patients.

It is not a question of belief but a clearly demonstrated and well established fact that in "*certain*" forms of low grade organic diseases with lowered vital resistance, it is the lower potencies which are best—in some cases relief being obtainable from the crude drug only.

Under such circumstances, which of course are "*exceptional*," the higher potencies are often positively harmful because they set up reactions which are exhausting as well as useless, not being on a similar plane to the disease.

In many heart cases digitalis is the simillinum and in *certain* cases during the later stage with failing compensation and incurable mechanical lesions, it will fail when used in potency, not because it isn't indicated (for no other remedy will replace it), but because the potency is not similar to the gross plane existing; certain cases that will die on the potency can be saved much unnecessary agony and often have life prolonged indefinitely by this crude drug given by a physician who knows how to use it properly.

That this will appear sacriligious to many, there isn't the shadow of a doubt; but it is true nevertheless, and no one is justified in expressing a contrary opinion who is unwilling to conscientiously investigate the subject without preconceived prejudice.

Before leaving the subject allow me to state that in no sense whatever am I recommending the routine use of dig-

italis crude in heart cases; but only when by careful comparison of symptoms it is found to be undoubtedly indicated, though failing to act when used in potency.

My only apology for "*chilidoneum low*" in "*an old recurrent liver condition*," is that it quickly cured a dying man after higher potencies had failed. The patient has had but two or three slight attacks since and *none* during the last eighteen months—a longer period of relief than he had previously for ten or fifteen years. The meaning of the remark "*A chronic liver congestion will have to have a better remedy than liver*" is anything but clear to me unless Dr. H. imagines *chilidoneum* to be some preparation of liver, which seems hardly probable.

The case of myxoedema relieved by thyroid extract is not an example of "*isopathy*," and it is a ridiculous display of ignorance to call it such. To contend that a knowledge of modern pathology is of no value to the homeopathic prescriber, or that facts which one is incapable of comprehending owing to ignorance of this science are mere speculations, is excusable on the ground of ignorance only.

The doctor says, "*A homeopath would have developed this case*," thereby ignoring the fact that there are exceptional cases which even he cannot develop unless he be omnipotent. After three or four weeks of unsuccessful effort in trying to develop the case, *thyroid* was *fed* to the patient on the same principle that would suggest ordinary food for an ordinary form of starvation; and was followed by rapid improvement and a clearing up of all the symptoms.

My only object in replying to the doctor's criticisms is to explain my true position in as lucid a manner as possible on these important questions. With the exception noted, I believe that careful examination of my case records would show them to be no different than those of any other competent Hahnemannian as regards methods and potencies used.

Having neither the time nor inclination for further discussion of the subject, such will be left to Dr. H. without further interruption by me in the belief that other contributions of mine have qualified me to call myself not a mongrel but a Hahnemannian homeopath.

Sincerely yours,

W. H. FREEMAN

Brooklyn, N. Y., February 15, 1910.

PROGRAM OF THE A. I. H.

DEAR DOCTOR: Allow us to call the attention of the Homeopathic profession to the program for the coming session of the American Institute of Homeopathy, as proposed by the Local Committee of Arrangements. All the essentials will be carried out, as we are going to spend about \$5,000 in entertaining our guests. The arrangements may, however, be changed by the "powers that be."

From July 6th to July 11th, the Reception Committee will meet every incoming train upon which members are expected, and extend all aid and welcome it is possible to give.

All trains that carry large parties will be met at the borders of the State with fruit and flowers.

Buy all tickets to Long Beach and have your trunks checked to the same place. Best way is to get in early on the American Institute specials and be taken to the door of Hotel Virginia from your own home city without change, passing a glorious time en route with your best friends, in luxurious surroundings and being feted all along the line by the local Homeopathic profession.

SUNDAY, July 10th. Visits at South California State Hospital, Redlands and Riverside, will probably be arranged, arriving at Hotel Virginia, Long Beach, via Los Angeles, about 4 p. m.

8:00 p. m. Memorial Service in main auditorium Hotel Virginia and sacred concert.

MONDAY, July 11th. Registration and Institute meeting. Informal meeting National Meissen.

8:00 p. m. Reception and ball given by the local committee. During the intermissions Spanish dancers will give their native dances in native costume.

TUESDAY. Institute meeting. Meissen Society's "Balloon Route" excursion.

WEDNESDAY. The local committee has chartered an ocean going vessel for the trip to the world-famed island paradise, Catalina, where glass-bottom boats will be taken to view the wonderful submarine gardens and the gorgeously colored fishes. A typical Spanish barbecue will then be provided, as well as a unique entertainment, one worth coming 3,500 miles to see—especially as you have to pay only about one-half fare from any point the special trains touch. Think

of a round-trip ticket from Chicago to California and return by different route for about \$62, and New York for \$98, and Boston \$99!

THURSDAY. Institute meeting.

6:30 p. m. Dinner and oratory.

8:30 p. m. California State Meissen entertainment and musical.

FRIDAY. Institute meeting.

SATURDAY. Special cars to Los Angeles, Ostrich Farm, South Pasadena, to Mt. Lowe (5,100 feet high), offering a view of fertile valleys, canons, mountains, inhabited cities and ocean, surpassed by none in the world. Dinner at Alpine Tavern; to Pasadena, the most beautiful residence city in the world, enjoying an auto ride around the city and environs, furnished by the Board of Trade, boarding our special cars and returning to Long Beach via Oak Knoll.

Many other trips will be provided, notably an auto trip around Los Angeles and an excursion to San Diego.

The College Medical Fraternities and the different College Alumni, as well as the Institute "clubs," will have their own special doings, which are being arranged.

Remember, ample meeting places for everything will be found at Hotel Virginia, Long Beach, and this hotel will be headquarters.

Personally you cannot afford to miss this meeting. It will repay you in pleasure many times over. It will be the Institute Meeting you will always refer to as the best ever.

You owe it to your wife, daughters and yourself to take this glorious trip and bring them along.

You owe it to the Institute to support and aid in every way possible the Homeopathic Society by your presence.

You owe it to the California profession—who have traveled from 2,000 to 3,500 miles every year to attend the Institute Meetings—to cross the continent once in the sixty-six years of the Institute's existence. Show your appreciation of our efforts by aiding us in spending our hospitality money.


Remember the American Institute's Specials will arrive in time for the session of 1910—July 11th to 16th.

Fraternally yours,

WALTER E. NICHOLS, *Pasadena, Calif.,*
Chairman Local Press Committee.



SELECTED

HE NATIONAL CONFEDERATION OF State Medical Examining and Licensing Boards at its last meeting gave considerable attention to the subject of oral tests as a part of the examinations for medical licensure.

Dr. Joseph C. Guernsey, of Philadelphia, whose earnest efforts to improve the standards of the medical profession, and whose long experience as a medical examiner have rendered him eminently fitted to speak of the subject in an authoritative way, was appointed acting chairman of a committee to study and report on the desirability of adding such oral tests to the written examination that is now ordinarily used.

The conclusions reached by this committee and set forth in their report are so clearly stated and so in accord with the views of medical teachers, that we can do no better than to quote the words of the committee. Referring to the reasons why written examinations alone fail to give an accurate idea of the applicant's medical ability, the report states:

"Written examinations do not determine a physician's knowledge and efficiency because:

"(a) They fail to exhibit in each individual his practical ability. It requires oral examination to demonstrate the fitness or practical knowledge;

"(b) They are not in keeping with the mode of teaching of the present day, which is very largely applied knowledge. The ascertaining of applied knowledge by medical examiners predicates oral examination in practical laboratory work, at the bedside, etc.;

"(c) They do not sufficiently cover the field of present requirements for licensure. Working ability in the various branches of medicine is demanded today, and this can be ascertained only by oral examination in a demonstration of surgery, obstetrics, chemistry, physical examinations, etc.;

"(d) They are unfair to a large number of applicants among whom are old practitioners of ample experience. Many of these fail to do justice in writing to their knowledge and practical worth, but prove eminently capable in oral examinations;

"(e) They are not conclusive of merit for medical licensure. Many applicants, even without an adequate foun-

dation, after a few weeks of cramming from quiz-compends take in enough generalities to pass successfully a written test, which after all is merely a matter of memory; in other words, written examinations are largely proof of memory, showing but little scientific attainment and nothing of practicability;

“(f) Written examinations are not used by men of big affairs in selecting assistants for responsible positions. They look for doers of deeds and, judging practical results as evidence of fitness, they secure men of brains and ability. Physicians are men of big affairs, and should select as their assistants by granting them medical licensure only those who show ability: ,

“(g) In Europe medical examinations are written and oral, clinical and laboratory. In Canada oral and practical examinations are required in addition to the written. If oral and practical examinations are found feasible and necessary in Europe and Canada, they are equally so in the United States.”

These statements set the matter forth so clearly and so rationally that it is difficult and unnecessary to add to them. We might say, however, that we believe that not only would the oral tests be of value in enabling the Examining Board to more accurately determine the ability of the applicant, but they would also be very acceptable to all applicants who are properly qualified to receive a medical license.

That a certain amount of deception may be practiced even in oral tests, however, must be borne in mind, as illustrated by an example which has been brought to our attention by one of our colleagues. A medical student, it seems, about to be examined before a well known teacher, came into the examining room with a piece of absorbent cotton in his ear, and, pulling it out, stated that he was suffering from an acute attack of otitis media and that he had to remove the cotton in order to hear distinctly. Influenced by the suggestion, the examiner at once proceeded to quiz the student very thoroughly on the etiology, diagnosis and treatment of acute otitis media. The student, who had very thoroughly prepared himself on this subject, was delighted, as was also the examiner by the full and accurate answers which he received to his questions. It was not until some time afterwards that the examiner learned that the attack of otitis media was a fiction, and that the high mark which the student received was due more to his shrewdness than to his professional knowledge. Instances of this kind, however, must necessarily be very rare, especially where practical tests in the use of the microscope,

method of physical examination, etc., are used in conjunction with it.

The National Confederation certainly deserves the earnest co-operation of every progressive physician in its endeavor to bring about this long needed change in the methods of examination for medical licensure, which we believe will tend to elevate the standards of the profession and exclude those who are incompetent to engage in such a responsible work.—*The Hahnemannian Monthly*.



PROFESSIONAL SECRECY IN VENERAL DISEASES. The action of the American Institute of Homoeopathy, at its recent meeting in Detroit, in adopting an amendment to the code of ethics "releasing physicians from professional secrecy regarding private affairs of patients or their families, when such secrecy or silence results in the injury or infection of innocent persons," has attracted a great deal of comment, both favorable and otherwise. The amendment relates, of course, more especially to the duty of a physician in the presence of gonorrhoea or syphilis, and its particular design is to protect the patient's wife or prospective wife.

Whether the institute has done wise in violating the principle of absolute secrecy on the part of the physician regarding information conveyed to him in his professional capacity is, of course, open to argument. Personally, we do not believe that the resolutions of medical organizations will go a great ways toward the settlement of this doubtful question; at least not for a long time to come. Questions of this nature must be settled largely in accordance with the judgment of the individual physician, after taking into consideration the various circumstances in the particular case. Public opinion, as well as professional ethics, must necessarily have a strong bearing in deciding what is the best policy in such instances, and we are inclined to the view that an educated and rational public sentiment will do more to influence the actions of physicians in such matters than will the formulation of official rules and regulations.—*Hahnemannian Monthly*.

It is probably true that pronounced individual opinion in favor of publicity is in direct proportion to the physician's ability to imagine himself or some member of his family in the prospective victim's position. The race is not yet so far on in civilization as to be removed from the large personal factor in judgment.—*S. M. H.—The Clinique*.



EDITORIAL SECTION



THE CRITIQUE is entered at Denver Postoffice as Second Class Matter.

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No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.



RESIDENT WARD; "POOH BAH" DEWEY
—A PARALLEL. Of all deadly things, unless it be an unloaded gun, nothing has proved so destructive to human ambition, wrongfully directed, as a public comparison of personal motives and acts.

THE CRITIQUE has been advised recently, and upon the very best authority, that President Ward has advanced a sufficient amount of real money to pay off the entire indebtedness connected with the settlement of the *A. I. H. Journal* matter, thus cutting off further comment and controversy over this most unfortunate affair. In addition to this he has paid Dr. Horner two hundred and fifty dollars cash, which represents a half year's back salary due him as associate editor under Dr. W. A. Dewey, and which should have been paid by that thrifty individual. An additional sum of three hundred and sixty-eight dollars' difference between Dewey and Treasurer Smith has been taken care of by President Ward. Thus Dr.

Dewey has been cared for; Treasurer Smith likewise; Doctor Horner, ditto, and the Institute is *free*.

That the membership may know the amount, and judge for themselves as to the unselfishness of the act, we need only say that Dr. Dewey received two thousand dollars; Dr. Smith three hundred and sixty-eight and Doctor Horner two hundred and fifty, making a *grand* total of two thousand, six hundred and eighteen dollars.

Doctor Ward proposes to *donate* the two hundred and fifty which he paid Doctor Horner and will allow the larger sums to remain unpaid until such time as the Institute's finances will permit of their return, and all *without interest*.

Doctor Ward seeks no applause for doing his official duty, and it is wholly against his personal wishes that we are printing this much of the letter. We would be only too "delighted" to print the letter in full and nothing in our editorial career has caused us so much actual distress as our inability to make public the entire document.

What other man than Dr. Ward would have shown such patriotism, liberality and good sense? Now the Journal committee of the trustees and Dr. Horner will have some sort of chance to give homeopathy a creditable official organ.

We have printed in the past a thorough description of the determination of "Poo Bah" Dewey to put this branch of the American Institute out of business, hence a repetition of his part in the affair is hardly necessary to complete the comparison.

The "parallel" does not place "poo" (small p please) in a too pleasing position, and we feel assured members of the oldest medical society in the United States will appreciate the action of Dr. Ward as heartily as they condemn the afore-said determination of Dr. Dewey.

We are only too glad that the matter is settled beyond the possibility even of its being revived by the "*national journal of homeopathic medicine and surgery*" or the old *Journal* committee, and we trust, as President Ward suggests, "that the *Journal* committee of the Trustees will proceed to shape the policy of the magazine so that its pages shall be planned to give the very best that homeopathy can afford, as typical of American Homeopathic journalism."

The March issue of the *Journal* shows, in a limited way, what a real live editor can do with a publication of this kind, and now that all restrictions have been removed THE

CRITIQUE predicts there will be a very decided improvement in every department.

Success to President Ward; an equal amount to the *Institute Journal* and "more power" to the Institute.



PROGRAM OF THE LOS ANGELES MEETING. Attention is called to the program proposed by the entertainment committee for the Los Angeles meeting, which is printed elsewhere. Inasmuch as this committee has five thousand dollars at its disposal, there remains but little question as to its ability to make good, and while there may be some slight alteration to the contemplated entertainment it is hardly probable that anything less than that promised in the communication will be produced; from what one knows of California cordiality it is quite likely the brief outline has, if anything, underestimated the extent of the "doin's."

We hope the Transportation committee will not be too hasty in selecting an "official route" inasmuch as we believe the one originally planned will still be a possibility. The *Denver Post*, March 5th, has this to say:

The San Pedro, Los Angeles & Salt Lake railway, familiarly known as the Clark road, is rapidly recovering from the recent disaster which closed down the entire system, and will be ready for business by June.

After the washouts of the first of the year it was thought that the Clark road would not be able to handle through traffic for fully a year, even though only a temporary line was to be constructed, and it was estimated that the company would be to an expense of \$15,000,000—through loss of business and cost of repairs.

Some changes have been made in the original plans of reconstruction, which enables the road to operate sooner than anticipated at the time of the first summing up of the damage.

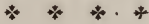
Should the Pedro line make good in its calculations, and as there is a margin of thirty days in which to do so it is an almost absolute certainty that it will, the time of the trip, as outlined in the last issue of this publication, may be greatly reduced. THE CRITIQUE has great confidence in the courage and ability of the Transportation committee and believes the foregoing extract from the secular press will give it renewed energy in arranging details of the proposed trip. The rates have been fixed and are as follows:

From Omaha, Council Bluffs, Kansas City and other Missouri River Points.....	\$50.00
From Chicago, Ill.....	62.50
From St. Louis, Mo.....	57.50
From Peoria, Ill.....	59.25
From Denver, Colo.....	45.00

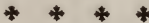
At a slightly higher rate tickets limited to October 31st may be secured.

MISCELLANEOUS

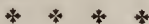
Dr. Ambrose C. Stewart still carries his arm in a sling as a result of a recent accident.



The March issue of *THE CRITIQUE* has called forth many complimentary and congratulatory communications. Thanks, ladies and gentlemen.



The March meeting of the Denver Homeopathic Club was a pronounced success. Drs. Fisher and Brown are to be congratulated upon the completeness of the program.



Dr. J. W. Craig, Ault, Colo., enrolled his name on *THE CRITIQUE*'s list last month. There is no particular reason why every homeopath in the state should not do likewise.



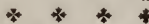
When one reads the reception arrangements and program of the forthcoming meeting at Los Angeles, as outlined by the local committee, it almost makes their mouth water.



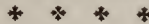
THE CRITIQUE regrets the fact of its inability to print all the good homeopathic stuff sent the editor. Keep on coming, brethren, we will use it sometime and it is all good enough to keep.



Dr. Julia D. Fitzhugh, who retired from practice in Denver over a year ago, has returned to the fold and will be numbered among the professional women from now on. *THE CRITIQUE* extends a cordial welcome.



Read that program over once more—the one which refers to the Los Angeles meeting of the American Institute of Homeopathy. The best meeting ever is bound to be the opinion of everyone who attends.



Dr. Rose Kidd Beere, a lady physician of Denver, succeeded in scaring up several cases of "hook-worm" and securing her picture in several papers, all within a period of several hours. That is what *THE CRITIQUE* call "going *some!*"



The many friends of Dr. William F. Burg will be pleased to learn his arm is healing nicely and that he will have good use of it, notwithstanding the seriousness of the injury originally. *THE CRITIQUE* congratulates the doctor heartily.



There is a county in Texas, Hill county, which is larger than the state of Rhode Island. Has a population of over forty thousand; the county seat is Hillsboro, which has a population of something like six thousand souls. There is not a homeopathic physician in the county.



Dr. Leroy C. Hedges of Grand Junction, Colo., was a pleasant caller at the editorial offices of *THE CRITIQUE* March 12. Dr. Hedges contemplates a change of residence and it may be the good fortune of Denver to have him added to the list of homeopathic practitioners of

this city. One thing is certain: Hedges is a homeopath, who is proud of the fact.



Mrs. Dr. William H. Sharpley, wife of Health Commissioner Sharpley of this city, died at her home in Denver the early part of last month. THE CRITIQUE wishes to express its deepest sympathy to Dr. Sharpley.



Dr. W. H. Welch is contemplating a rather prolonged absence from Denver and is desirous of securing some capable man to take his practice during his absence. Write the doctor, Commonwealth building, Denver, and you may find something to suit your liking.



Dr. Paul S. Hunter, represented as a member of the state medical board, has asked the district court to stop the salary of Wilbur F. Cannon who carries the title and collects salary of pure food inspector. This state medical business seems to be getting on certain people's nerves.



Dr. G. W. Chapman and Dr. A. L. Williams were two prominent members of the homeopathic profession in England who are being mourned by their colleagues, death having removed both from active duty, one during the latter part of last year and one the fore part of the present.



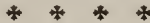
The next meeting of the Denver Homeopathic Club will be held Saturday evening, April 2; the *first Saturday evening of the month*, on which all meetings hereafter will be held. Look out for the postal card notification and be prompt about making your reply to the same.



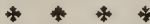
"The national journal of homeopathic medicine and surgery," says, in its Colorado items, there are 109 homeopathic physicians located in Denver. This admits of but one of two conclusions: that there are a large number or else this is a large inaccuracy, probably the latter.



The Denver City and County Hospital seems to have a press agent for stovaine, the new anaesthetic. If all the things told about its action in that institution are true there is no reason why this wonderful remedy should not supercede chloroform, ether, cocaine and all other anaesthetics.



We were a little "off" last month in our efforts to boost the Denver Homeopathic Club meeting for March. It will not occur again. The mistake was in the shape of a mascot, as all seemed to notice it and had their attention attracted to the correct date just that much more forcibly.



"Progress," of Denver, it is said (and it looks as though the report were correct) has suspended publication. The journal, under Dr. Stricker's management, was a readable and instructive, wide-awake journal which is bound to be missed.—*Pacific Coast Journal of Homeopathy*.



Washington, February 20.—One reason why cold storage chickens sometimes seem disappointing is that the dealer thaws them and dips them in water to make them swell up and look plump. Cold storage chickens should be sold frozen, and never in any other way, says Dr. Harvey W. Wiley.

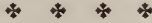


Dr. Lida Burgess Russell wishes to announce her return to Denver, and the opening of her "Milk-Rest" Home for the treatment of all chronic diseases (tuberculosis excepted) viz.: acute and chronic nephritis, diabetes, gastro, intestinal and hepatic diseases, asthma, rheumatism, nervous

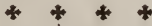
diseases, etc. After her course in the Porter Sanatorium, Los Angeles, Dr. Rusell is especially fitted for this work in Denver. If you desire further information about the treatment, call, write or phone. Residence 3235 Wyandot street. Phone Gallup 1529.



It is simply marvelous, the serious manner in which some medical journals take themselves. For instance, *Medical Century* has the nerve to notify unsuspecting persons that it is *the national journal of homeopathic medicine and surgery*. It should have added: "So long as there is any money in sight."



The father of Drs. C. W. and Clinton Enos, of this city, celebrated his ninety-fifth birthday the 12th of last month. We are pleased to say he is in comparatively good health and in full possession of all his faculties. THE CRITIQUE takes off its hat, so to speak, to this most excellent and exceptionally endowed gentleman.



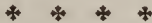
We learn that *Progress*, formerly a homeopathic periodical of Denver and successor of the old *Denver Journal of Homeopathy* has discontinued publication.—*Medical Century*. The accuracy of the foregoing assertion is somewhat askew, but one would scarce expect else, considering the source. THE CRITIQUE, we regret, *succeeded* the *Denver Journal of Homeopathy*, but we are glad to say still lives.



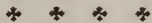
If someone will kindly kick the proofreader we will be much obliged. This refers more specially to the error in Dr. Fisher's communication, page 91 of last issue, second word in second line of next to last paragraph. The word "conscientiousness" should have read "contentiousness." We hope that those who followed the text closely were able to read between the lines and apply the correct intention of the writer.



Lovers of trout will be pained to learn that succulent morsel of food is one of the direct causes of cancer in the United States. The "guesser" in this particular instance is Harvey G. Gaylor, director of the cancer laboratory of the state department of health, Buffalo, N. Y., who claims there is every reason to believe that cancer can be cured by inoculation. There is some satisfaction in preferring canned salmon after all, besides it costs less.



Read the communication from Drs. Fisher and Costain regarding the "official route" as selected by the committee. While THE CRITIQUE has contended right along for the Union Pacific, now that the powers that be have decided differently, we are too good a sport not to fall in with the idea. The Moffat trip will be a feature without fail, and it behooves the profession of Denver to get busy and arrange matters for entertainment of the bunch in this city.



A recent writer in *Medical Sentinel*, under the heading, "Does Office Practice Pay?" among other things, had this to say: "In looking after the financial end one is more likely to be paid cash at the office than at the patient's home. It is well to have a notice in the office right in a place where the patient will be sure to see it, stating that office practice is strictly cash. Years ago my father told me of a German physician who practiced in Cincinnati, Ohio, who would hand the patient his medicine, saying: 'Take one powder every two hours, and give me a dollar.' I have tried it and find that if you look right at the patient

when you say it, you will get the dollar if he has it, or he will say when he will bring it, and if he is a dead beat he will fail to return and you are well rid of him." It is reported that a Denver doctor who read this advice and considered it good proceeded to put the "system" to immediate use in his office practice. To the first patient who appeared he handed a small phial of tablet triturates, umty-ump-x, and, looking the patient in the eye according to instructions, said: "Take two of these every half-hour and may God have mercy on your soul!"—*Tableau*.



Dr. Daniel A. Lucy of Denver has a practice in one of the most strenuous parishes of the city. During a recent professional visit at which the stork was expected, the prospective male parent came home all bulging out with paternal patriotism and red liquor, and insisted on putting the gloves on with the Doctor. A real Jeffries' jolt in the jaw laid the belligerent dago out, but reinforcements in the shape of the prospective female parent and other sympathisers forced the doctor to "beat it" minus part of his wardrobe. Surely life is just one blamed thing after another.



THE CRITIQUE appears this year in a completely new dress and one that is most becoming. We have for long held this journal in high esteem, although not always agreeing with all of the contents. We realize, however, that each individual has a right to his own opinions and can but admire those who strenuously uphold such opinions even in the light of much criticism. It seems probable that the editor of this journal is best fitted to fill the position, heretofore unoccupied, of the late Dr. Frank Kraft insofar as originality and personality of journalistic work lies. We extend to THE CRITIQUE our most cordial greetings, and trust that it may ever be as ardent an advocate of the right as it sees it, as it has been in the past.—*New England Medical Gazette*.



The following is from a report of the committee to the trustees of the Massachusetts Homeopathic Hospital, and signed by Drs. Wesselhoeft, Rice and Strong: "A brief summary of the work accomplished shows the number of patients treated to have been 4,600, of whom 548 were medical, 2,982 surgical, 573 obstetrical and 407 infants. Of the number discharged, 2,499 recovered, 488 were improved, 85 not improved and 184 died. The average death rate was 4 per cent. The Haynes Memorial treated 476 patients, of whom 146 were diphtheria, 313 scarlet fever and 17 were mixed cases. The death rate on the number treated in this department was 5.04 per cent."—*Fortieth Annual Report of the Massachusetts Homeopathic Hospital, East Concord street, Boston, for the year ending December 31, 1909*.



The Colorado State Association for the Prevention and Control of Tuberculosis has sent out a request to all of the churches of the state that Sunday, April 24, be observed as Tuberculosis Sunday. This is part of a nation-wide movement on the part of the National Association to enlist the 215,000 churches of the United States in the campaign against tuberculosis by having the "Gospel of Health" preached in every pulpit of the land on April 24. Sermons and addresses will be delivered on that day acquainting the 33,000,000 churchgoers of this country with the wide scope of the campaign against the disease, and will be of a character to enlist their activities in the preventive work of the movement to wipe out tuberculosis.

The State Association has arranged to supply literature and speakers for the Colorado churches if request is made to the office of the Association, in the state capitol at Denver.

 WITH OUR DEAD.

MRS. JAMES POLK WILLARD,

One of the saddest and most unexpected notices which has been received lately was that of the death of Mrs. James Polk Willard, which occurred Saturday evening, March 12th, 1910, at her late residence, 1721 Franklin street. Mrs. Willard was born March 7th, 1845, in Morgan county, Illinois; was the daughter of Thomas J. and Priscilla Larimer and was one of a large family of sons and daughters. Was educated at the Illinois Woman's College at Jacksonville. On May 5th, 1868, she was married to Dr. J. P. Willard and was the mother of three children, a son that died in infancy and two daughters, Vassie, who married Rev. Dwight S. Bayley, and since died, and Winifred, who remains and is at home. While Mrs. Willard had not been in the best of health for a number of years, still on the evening before the end she was apparently feeling better and went to bed seemingly feeling easier than she had for some time. About 5 a. m. Saturday, she woke the doctor, complaining of what she thought was an attack of indigestion. By nine she was resting some easier and said she was improved sufficiently that the doctor could attend to his patients, which he did. About 11:00 o'clock he was called home hurriedly and found her suffering, not from indigestion, but with angina pectoris, from which she died at 5:15 p. m., having suffered only about twelve hours.

In her early life she identified herself with the Methodist church, affiliating with Trinity Methodist when she came to Colorado. From the very first she took a keen interest in all the activities of the church. Only the afternoon preceding her death was she attending a meeting of the Ladies' Aid. For a number of years she was president of the Woman's Foreign Missionary Society. To know her was to love her, and to know her intimately was to love her better. She was very domestic in her tastes and there never was a wish or a thought expressed by any member of her family that she did not try to gratify.

While the loss is by far the greatest to the husband and daughter, yet her absence will be felt by innumerable friends and relatives. The doctor and Miss Winifred have the sympathy of a host of friends in this their hour of deep affliction. Let us all try to think of Mrs. Willard as Dr. Wilcox suggested, "Not dead, but only sleepeth."

E. B. SWERDFEGER, M. D.

* * * *

DR. GEORGE M. COOPER.

WHEREAS, by the death of DR. GEORGE M. COOPER on March 1, 1910, the Hahnemann Round Table of Philadelphia is deprived of one of its valued and charter members.

WHEREAS, By the passing of DR. COOPER the cause of strict homeopathy has lost an honest adherent and earnest practitioner; and,

WHEREAS, By his death Philadelphia loses a kindly, sincere Christian gentleman; be it,

Resolved, That the Hahnemann Round Table in special session assembled desire to make this expression of its sorrow and to extend to the bereaved wife and family its heartfelt sympathy; and be it further

Resolved, That these resolutions be spread on the minutes of the society and a copy of them be sent to Mrs. Cooper and to the medical journals.

(Signed)

G. H. THACHER, *President*.

MARGURET C. LEWIS, *Secretary*.

GEORGE MADISON COOPER was born in Pomeroy, Ohio. He attended the public schools of that place until the age of fourteen, when he came to Philadelphia and became a student of the Academy of the New Church, graduating four years later. He had been very delicate from babyhood and while in Philadelphia became a patient of Dr. J. T. Kent, who at once recognized a heart trouble heretofore undiscovered. This relationship of patient and physician was maintained until Dr. Kent's removal to Chicago.

Having decided upon the profession of medicine as his life's work, Dr. Cooper entered the Hahnemann College of Philadelphia in 1892, and graduated from that institution three years later, after which he matriculated in the Philadelphia Post-Graduate School of Homeopathics, thus becoming a student as well as a patient of Dr. J. T. Kent. After working two years in the post-graduate school and dispensary Dr. Cooper opened an office in Philadelphia. In June, 1899, he married Miss Augusta Pendleton, daughter of Rev. W. F. Pendleton, bishop of the New Church. Some time after this he built a home in Bryn Athyn, Pa., to which he removed his family. He retained his office in Philadelphia, but opened another at Bryn Athyn. He loved his profession and gave to it his best thought, deepest affection and honest work, with the natural result of a large practice. He was a close student and felt that the subject of medicine opened up a great field for development. At the time of his death he was investigating the planes of the potencies and their relation to the planes of disease.

Dr. Cooper was a deeply religious man, exemplifying in his life as a man, a physician, a husband and father, the beautiful teachings of the New Church, of which he had been a lifelong active member. In 1905, while on shipboard on his way to Naples, Italy, he had an attack of inflammatory rheumatism; when he recovered, his already sick heart had added endocarditis to its burden.

On February 7, 1910, he was again attacked by his arch enemy, rheumatism, but did not give up work until February 14th, when he became so alarmingly ill that it was seen that he must soon lay down his work here and enter into the world where all uses originate.

On March 1, 1910, his death transpired at Bryn Athyn, Pa. He leaves a wife and four dear little children, a mother, father, two sisters and a host of friends to whom his loss seems irreparable, but they look through their trials to his gain and rejoice in his release from a burden too heavy for one so frail to bear.

CHICAGO LETTER.

Dr. Christine Burgoth, Hahn. '04, has returned to Chicago, where she intends to locate.

The dance given by the Ustion Fraternity, Monday, February 21, was enjoyed by all who attended.

Dr. Raymond J. Ives, Hahn. '08, is now located at Francesville, Ind., and reports a good beginning.

Dr. S. F. Ashby, Hahn. '85, is doing some post-graduate work in the Hahnemann College and hospital.

Dr. F. M. Dryden, Hahn. '07, was a recent visitor to Chicago. The doctor has been to Kansas for a bride. Dr. Dryden is located in Minnesota.

Dr. Florence Newberry, Hahn. '07, is now in Kijabe via Mombasi, British East Africa, where she is a medical missionary and is now enjoying the best of health.

The annual banquet of the Alpha Sigma fraternity of Hahnemann College was held Saturday, February 26, about forty attending. Many good talks were made following the dinner.

The March meeting of the Englewood Homeopathic Society was held Tuesday evening, March 8, at the home of Dr. Guernsey. Papers by Dr. McMullen on "Ferrum Phos," and Dr. Farrington on "Capsicum," were presented and discussed.

A very interesting meeting of the regular Chicago Homeopathic Society was held on Tuesday, March 1. A paper by Dr. Burton Hazelton "The Nose," and a paper by Dr. H. J. W. Hingston, "Shall Surgery Remarry Her Divorcee Medicine?" were presented.

Drs. John Lang, Percy Hall-Smith and W. A. Merriott, who have been post-graduate students in Hahnemann College this winter, returned to their homes in London, England, early in March, with a better knowledge of the Homeopathic Materia Medica.

Chicago, Illinois, March 18, 1910.



DENVER HOMEOPATHIC CLUB.

A very interesting and well attended meeting of the The Denver Homeopathic Club was held on March 12, at the Chateau Lafayette. Twenty members sat down to an informal supper, which was thoroughly enjoyed. In the absence of the president, Dr. N. G. Burnham, probably the oldest homeopathic practitioner in Denver, was called to the chair, and consequently acted as the first president of the new club, under the arrangement as outlined in the changes in the Constitution and By-laws, which follow:

In behalf of the proposed changes, Dr. Dake, chairman of the committee, referred back to the club the scheme offered at the last meeting. It was taken up section by section and adopted as read, as follows:

Name—The old club name, "The Denver Homeopathic Club," shall be retained.

Object—The object of the club shall be the solidification of the homeopathic profession of Denver, and the advancement of their interests.

Members—Any reputable homeopathic physician of the State of Colorado shall, on the recommendation in writing of five members of the club in good standing, be declared by the president or the secretary a member of the club.

Officers—The officers shall be a president, a secretary and a treasurer. A president shall be elected to preside at the first meeting; he shall appoint his successor for the next meeting from a list of members

in good standing to be furnished by the secretary. The President shall direct and control the club from the adjournment of the meeting at which he was appointed until the adjournment of the next regular meeting. He shall have entire charge of the program (if there be any); shall call on the members for reports of cases, remarks, etc., and shall appoint a successor before adjournment. If the President be absent the meeting shall elect one, and the latter shall appoint the president for the next meeting. None shall serve a second time until all the other members in good standing shall have had an opportunity to serve.

The Secretary shall be elected at the first meeting and shall hold office for one year, or until a successor is elected at the first meeting in the fall. The duties shall be those usually pertaining to that office.

The Treasurer shall be elected in the same manner as the Secretary, and shall hold office for a like term. The duties shall be to collect the dues of the members, pay the bills for refreshments, and perform such other duties as usually belong to the office.

The President, Secretary and Treasurer shall constitute an Executive Committee, which shall arrange for the refreshments and in general have charge of the affairs of the club during the intervals between meetings.

Dues—The dues shall be \$1.00 per year, payable in advance.

Meetings—The meetings shall be held at such place as is selected by the Executive Committee, on the first Saturday of each month, from and including September to May. They shall be called to order promptly at the time designated by the committee, and shall adjourn not later than 10 p. m. During the meeting the minutes of the previous meeting shall be read, and such other business transacted as is necessary, followed by the special program for the evening. The limit of time for addresses, motions, discussions, etc., shall be ten minutes.

A resolution prevailed to the effect that until further action was taken by the club, the committee would provide a supper or other refreshments for the members at each meeting, the cost to be pro-rated among the members attending.

Under the provisions of the new constitution, Dr. Burnham announced the appointment of Dr. Clinton Enos as president for the coming month.

Drs. J. B. Brown and C. D. Fisher were elected treasurer and secretary respectively, to serve until the first meeting in the fall.

The club adjourned to meet on Saturday evening, April 2.

C. D. FISHER, *Secretary*.



OFFICIAL ROUTE AMERICAN INSTITUTE OF HOMEOPATHY, LOS ANGELES, CALIFORNIA.

The Transportation Committee of the American Institute announce the following as the selected official route for the California meeting at Long Beach in July:

Burlington—Chicago to Denver, with stops at Omaha and Lincoln. Missouri-Pacific and Union Pacific—St. Louis and Denver, via Kansas City.

Colorado Midland—Denver to Salt Lake, with stops at Colorado Springs, Leadville, Grand Junction and Salt Lake.

Salt Lake-San Pedro Route—Salt Lake to Los Angeles. This road is at present out of commission, but we have the assurance of the general passenger agent of this road as well as of the general passenger agents of several other roads, that the line will absolutely be in commission before July 1.

The itinerary will be about as follows:

Leave Chicago in the evening.

Arrive Omaha early in the morning; Omaha two hours.

Arrive Lincoln about noon; Lincoln two hours, where Dr. Bailey and others will entertain us during that time.

Arrive Denver early in the morning. Will stay there all day. For those who wish to be entertained by the local profession, arrangements have been made to see Denver and its environments. For those who wish to take the Moffat trip, arrangements will be made so that they can spend the entire day seeing the scenery.

Colorado Springs late that afternoon and evening.

Day scenery Colorado Springs to Grand Junction, with an hour at Leadville and another hour at Glenwood. Glenwood good place for rest—luncheon, bath, etc. Natural cave stream; turkish baths there, if wanted.

Grand Junction an hour toward dusk. Fine fruit valley. Chamber of Commerce actively interested in our coming, and will entertain us.

Arrive Salt Lake City next morning; stay there three hours; see the city two hours, and spend one hour at the lake.

Only stop in California will be one hour at the Insane Hospital at Patton. Arrangements will be made Sunday morning so that we can get to Long Beach by noon for Memorial Services that afternoon.

The Burlington will take us through a very attractive part of Illinois, Iowa, to Omaha, thence through southern Nebraska and northern Colorado to Denver, with brief stops at Omaha and Lincoln.

The Union Pacific has been very friendly to us and helped the committee much in getting the round trip rate, and runs through one of the best parts of Kansas, through the central region, and we trust the profession of the south and southwest will avail themselves of this route.

At Denver the special Institute train from Chicago, those from Kansas City and St. Louis, and others, will unite and join our Institute special the balance of the way. At Colorado Springs a stop of a few hours will be made for the purpose of visiting the city, Manitou and the Garden of the Gods; and if we have time, those who wish to ascend Pike's Peak can do so on the Cog Railway.

The Colorado Midland goes through the mountains high up, the scenery is gorgeous, Marshall Pass being the highest point of the Colorado mountains reached by a railway, and the whole scene through this section of the country is very attractive.

The committee has decided this as the official route, after careful investigation of the various lines, with a view to two things: First, having the coolest possible route for those traveling, which is essential in a long journey; the other being that we can do much good to the members of the various cities enroute, as well as much propogandistic work on the way. We have then, a cool route, splendid scenery, and an opportunity of doing good for the Institute as well as the profession in the local cities, which we think will be for the good of all.

We trust every one will join us in our endeavor to make this special train a success. The equipment will be the finest obtainable. We will have our own Pullmans, both sectional and compartment cars, an observation car and through diner. We have already made arrangements for the diner through to Salt Lake and we have a guarantee of the Salt Lake route to have a diner in readiness for us at Salt Lake City, so that we will not be handicapped in that particular.

Much good can be accomplished too, by the profession getting together on this journey, meeting each other and making the acquaintance of each other, and outlining the best plans to meet the local profession everywhere, and gathering them into the Institute.

We ask the profession to support the committee in its choice because the committee has acted for what they believe to be the best

interests of all concerned. They have favored no special road, have selected the route, largely because it could attain in that way the idea that they set out to accomplish, viz—to aid the Institute in furthering the cause as we go along.

The Secretary of the Transportation Committee would be pleased to have communications from all those intending to go, and will be glad to place them on the list and make reservations for them at any time. Those wishing compartments will please make application early because the number will necessarily be limited.

C. E. FISHER, *Chairman.*

T. E. COSTAIN, *Secretary,*

42 Madison St., Chicago.



COLORADO HOMEOPATHIC SOCIETY.

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SECOND VICE PRESIDENT—George C. Lamb, M. D.

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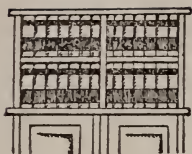
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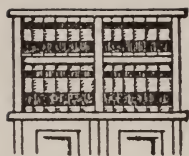
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NEW MEDICAL BOOKS

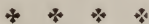


THE MATERIA MEDICA OF THE NOSODES. With provings of the X-Ray by H. C. Allen, M. D., Author of "Therapeutics of Fevers," "Keynotes and Characteristics," and Boenninghausen's Repertory" (slip). 583 pages. Buckram, \$4.00, net. Postage, 23 cents. Philadelphia. Boericke & Tafel, 1910.

In the Publishers' preface to this work they say: "An outline of the history of this book, so far as we know it, may be of interest here, and indeed is needed. We have no means of knowing when the work was started, but, judging by the manuscript, it must have been many years ago, for much of the manuscript is old, and bears evidence of frequent revision and correction; of the work of a painstaking and conscientious author."

The last sentence is wholly unnecessary to those familiar with Dr. Allen's work. He was painstaking and conscientious in everything he did, and no work of his eventful life was so well done as that performed in the interests of homeopathy and homeopathic affairs.

Dr. Allen always contended that the nosodes were homeopathic and proceeded to prove them as other homeopathic remedies were proven. How well he succeeded in demonstrating their efficiency as curative agents is best remembered by the success Dr. Allen secured in the application of homeopathic principles under all circumstances. Had the nosodes proved unreliable or unhomeopathic this marvelous man would never have wasted valuable time in their use, let alone the tediousness of their proving. The book speaks for itself in no uncertain tones as being a thoroughly homeopathic product; the publishers have exerted their best mechanical effort in issuing it, and it is an interesting and instructive publication from start to finish. Franklin Lyman Allen has written a brief biographical sketch of his father, which is printed as the foreword of the volume, and will be of interest to the profession in general.



TRANSACTIONS OF THE FORTY-SIXTH SESSION OF THE HOMEOPATHIC MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA. Held at Scranton, September 21, 22 and 23, 1909.

In looking over this volume of 565 pages one realizes the fund of valuable information contained therein. It is on the order of the old "Transactions" of the A. I. H. and the scientific side of the same makes it a valuable addition to one's library. The Pennsylvania society held its first meeting in 1866, at which time J. B. Wood, M. D., was elected president. Dr. D. P. Maddox was the presiding officer in 1909.



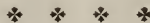
THE TEST DIET. Its application in medical practice and its diagnostic and therapeutic value, by Prof. Dr. Adolph Schmidt, Halle, A. S. Authorized translation from the second revised and enlarged German edition by Charles D. Aaron, M. D., professor of diseases of the stomach and intestines, Detroit Post-Graduate School of Medicine; clinical professor of gastro-enterology in the Detroit College of Medicine; consulting gastro-enterology to Harper Hospital, etc. Philadelphia, F. A. Davis Company, publishers, 1909. Price, \$1.00.

READING NOTICES

INTESTINAL ATONY. A considerable proportion of all cases of intestinal indigestion can be traced to muscular insufficiency and deficient circulation in the submucous coats. Treatment directed toward increase of muscular activity is all important, and in conjunction with massage and other mechanical forms of tonic stimulation, Gray's Glycerine Tonic Comp. has given uniform satisfaction.



ECTHOL. In all forms of blood dyscrasia—as indicated by skin disorders, bad healing power and general debility—Ecthol often proves effective when other treatment fails. It quickly raised the antitoxic and so-called opsonic power of the blood, increases the resisting power of the tissues and thus minimizes the dangers of bacterial attack. Healing processes are stimulated, and the whole economy is materially improved in its vital details.



TREATMENT OF CHRONIC BRONCHITIS. Underlying a chronic bronchitis there will be found a state of reduced vitality. The chronic condition has fixed itself and the weakened system is unable to throw it off and restore itself to normal—the system's elasticity, its ability to rebound, as it were, is gone. There is urgent need of an agent that will build up and restore the resisting powers, so that the chronic bronchial condition may be eliminated. Cordial of the Extract of Codliver Oil Compound (Hagee), by reason of its soothing effects on inflamed mucosae, and above all else, its power to build up a debilitated subject, put new blood in his arteries and stamina in his body—is the remedy *par excellence* for this purpose.

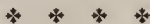


THE SATISFACTION OF SUCCESSFUL THERAPY. There is always a great and lasting satisfaction to be derived from administering a remedy and obtaining the result desired and expected. Aside from the therapeutic and more or less material benefits, the gain in medical confidence from standpoints of both practitioner and patient, is always considerable. Few remedies have given rise so consistently to the satisfaction of therapeutic dependability as Gray's Glycerine Tonic Comp. For a good many years thousands of physicians have been using this reliable tonic, with confidence born of almost invariable success, and to say that medicine and medical practice have been benefited and strengthened thereby is not only to state the truth, but to give deserved credit to a worthy product.



SYMPTOMATIC OR COMPLICATING ANEMIA is that form or condition of blood poverty which results from various constitutional infections and diatheses. Prominent among such causes are, Syphilis, Rheumatism, Paludal Poisoning, Tuberculosis, Carcinoma, etc. In many instances, such as anemia is due to some obscure, latent metabolic perversion, or a slow but persistent intestinal auto-intoxication of gastro-intestinal origin. While it is an axiomatic principle that successful therapy depends upon the removal of the causative factor, it is more than often wise and eminently judicious to adopt direct hematonic treatment while

the underlying cause is being sought for and combated. Pepto-Mangan (Gude) being bland, non-irritant and readily tolerable, can almost always be given, with distinct advantage to appetite, digestion, nutrition and general well-being, while causative therapy is under way. Neither constipation nor digestive disturbance results from its steady use, and a general hematic gain is practically a certainty, if its use is persisted in.



ANTIPHLOGISTINE. Bronchitis, pleurisy, pneumonia—a triad of co-related diseases, whose local manifestation consists of an inflammatory condition of one or more parts of the lung. This local inflammatory condition is greatly benefited by Antiphlogistine, and whether this condition be primary or merely secondary to a general infection, it should be one of the points of attack.

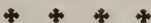
The application of Antiphlogistine in these cases, moreover, adds much to the comfort of the patient, itself a great desideratum in all enfeebling diseases.

To get the greatest benefit from Antiphlogistine it should be applied as hot as the patient can bear it, thick enough to retain the heat, and should be covered with absorbent cotton.



SURPRISED AND GRATIFIED. In relating his experience in the treatment of gouty conditions, Dr. Arthur Bailey Francis (Queen's College), Belfast, Ireland, reports the case of J. W., a gentleman in advanced life and of marked gouty diathesis who came under treatment complaining of severe pains in the lumbar region and extending down one leg to far below the knee. Dr. Francis says: "I found that he had received a chill and was also suffering from catarrhal bronchitis. I diagnosed lumbago and sciatica, and put in force the orthodox methods of treatment, one after the other, but with little benefit to the patient. Insomnia now became a cause of anxiety; bromides had little or no effect, and I was revolving in my mind the safety and advisability of morphia, hypodermically, when it occurred to me to first try the effect of antikamnia and codeine tablets. This I did, ordering one tablet at bed hour to be followed in fifteen minutes by a similar dose, and that also by a third at the expiration of half an hour from the administration of the last. On seeing the patient the following morning I was surprised and gratified to find that he had passed a quiet night, slept well, and that the pain in back and legs was greatly modified. I continued the administration of antikamnia and codeine tablets after this and, before the end of a week the patient was quite free from pain, slept well, and was, in fact, convalescent. I should mention that this patient is 70 years of age, but notwithstanding this, I could detect no depressing effect on heart or nervous system consequent on the administration of these tablets.

"Since treating the above case I have prescribed antikamnia and codeine tablets for insomnia, lumbago, sciatica, neuralgia in all its forms, including tic-douloureux, hemicrania, and that due to dental caries, and always with the most satisfactory results."



THE COAL TAR PRODUCTS AGAIN. In a recent pamphlet, entitled "Antipyrine, Acetanilid and Phenacetin, Are They Harmful or Habit-Forming?" the author, Dr. Uriel S. Boone, an established physician of good standing in St. Louis, has furnished a valuable contribution to the long-drawn-out discussion of this important subject.

There are several points about this investigation of Dr. Boone's which distinguish it from almost every preceding canvass of the subject, all of

which might be summed up in the statement that it bears every appearance of being a genuine search for the unvarnished truth, that it is conducted in a proper spirit of fair and open investigation, directed in the most reliable quarters, and that its results are presented in a fashion which makes his report peculiarly satisfying and convincing.

Dr. Boone has, as we think, rightly opined that "the hospitals and sanitariums of the United States would contain unbiased, unprejudiced evidence, unaffected by any thought of the result upon the drugs themselves;" and he has "selected them as the field of his investigation because they keep records of their cases which few physicians in private practice do, and because, if these drugs were habit-forming, many of their habitues would, naturally, go to hospitals and sanitarium for treatment, and these institutions would have complete records of their cases."

He has, therefore, addressed his inquiries—which by the way, are not in the slightest degree leading—(indeed, they do not even indicate any preconceived opinion on his part)—to the sources which, above all others, the average man would think were best able to furnish trustworthy data on the subject, but which the officials of the Agricultural Department, in the conduct of a recent similar investigation, refused even to consider, it being thought, by them, for some inscrutable reason, to use their own words, "that information from these sources would not be of a strictly representative character." And Dr. Boone brings his witnesses into court and makes them testify in their own verbatim language and over their own corporate and individual names.

A summarization of the statistics and data contained in Dr. Boone's pamphlet shows that he received and publishes reports from 1,027 hospitals and sanitarium. Of these, 996 report that in all of their experience with the coal tar products there have been no instances of any untoward results, and that not a single case of habit formation from them has come under their observation. Injurious effects are reported by six hospitals only, all of which were due to overdose or other improper use of the remedies; seven institutions report cases, but state that they have no records, and therefore give no details; and one reports a case of insanity. The remaining seventeen out of the residuary thirty-one report cases of irregular pulse, weak heart action, cyanosis, etc., under the administration of the drugs, none of which, however, were regarded as of enough importance to be noted in the report as serious, all of which were due to misuse of the drug, and all recovered. Not a single case of fatality is reported in the entire period covered by any one of the hospitals or sanitarium.

But admitting the authority, we can conceive of no good reason why acetanilid, antipyrine and phenacetin should be singled out for special investigation and condemnation, as against many other drugs which are capable, if wrongly used, of producing at least equally harmful results. And in the absence of any such reason, and in view of the fact that Dr. Wiley is an enthusiastic member of the American Medical Association, is on one of its most important committees, and is outspokenly sympathetic in the fight which that association has waged against American medical specialties, we can not help feeling that he has allowed himself, innocently or otherwise, to be used as a tool to further the destructive schemes of the crafty medical clique at Chicago.

We believe that the investigation and report of Dr. Boone represents the real status of acetanilid and the other coal tar preparations. Indeed, we were satisfied that this was their status before any investigation was made at all; but we are sure that the manner and substance of the testimony presented by Dr. Boone is of such a character as to convince the fair and unprejudiced mind of the trustworthiness of its burden. Such an impartial and definite expression from the hospitals and sanitarium of the country ought to settle once and for all the vexed question of the danger and harmfulness of the coal tar products.—*National Druggist.*



THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath.—Letter No. 7.

THE EXACT MODE OF PREPARATION OF THE INDICATED
REMEDY.

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MY DEAR DOCTOR: In perusing my previous letters in this series, you may have concluded that I am radical and plain-spoken, but I shall now proceed to *skin a little deeper*.

The truth always occupies radical ground.

We now approach a most vital part of our theme: "*Mode of preparation of the indicated remedy.*" Prior to the advent of homeopathy this was not a difficult process, nor hard to understand. To possess the extract or the tincture was to have the "preparation" complete. All that then was lacking was the *compounding*.

But Hahnemann introduced a new phase as to the "preparation" of the indicated remedy, one which sought the *inner nature, the spirit, the immaterial substance* of the drug, and wholly eliminated the *material, sensible* elements.

But it is heart-sickening to observe some professed homeopaths playing tag with the public, even professing to be Hahnemannians, while prescribing the *tinctures*. To them the Hahnemannian topic, "The exact mode of preparation," has no new meaning. A professor in an old school college once quizzed his class as follows: "Gentlemen, what is the proper dose of the drug I lectured on yesterday for a child of three years?" A well dressed young man, smart in everything but his studies, answered: "Ten grains." The fellow behind him instantly punched him in the back and whispered, "One-tenth—say one-tenth." "Professor," said the would-be doc-

tor, "I should have said *one-tenth*." "Never mind, young man," said the professor, "your patient is dead." Here let me emphasize the fact that the doctor who follows Hahnemann as to the *exact mode of preparation* of the indicated medicine never makes such fatal mistakes.

My dear young doctor, you will be told by "the mongrel sect" that tinctures are "frequently necessary in practice;" and they will speak of "examples of the exceptional case in which ordinary methods did not apply, were unsuccessful and often resulted in the death of the patient."

Do not forget that the use of *tinctures* is the "*ordinary*" method. You have at your command as a *real* homeopath, something extraordinary. And remember, they cannot find even *one* such "example" over the signature of a real homeopath, such as Hahnemann, Bonninghausen, Gross, Hering, Wells, Lippe, H. C. Allen, Dunham or Kent. Such a statement *smells* like mongrelism and always comes from a mongrel source. Nobody ever died from the want of the *tincture* when the right potency of the indicated medicine had been administered. Remember that.

The astonishing thing is that such men, advocating the use of *tincture*, want the public to believe they are homeopaths and even Hahnemannians. Talk about a Hahnemannian prescribing digitalis tincture, for instance, "for the good of his patient."

Hahnemann, apologizing for having at one time prescribed any but *dynamic medicines*, said it was "from not knowing any better." That is the polite way of saying it was his *ignorance*; and that explains why some men prescribe the tinctures today.

The *tincture* represents the *weakest possible form* of any drug so far as its curative power is concerned and a Hahnemannian never prescribes it. That a Hahnemannian is one who imitates Hahnemann with *exactness*, is a self-evident truth.

Here is what he says regarding "the exact mode of preparation" of the indicated medicine: "The homeopathic

system of medicine develops for its use, to a hitherto unheard-of degree, the spirit-like medicinal powers of the crude substances by means of a process peculiar to it and which has hitherto never been tried, whereby only they all become penetratingly efficacious and remedial, even those that in the crude state give no evidence of the slightest medicinal power on the human body." (Par. 269.)

He here affirms that *all* crude substances become penetratingly efficacious and remedial when their spirit-like medicinal powers are developed by this process which is peculiar to homeopathy. Then neither digitalis or any other drug forms an exception.

Therefore the "process" consists in unfolding and developing the spirit-like powers of these crude substances; and mark this: The medicinal powers are thus developed "to a hitherto unheard-of degree."

And he says this is true of *all* crude substances. Then it follows that dynamis of *any* drug, whether inert in its crude form or not, when properly *developed*, is more powerful to cure than the same drug in its crude state.

Now the man who does not believe that, thinks he knows more about this subject than Hahnemann; and to thus flatly contradict Hahnemann and yet profess to be a homeopath—yea, a homeopath of the Hahnemann type is, to say the least, pretty nervy.

Hear him again: "The dose of the homeopathically selected remedy can never be prepared so small that it shall not be able to overpower, extinguish and cure it, at least in part, as long as it is capable of causing some, though but a slight preponderance of its own symptoms over those of the disease resembling it (slight homeopathic aggravation), immediately after its ingestion." (Par. 279.)

The medicinal power is stronger than the disease, and the slight aggravation spoken of is proof positive that the right medicine has been chosen. The symptoms which such a drug is capable of producing are so similar to those of the patient, the so-called homeopathic aggravation looks like an aggravation of the *patient's* symptoms; but as a matter of fact the aggravation consist in a *preponderance* of the *medicinal symptoms* over those of the patient. This does not last long, and the patient's symptoms then begin to subside and victory is won. Another point: That which is "spirit-like" is *immaterial*—always; and this preparation of the drug must be carried beyond the twelfth before it thus becomes a

dynamic medicine. And even then its inherent powers are not fully unfolded and developed. When you know by experience that the 50-M. will pick up a case and complete the cure which the 3-M. began, but could not finish, then you will understand Hahnemann's writings very much better.

This discovery that the curative powers are hidden in the crude substances of drugs; and the invention by which the *immaterial* dynamis of each drug may be secured and *developed* from degree to degree, free from all poisonous matter and from the possibility of irritating, drugging and killing, is perhaps the greatest service ever rendered by any man for the whole human race. Besides, the medicine thus prepared is far more *penetrating* and corresponds as an immaterial substance to the vital force or dynamis of the human system.

I have long been convinced that a large majority of Hahnemann's professed adherents have no fair or proper conception of the philosophy of potentization.

The result is their conceptions of disease, disease cause and the art of curing are about as crude as allopaths.

Now, my dear young doctor, I do not want you to become identified with that bunch. There is no question at all but Hahnemann's doctrine concerning the *preparation* of the drug is the best the world has ever known. So is his teaching on the law of similars and the testing of drugs in healthy human bodies. But these crude, *material* chaps are so much smarter than Hahnemann that they feign to adopt the drug proving and the law of similars while *throwing overboard immaterial medicines*. In other words, they would practice *homeopathy* with *allopathic* medicines so far as the "exact mode of preparation" is concerned. Such a course can never win in curing the sick. The doctor who has read Hahnemann to so little purpose and still professes to be a homeopath, is to be pitied. As a rule, however, he does not ask for sympathy any more than he does instruction, because he is not conscious of his mercy.

If you would duplicate the cures made by Hahnemann, note the following:

1. Dynamic medicines.
2. Testing in healthy human bodies.
3. The law of similars.
4. The single remedy.
5. The minimum dose.

Remember, you cannot leave out *one link* here and be a Hahnemannian. Neither can you leave out one link and cure as he cured.

Mongrels will concede that immaterial medicines may cure some chronic diseases, but tell you of "exceptional cases." *There are no exceptions.* For years I have never prescribed any medicine lower than 200, and I handle disease in all its forms; and no mongrel or allopath will ever claim to cure syphilis as I cure it right along merely by administering the indicated medicine on the tongue. In my judgment no man needs any lower potency than the 200; but he will certainly need a much higher for some patients.

Here permit me to quote Dr. W. H. Freeman in last CRITIQUE:

"The simillimum for certain heart lesions is crude digitalis, and failure to recognize this fact will result in failure to relieve the patient. Contrary to Dr. H.'s statement, many of our best Hahnemannians do talk this way, and there is plenty of warrant for believing that Hahnemann also thought and practiced this way when necessary for the good of his patients."

Dr. Freeman ought to repent in sac-cloth and ashes the rest of his days for thus *slandering* the good name of the great physician whom he pretends to follow. Observe his tactics: I said, "talk." He says *thought*. He lifts the veil and peers through the mysty past of more than *sixty-seven years* and tells us what Hahnemann "thought." Then he tells us that Hahnemann "practiced this way"—prescribing tinctures. Where is the proof? There is none to cite after he learned a better way. This sounds just like the persecution and misrepresentation which were heaped upon him during his active career for the good of mankind. All such statements were written with pens dipped in the same kind of ink which Hecker used. You might also observe while passing that Dr. Freeman prescribes for "heart lesions" while all Hahnemannians, imitating the master, prescribe for the *patient*. As then, so it is now; but a small per cent of Hahnemann's professed adherents have any real concern for what he taught. Some like to wear his mantle, have "homeopathic" engraved on their medicine cases and carry the *crude stuff* inside. As then, so it is now; but a small number compared with the great body of practitioners seem to be able to appreciate the fact that *any* medicine in its dynamic form is

more penetrating, powerful and effective than in its crude form. As to just what potency shall be selected must be learned by experience. I begin a case with the 200th or 1000th or 4000th, according to circumstances, and go as much higher as necessary in order to cure.

Again I must call your attention to a statement by Dr. Freeman. I do this to impress your mind with the truth brought out and to show you how inadvertently mongrelism will manifest itself.

Dr. Freeman is no doubt as good a physician as any *materialist*; but, like thousands of others, he is sadly deficient in the highest conception of *drug power*. He says: "Under such circumstances, which of course are exceptional" ("of course" Hahnemann did mark such exceptions), "the higher potencies are often positively harmful because they set up reactions which are exhausting as well as useless, *not being on a similar plane to the disease.*" (Italics mine.)

All materialists treat the *disease* and many of them the *name* of the disease; and coincident with that fact they want the medicine to correspond in similarity, so far as the preparation is concerned, to *the plane of the disease*.

All Hahnemannians, imitating the master, endeavor to select a potency which corresponds *to the plane of the patient's susceptibility*. I am sure you can readily see the difference. Any doctor who administers tinctures and undertakes to elaborate Hahnemann's doctrine of *dynamization*, is talking about something he knows nothing about, does not understand it, or *he would never prescribe the tincture*.

By an assumed omniscience some peer into the hidden interior of the human system and think they see disease as a *distinct entity*, as a thing separate from the animating vital force, and imagine that *thing* to be very gross and in its very nature calling for something heroic, something crude, a kind of horse-medicine as it were. And if such physicians are supposed to be homeopaths they console themselves with the forced conclusion that this is "an exceptional case." True, but the *exception* is found in the doctor, not the disease. Only those of a *materialistic stamp* can have such conceptions.

Now, my dear young doctor, I must close this letter—the first on this new division of our general theme. I trust you begin to see that with material notions of medicines and disease you will never possess *the key to successful prescribing*; and you will never be able to make such cures as Hahnemann and those who have imitated him *with exactness* have

placed upon record to the glory of the homeopathic system of medicine. If you cannot conceive the truth that the deranged vital force of the patient's system is immaterial, that the cause of such derangement was immaterial and that it is the hidden, *immaterial* part of the indicated medicine that must cure, you would do well to drop all pretensions towards homeopathy and enter that growing and profitable industry, the second in the agricultural department of the United States—the chicken business. You can then dish out *material* feed, gather *material* eggs and administer *material* lice powder.

But I hope better things of you in homeopathy. If you stand all I shall have to say, together, with what I have said on this topic, you will scale the homeopathic heights.

I knew this series would make some bristles stand the wrong way, and I knew that *hardened sinners* are hard to convert; but I felt and still feel that many young men and women would develop into *real* homeopaths if they could only *catch the spirit of homeopathy*. And I wish to seize this opportunity to say a word to the large number of homeopathic physicians, and some allopathic, who have written me such rich, cheering, appreciative letters concerning these epistles I am writing to you. I have not the time to answer each personally; but I can say here, THANK YOU! Those letters have not only served to inspire my pen, but convince me that *pure homeopathy* is not dead by any means.

I have also received quite a number of letters from the other side of the house—those with their bristles up. To them I have this to say: I was once a *mongrel*, too—a bad one. I know how to sympathize with you; still I have but little compassion for those who are too *hard-headed* to read the writings of Hahnemann and know for themselves that I am teaching the *purest homeopathy*. And no man can charge me with departing from it in practice—not the *thousandth* of an inch. For a refutation of all adverse criticism I cite you to the writings of Hahnemann. I also quote a few very important words which fell from his pen. "*My system of therapeutics can only be appreciated by persons of sound understanding but not by such as are afflicted with perversity and depravity of head and heart.*"

"The Exact Mode of Preparation of the Indicated Remedy" will be further discussed in my next letter.

Yours for dynamic medicines.

J. C. HOLLOWAY, Galesburg, Ill.



SPECIAL ARTICLES



HOW TO OVERCOME SOME OF THE DIFFICULTIES OF MATERIA MEDICA.

BY W. J. HAWKES, M. D.



IT IS VERY DISCOURAGING to the young practitioner or student to be set before a patient suffering from some disease and have handed to him a copy of "Herring's Materia Medica, Condensed," and be told to prescribe for that patient without previously having been informed what remedies are to be thought of in that disease. If he recall from his teachings that in a group of, say, twenty remedies, he will probably find the one needed for this particular case, he is encouraged to make the search. But if he has no more definite information than the assurance that the desired remedy is somewhere described between the covers of that book, his heart sinks within him at the enormoussness of the task; he does not try, and resorts to haphazard prescribing, empiricism, etc. It so discourages him that the evil of mongrelism, which those who complain at this mode of stepping-stone teaching so earnestly deprecate, is increased thereby.

As well might we expect the average school boy to solve readily a problem in higher mathematics without having first become familiar with "the rule of three."

As the science of homeopathic medicine now stands, however, with its materia medica comprising so many remedies, each having such a vast number of symptoms, many of which belong to all in common, there is but one approximately satisfactory way of selecting the appropriate remedy in any given case. This is by what is known as the characteristic or "key-note" system. It is not only at present the best way, but I doubt if there will ever be discovered a better. As the science

becomes in the future more and more simplified, this means of selecting the remedy will become more and more easy and accurate.

This mode of practically applying the law to its use has been decried and misrepresented. Its advocates and practitioners have been sneered at and accused of prescribing for a patient on one symptom alone. "Symptomatologist" is regarded by many as a sign of reproach. Upon what scientific basis, or from what logical deduction, I have thus far been unable to discover.

What do they offer in its stead that is better? Nothing. When they disregard the symptoms of the patient, there is nothing left them but a misleading phantom, which they have constructed from these very symptoms, and named "disease." Can the unperceivable and remote deduction be a safer guide in practice than the proximate and patent phenomena from which that deduction has been drawn?

Much of the discussion between intelligent and conscientious men results from misapprehension of the meaning of terms. It may be so in this case. Let us first understand what we mean by certain words. The word "symptom" must be interpreted in its therapeutic relation. It thus means any evidence—objective or subjective—presented by the patient or his history, or the history of his ancestors, which may aid in indicating the curative remedy. It includes every morbid phenomenon presented by the patient; also the cause—direct or indirect, exciting or predisposing, inherited or acquired—of his trouble. Not one nor two, nor one-half, nor any part, of the symptoms which make up the totality of these phenomena, is sufficient grounds for a prescription. The "totality" of the symptoms is the only proper basis for a correct prescription. "Totality" of the symptoms means all of the phenomena, as above indicated, presented by patient and his history.

A "symptomatologist," in the therapeutic sense, is one who prescribes a remedy according to the totality of the symptoms presented by a given patient. He is a physician, in other words, who carefully weighs and considers every fact and

circumstance connected with the patient, and his history as a patient, and selects his remedy accordingly.

The pathologist, in contradistinction, observes the symptom (or more often but a part of them), and projects from them into the patient an imaginary condition—an entity—which he calls disease, and prescribes for that. He leaves a certainty—the symptoms—dumb nature's voice, which tells him as plainly as he can ever know her needs, and is misguided in his treatment by this will-o'-the-wisp of his own creation.

The symptomatologist—he who prescribes according to the symptoms—is the only one who is guided by the law. The symptoms of the patient, not the disease, are the true indications for the remedy.

When the physician meets a case of scarlatina, he cannot refer to his *materia medica* and there find medicines, drug doses of which have ever produced scarlet fever; but he does there find remedies that have produced nervous phenomena and their results similar to those found in the patient. If he is justified in prescribing for the diseased condition by its name one remedy must do for all cases of that name. This would be easy and simple enough. No puzzling over the symptoms of the *materia medica* with such a rule for practice. Naturally, lazy mankind loves the easy way. But what of the patient?

But all patients ill of scarlet fever have not symptoms precisely the same. There is often a wide difference. No matter, the condition in each is called scarlet fever, and if the name is to be the guide the remedy must be the same in all cases.

If we recall a considerable number of scarlet fever patients we remember that in one the rash was of a brownish appearance, miliary in character and showing in patches here and there over the skin; that he was delirious, stupid and debilitated. Another had bright red points scattered over the surface, scanty and high colored urine; the urine even entirely suppressed; he complained of stinging pains in the throat; dyspnoea, a tendency to dropsy, etc. A third had from the beginning a sore, raw condition of the lips or corners of the mouth, which he kept picking and digging until they bled profusely, a fourth had a smooth, shining, bright red appearance of the skin; eyes injected; pupils very much dilated; the skin

so hot it burned the hand; delirious; wanted to leave suddenly the bed; jerking, spasmodic actions of the muscles; head bent backward; throbbing carotids, etc. Many others with equally marked peculiarities could be recalled.

The pathologist takes no note of these significant differences; they possess for him no therapeutic interest. He wants or needs to know nothing beyond the fact the patient has scarlet fever. He is treating that disease and nothing else. As one of them has said: "With one specific cause, why many remedies?"

The symptomatologist observes these variations. To him they are significant. On looking over the *materia medica*, he observes the fact that several remedies have a similar variation of symptoms. He sees that, while a group of remedies have the general symptoms of scarlet fever in common—the rapid pulse, high temperature, angina, inflamed skin, etc.—one of them (*ailanthus*) possesses the peculiarities of the first case; another (*apis*), has those of the second; another (*arum. t.*), those of the third; and still another (*belladonna*), has those of the fourth; and so on.

All the remedies mentioned are useful in the treatment of patients suffering from scarlet fever. Which of them will the pathologist prescribe? Which of them is the remedy for scarlet fever? The symptomatologist prescribes the one indicated—not by scarlet fever, but by the peculiar symptoms of the patient.

But the pathologist may say that he also uses all these remedies—gives different remedies in different cases. If so, why does he give one remedy in one case and a different one in another? They are all cases of scarlet fever. There can be but one reason—the symptoms are different. But if the symptoms in the least influence his choice of a remedy, he is to that extent a symptomatologist. When he admits that two or more remedies may be indicated in a given disorder, and he selects one for this reason and another for that, he becomes an acknowledged symptomatologist. To be sure, it may be to a very limited extent, and his loss as a therapist is in the inverse ratio of such limitation.

The more limited one's knowledge of the finer distinctions of the *materia medica* is, the louder will be his denunciations of symptomatology. The more one knows of such distinctions on the other hand, the greater symptomatologist he becomes; and, other things being equal, the better will be his success in practice. The greater also will be his confidence in

the law and in himself, and the less will he be forced to resort to allopathic expedients.

Of the many remedies in the materia medica, no two are exactly alike in their proved symptoms, or in their curative action on the sick. Each has one or more symptoms possessed by no one of the others. Were it otherwise, and did any two of them develop precisely the same symptoms or curative powers, then one would be redundant; it would be of no use; it would be a comberer of the ground, where there is no room for that which is useless. These one or more peculiar symptoms are what characterize the remedy possessing them—its “characteristics.” These symptoms, when found, are more valuable than all the other symptoms of the remedy to which they belong. No one, no matter how bitterly opposed to symptomatology, will dare say that any one of the remedies of the materia medica should be cast out, unless he has thoroughly acquainted himself with its symptoms and has applied it according to the law and has repeatedly found it useless. But if none can be declared useless; if each has its sphere of influence, we should learn what that sphere is.

But it is impossible for any human mind to contain, in a useful shape, all the symptoms of all the medicines in our materia medica, as at present constructed. Many of the remedies have many symptoms in common.

Some symptoms are found under all the remedies. Let those common symptoms go, as we have them in the books; and, as they are not distinctive, we need not overburden our memory with them. The better way, and the only way, in my opinion, by which it is possible to acquire and retain a useful knowledge of all the remedies in the materia medica are to learn which are the four or more symptoms characteristic of each remedy, and commit them to memory in connection with the remedy to which they belong. To be sure it will require study and observation, but what valuable intellectual accomplishment can be acquired without patient study? It will ten fold repay the efforts spent in its acquisition.

These characteristic symptoms are “key notes” to the therapeutic tune, and the other symptoms of the “totality” will nearly always be found to follow the striking of the key note. At all events, it is a valuable index—a finger board, standing out conspicuously in the wilderness of symptoms—pointing us in the right direction.

Los Angeles, California.

CONTRIBUTED

JOURNEYING THROUGH HELL GATE IN THE COLORADO ROCKIES

Description in Pen and Picture of What Delegates to the Big July Convention Will See While Passing Over the Mountains.

By LEE HANEY.

A RIDE through the heart of the Rocky Mountains in Colorado may be likened in simile to a trip down Broadway, New York, on a street car. The person who traverses the eternal hills on a railroad train sees about as much of Nature's astounding handicraft in that country as the visitor to the American metropolis sees between Harlem and the Battery, comparatively speaking. In either case they have "been there" and "saw the sights."

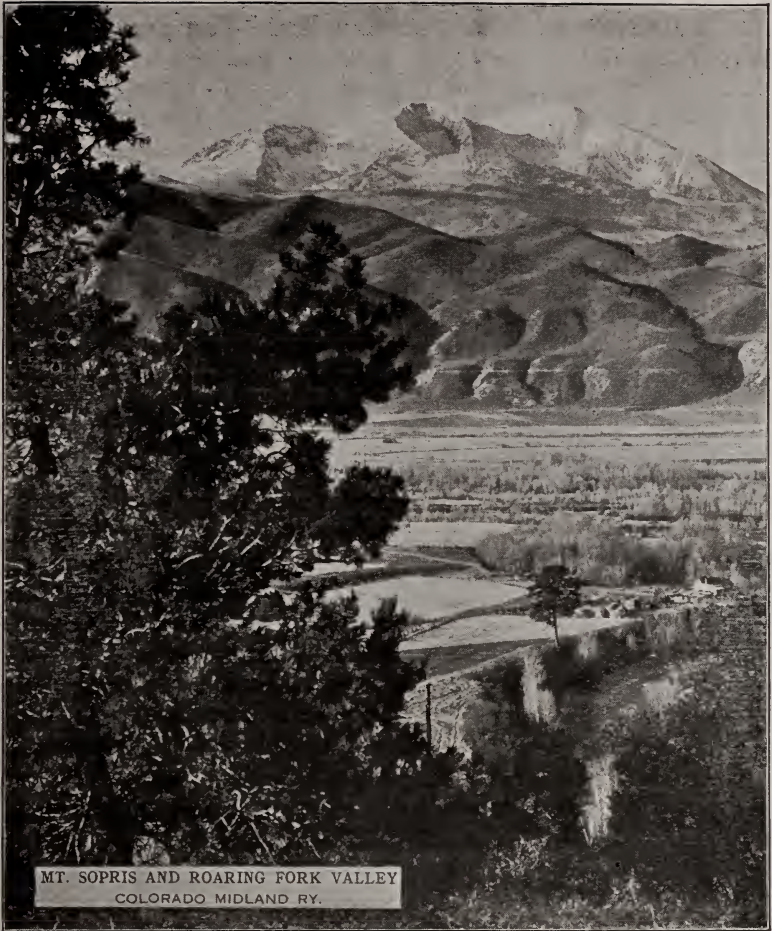
Apropos of the fact that the Colorado Midland has been declared the official route over the mountains for the American Institute of Homeopathy delegates, a bit of explanation in word and pictures will not be amiss.



Beautiful Denver, the Paris of America, is not located in the mountains, as per a generally prevailing impression entertained by those who have never journeyed westward. The city stands full twenty miles from the foothills, and twice that distance from the higher peaks, which all the year 'round wear their white turbans of snow. To the untutored eye, however, the forty-mile-away peaks appear to be about four miles from Denver. Ascending to the height of the State Capitol dome, from which point of vantage many visitors view the surrounding country, a sweep of vision extending over two hundred miles up and down the long range of mountains is obtained. Pike's Peak, eighty miles away, stands out as clearly as your neighbor's barn back home, which is only half a mile distant.



Leaving Denver, the route to Colorado Springs, seventy-four miles to the southward, skirts the foothills at a distance varying from twenty miles to a few hundred yards. Colorado Springs, the great summer resort, is popularly described as being situated at the very base of Pike's Peak, and this is indeed true, in the sense in which western distances are usually discussed. Looking at the top of the Peak from Colorado Springs is like gazing at the highest story of a tall building "back east," though, as a matter of fact, it is



a seven-mile street car ride from there to the Cog Road station at Manitou, where the train for the summit is boarded. It is then nine miles farther to the top.

Immediately after leaving Manitou, the Colorado Midland trains plunge abruptly into the fastnesses of the hills, and as the train takes the big curve overlooking this little resort, the traveler looks east and sees the last vista of the great American plains, stretching out across eastern Colorado, Kansas and on to the Mississippi basin. It is then that you will need all the eyes in your head, for the panorama of scenery which there begins to unfold is like a veritable moving picture with natural stage settings. The train is laboring up a four per cent grade (211-foot rise to the mile)

for a distance of twenty-seven miles. You are going up Ute Pass, and, as the train winds in and out of numerous tunnels, first on this and then on that side of the canon, a mountain stream, called the Fountaine Qui Buoille (fountain of boiling water), leaps, dashes and churns alongside the roadbed, tossing off a silvery spray which the Colorado sunlight transforms into every color of the rainbow. Cascade Canon and Green Mountain Falls, nestling like crown jewels in the diadem of Nature's astounding wonders, are little summer resorts dotted along the now widening canon. Higher up is Woodland Park, another resort, from which point the most striking view of Pike's Peak is obtained. There she stands, rearing her proud old head among the dancing clouds, with her gaping, glacial crater of the extinct volcano, bearing mute evidence of the upheaval which, centuries and centuries ago, seamed and seared her rocks and belched ashes which even today underlay the sod for miles around. And to think the civilized world, with its wisdom and science, has not even a hint of this early history.

The Midland describes a semi-circle around Pike's Peak. At Divide, twenty-seven miles from Colorado Springs, the highest point of the Rampart (front) range is reached. From this point the Midland Terminal branches off to Cripple Creek, the world's greatest gold-producing camp, a distance of thirty-one miles. The course is then downward, through Florrisant Canon, Granite Canon and into broad, expansive



A PANORAMA OF GLENWOOD SPRINGS
COLORADO MIDLAND RY.

South Park, where Indian lore and ancient legends of early and more savage life in Colorado is still solemnly recounted by the sturdy pioneers. This flat basin, not entirely unlike an eastern prairie, is thirty by forty-five miles in dimensions. The next startling surprise is a vista of Collegiate Range, Mts. Princeton, Harvard and Yale, named for three of America's leading educational institutions. They overlook the valley of the Arkansas River at Buena Vista. This little town, as viewed from the height of the track, resembles a checker-board. It is something like looking down upon it from a balloon.

Farther up the valley is Leadville, two miles high, which sprang into prominence as a gold and silver camp in 1879, since which time she has held the lead of the world's greatest ore-producing camps. Eleven miles west the backbone of the continent is reached. A tunnel two miles and one-eighth long has been bored through the spinal vertebrae of the Divide, and when the engine stops for water after emerging from the western portal, it is standing on the Pacific slope, while the rear sleeper is on the Atlantic slope. In other words, you are simply balanced on the top of the world.

Four miles west Hell Gate, famed in song and story, is passed. Around this stupendous group of rocks and deep gorges the intrepid engineers have laid the tracks, which run in some places as close as eighteen inches to a 1,200-foot precipice. But the roadbed is chiseled out on the sides of mountains of granite as strong as the Rock of Gibraltar—and considerably more massive. By easy stages and many fantastic windings, you are gradually let down to the level of the Frying Pan River, the state's most prolific trout stream, which is followed for a distance of thirty miles until the country opens up into the Roaring Fork Valley. Mt. Sopris, shown in one of the accompanying illustrations, is the sentinel of this valley. This mountain has been declared by artists to be the most impressive peak in the entire Rocky Mountain range. Eighteen miles to the south is Aspen, the noted silver mining camp.

A few miles farther on, where the Roaring Fork empties into the Grand River, is located Glenwood Springs, now so famous as a summer resort and watering place that she scarcely needs an introduction. With her mammoth natural hot water swimming pool, splendid hotels, magnificent settings and rare mountain climate, Glenwood Springs stands in the front rank of the world's resorts.



BIG SWIMMING POOL AT GLENWOOD SPRINGS
COLORADO MIDLAND RY

Leaving Glenwood Springs we enter the valley of the Grand River, following this stream to Grand Junction, where it meets the Gunnison River. Grand Junction is the metropolis of the famous fruit belt on the Western Slope of Colorado, where land values have within the past decade risen as high as \$4,000 per acre. Located near the Utah line, Grand Junction is the last place of especial interest in the Centennial state. A night's ride brings us to Salt Lake City, the great Mormon metropolis, around which there revolves history of progressive civilization that has made Utah respected and revered the world over. The great Temple and Tabernacle are buildings which stand as monuments to the pluck and energy of the disciples of Brigham Young, who snatched the desert from oblivion, and by the magic application of irrigation have caused it to bloom like a rose.



THE CRITIQUE'S "POOH-BAH" IN THE OPEN.



LO THE CRITIQUE: Have you observed that the distinguished member of the American Institute:

Whom THE CRITIQUE has named "PooH-Bah;"
Editor "national homeopathic medical journal;"

Field Secretary of the Medical Council;

Divorter of about \$11,000 of the Institute's cash, has at last come out in the open "forninst" the work of the transpor-

tation committee of the Institute, whose paid agent he is?

Yes, after some months of guerilla warfare against the committee he now blunders over its "official route" for the Institute to California by declaring in favor of what the committee early found to be an impossible combination, namely, the Burlington to Denver and the Santa Fe from there on. He also assumes to speak for the entire Eastern profession by stating in the last issue of the aforesaid "national homeopathic medical journal" (Heaven save the rest!), that the Easterners are overwhelmingly in favor of the combination which the chairman of the committee thought at one time to try to make, not because it was the best, nor the most comfortable, nor the most attractive, nor the most scenic route to California, but in part because it was thought best to call the turn and see what the Santa Fe and its medical agents of the "national homeopathic medical journal" and certain Eastern clubs and councils might do about it.

The fact is, that because the line not chosen has been made to believe it could reach the national homeopathic profession by advertising in the "national homeopathic medical journal," that journal would sell the Institute to the aforesaid line, body and pantaloons, if it could deliver the goods, and would swelter and melt and generally render uncomfortable the membership of the Institute by coercing a long, hot, dusty, tedious, sand storm and heat mirage ride of nearly two thousands miles in order to compel the doctors who go, to cough over to the advertising patron from \$20 to \$25 per capita for the one thing on that road which is at all worth seeing. For while the "side trip" is billed at but \$6.50 additional fare, by the time the two extra nights' sleeping car fare is met, the extra meals are paid for, at Santa Fe prices, and the stage ride is bought, the best end of a \$25.00 bill have been used.

Early last fall, while yet the official journal of the Institute, the deception began. A complete schedule was presented "from an Eastern member of the committee," when the aforesaid "Pooh-Bah" of THE CRITIQUE knew full well that its author, Dr. Garrison, also of the Medical Council, was not a member of the Transportation Committee at all, for the official journal had published the official committees and knew officially of whom they were composed. This deception, this effort to deceive the Institute, whose paid field agent your "Pooh-Bah" has been, at \$2,000 per year and \$10.00 per day

traveling expenses (and for what?) might be overlooked if it was by any other editor than one whose services, and therefore whose loyalty it ought to expect, the Institute pays for at a good round price. But when it comes from one for whom the Institute has done very much, and for whom it is still, unfortunately for itself, doing a little, it becomes questionable in its propriety. The Committee asks no favors for itself. It is quite able to defend its acts. But the Institute has a right to expect, even to demand, loyalty and cohesion from all its paid representatives. An official train across the continent is of some moment to the Institute. The best part of a week in each other's company means great possibilities for the Institute and Homeopathy in the future. A visit by the Institute to several of our important Western metropoli cannot fail to interest the Western profession in our work—notwithstanding the fact that our chief propagandist proclaims the suggestion that the Institute may be able to do some good for itself and the profession *en route* to "savor of the ridiculous."

Perhaps if he were being paid for the formation of the itinerary out of what little cash the Institute has left, after his unholy raids upon its treasury, it might be thought different. But to assume that the whole Institute, the members who go to California, the "American Institute of Homeopathy Special," with its hundreds of doctors aboard, are mere figure-heads and can do nothing of interest or value to their cause *en route* is to assume that all the propaganda wisdom of the profession is husbanded under his own narrow shirt-front at \$2,000 per annum and \$10 per day—when at work. Did you ever? Verily, it is not over-difficult to believe that THE CRITIQUE's sobriquet is specifically applicable.

Finally, the effort to frighten the membership into doubting the safety of the selected route is despicable. Of all the lines to California none has been more free of accidents, while none has experienced more in recent months than the route the "national homeopathic medical journal" favors from Denver on. It is true that the San Pedro suffered a wash-out in the winter. It is also true, however, that it has never suffered a disaster of this character at any other season. Most of the roadbed, at first thought to be gone, has been found to have admirably withstood the flood. The balance, a heavy rock bed through a picturesque canyon, is already almost completely rebuilt, and in the most substantial manner.

Not only have the officials of the chosen line assured the Committee, but those of the Rock Island, the Burlington, the Union Pacific, the Colorado Midland and the Denver & Rio Grande have also assured us—and the word of these officials ought to be worth as much as that of the complaining “Pooh-Bah”—that the line will be ready, in fine shape and in a perfectly safe condition for us. This being so, why should any of us be so timid as to be influenced by the advertising patronage of the *Medical Century* into selecting any other than the route of the Institute’s official train to California? Why should any one want to “flock by himself” for the trip that he may take with his colleagues and fellows through the very “Heart of the Rockies,” with scenery and delight every mile of the way, as against hundreds upon hundreds of dreary, uninteresting, hot, dusty, sandy plain and desert, with here and there a hill and finally one chasm, at \$25.00 per head extra?

Break away, Mr. Editor of the “national homeopathic medical journal!” You’ve got it in your crop; out with it; it will do you good. We regret that we haven’t a small fortune to spend with you to make you think our way; perhaps it might be “different” if we had. But we want you with us just the same, and in the Institute’s desire and effort to propagate a little *en route* it certainly has a right to expect its chief artist in the propagating line to be with and of the party. Kindly name the number of your berth and it will be reserved.

C. E. FISHER.





EDITORIAL SECTION



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The Editor will be in no way responsible for the opinions expressed by individual contributors.



OME SIDE LIGHTS ON THE "OFFICIAL ROUTE" SITUATION. Now the "official route" has been definitely decided, it is hoped members of the American Institute will back the selection by going to Los Angeles in a body; by so doing they will aid in the accomplishment of much good which the transportation committee hopes will result from the selection of the route outlined in our last issue, besides affording local entertainers ample opportunity of showing their ability along such lines.

At the April meeting of the Denver Homeopathic Club it was decided, unanimously, to extend an invitation to the Institute members to visit Denver *en route* the Los Angeles meeting. The club put itself on record to the extent of authorizing its secretary to notify the Institute people officially, using Secretary Horner and the *Institute Journal* as mediums of conveying the same, so there need be no

doubt but every member of the profession hereabouts will serve upon the reception committee, or that the glad hand will be extended on this occasion in real old-fashioned Western style.

In addition to the foregoing preliminary move a committee was chosen, consisting of Doctors Burnham, Strickler and Mastin, whose duty it will be to formulate plans for the entertainment of Institute members sojourning in our city the one day allotted them by the transportation program, and while our financial exhibit may not be as large as the Los Angeles end of the game, we feel sure the heartiness in the welcome which the Denverites may extend will ring as true as any they will encounter on the entire trip.

THE CRITIQUE presents elsewhere a brief panorama of a very small portion of scenes to be encountered on the Midland route in Colorado. This is a wonderful piece of railroad construction and is noted for the safety and up-to-dateness of its operation, and as the passenger department of this line is already at work outlining the details of the trip there is no question but this section of the journey will be one of the most pleasant and memorable of the entire itinerary.

During Dr. Fisher's recent visit to our city, he displayed his customary vigor by visiting numerous railroad officials, members of the profession, and wound up a very strenuous day as the guest of Dr. Peck at the banquet of the Denver Homeopathic Club, at which meeting he gave his hearers a very clear outline of the intentions of his committee. If he was of the "quitter" class, the article in *Medical Century* under the caption "That Official Route," might have a depressing effect upon any further efforts either himself or his associates on the transportation committee might undertake; as it now stands, however, it is not at all improbable the aforesaid committee can convince Institute members of the wisdom of their choice in this matter. The editor of *Medical Century* evidently has his system so thoroughly saturated with the Grand Canon spirit as to be absolutely im-

mune to sentiments of the scenic sort with reference to any other line but the Santa Fe. He goes so far as to declare this to be "the one real attraction on the outward trip," but fails to advise his readers (taking advertisement in the *Denver Daily News*, of April 15th, 1910, and evidently authorized by the company), that "it would take from two to five days' time, \$6.50 railroad fare, a reasonable hotel bill at El Tovar (management of Fred Harvey), and a few dollars for rim and trail trips—that's all the extra expense." The foregoing is not an underestimate of the cost and delay in the trip in order to see this grand spectacle as it should be investigated, and the transportation committee has taken all these objectionable features into consideration, as well as the "crippled San Pedro route, which is *now* out of commission, and which it is hoped to patch up by July 1st, so as to render it reasonably safe." (The italics are ours; beside that the last quotation is from *Medical Century*.)

Western railroad men have a way of doing things which simply surprises Eastern men of the same profession, and as the San Pedro people have practically guaranteed the road in good condition by July 1st—fact is train service is to be resumed this month, no concern need be felt that they will not make good.

And what if they *should* fail? Nothing specially serious in a situation of that sort inasmuch as the transportation committee have still another route over which the members may be carried, with but little delay and no extra cost, and through as beautiful scenery as one could possibly wish to see.

You will notice *The Century*, for want of space, fails to give very much information concerning the Institute or its doings. Last year, when it posed as the official orchestra, it gave less, so it is hardly probable, if one desires anything reliable regarding the Institute or the intentions of its active promoters, that they will be able to find such information in "*the national journal of homeopathic medicine and surgery.*"

THE CRITIQUE suggests the action of the transportation

committee be accepted by the membership, regardless of those who are trying to retard the progress of this very important committee.



ENGLAND AND HOMEOPATHY. In no portion of the civilized world is there so much genuine enthusiasm displayed for the cause of Homeopathy as in England at the present time. By persistent pegging away, Homeopaths of King Edward's dominion have secured some marked concessions from the government, besides the Council of the British Medical Association, which is either the parent or progeny of the A. M. A., is inclined to be more tolerant of the teachings of its new school brethren.

A special directory has been issued annually by the homeopaths of this tight little isle, to which the old school society has objected most strenuously, owing, as they claimed, the sectarian attitude of those whose names appeared therein. Now, however, as the medical act has declared this insufficient ground in itself for refusal of professional fellowship, the homeopaths consider a withholding of further recognition and a more general acceptance of Hahnemannian principles a matter of but short duration, and feel highly elated at this notable advance.

The British Homeopathic Association is making great progress in its propagandistic work. Lectures are being given by prominent members of the profession to audiences composed of not only the nobility but others of high social position; a new professional monthly publication is in process of formation and will be well financed and ably conducted; the Southport and Plymouth hospitals, dispensaries at Folkestone and Croyden and the Hahnemann Convalescent Home at Bourmouth are showing a healthy increase in patronage as well as a marked improvement in health of those who patronize them, besides an increasing interest in them by the general public; large bequests are being made to homeopathic institutions; subscriptions and donations are received every month by the B. H. S., which are devoted to the dis-

semination of homeopathic principles and practice. Besides all this practical work the social side of life is not entirely overlooked as in the golf tournament this year members of the British Homeopathic Society were specially invited to enter the lists. Taking all these signs as a guide, it behooves us of the vaunted "hustling" propensities, to get busy.

We have heard several suggestions regarding the possibility of a resurrection of the Denver Homeopathic College, but THE CRITIQUE does not care to go on record as giving this information for more than idle rumor. We believe, however, should the homeopaths of Denver succeed in securing a unanimous and hearty co-operation of the entire profession hereabouts to a move of this sort, provided some money could be brought to bear in backing the venture, that no better or more opportune time could prevail than the present, for discussion of this subject.

In order to succeed, however, it must be a *homeopathic proposition*; even then it would not have smooth sailing for some time.



HOMEOPATHIC LITERATURE OF THE RIGHT SORT. THE CRITIQUE has intended for some time calling attention to the writings of DOCTOR J. C. HOLLOWAY, of Galesburg, Illinois, which have been running in these pages for the past six or seven months, under the heading, "The Key to Successful Prescribing; Letters to a Young Homeopath."

We are pleased to say there are in course of preparation by this writer at least four more letters, and we hope when the series is complete, DR. HOLLOWAY will have them issued in book form, as no writing upon this or other homeopathic topics since the days of the immortal Hahnemann, have been so clear, so convincing and so thoroughly up to the minute, as these letters by DR. HOLLOWAY in this publication.

Besides the foregoing, he issues each month a "Homeopathic Card Series" which would prove the best literature either the American Institute, state societies or individual

physicians could possibly circulate for the good of the cause. We hope to see the time when every physician in the country will have something along these lines laying on his reception room table for free distribution among the laity.



THE BROAD BROW WITH BRAINS TO BURN. The fortitude displayed by one Dr. Henry F. Pritchett, New York, president of the Carnegie foundation for the advancement of education, during the trying ordeal of declaring (in a dispatch sent from Santa Barbara, Cal., to the New York *Herald*), "the country is flooded with poorly trained, unfledged, incompetent doctors and lawyers," must have been beautiful to witness, and the innocence displayed by the secular press in swallowing this sort of sloppy self laudation to the detriment of regular advertising rates, doubly ditto.

If philanthropist Carnegie were to set aside a few sheckles for legitimate advertising stunts and muzzle some of the broad brows with brains to burn, those of the large "I" class, now dependent upon his charity, there might be some chance that the object of his "foundation" would eventually prove beneficial to those for whom it was intended.



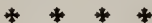
CORRECTION. In our last month's issue, in the leading editorial, *re* settlement of the Institute Journal matter, we stated that Dr. Ward had sent Dr. Horner a check for two hundred and fifty dollars to cover an indebtedness which rightfully belonged to the Medical Century Company to pay. This was correct so far as it went, but we failed to say that Dr. Horner had returned the check to Dr. Ward, being forced to do so the second time.

Inasmuch as we have this information from a source of unquestioned reliability we are inclined to think Dr. Horner will insist upon the Medical Century Company paying its just debts.

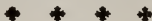
While this may not be considered much of a "correction," it has the redeeming quality of being a correct statement of the affair as it now stands.

MISCELLANEOUS

WANTED—Physician to share office room. Address Dr. E. H. King, room 23, 1114 Sixteenth street, Denver, Colorado.



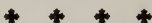
A very-much-to-the-point article from the pen of Dr. C. E. Fisher may be found in the "Contributed" department of this issue. Read it.



Among the heretofore impossible things accomplished by a hen at Decatur, Alabama, recently, was the laying of a dumbbell. Notice the location please; dry district.



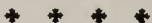
Dr. Leroy C. Hedges, Grand Junction, contemplates locating in Denver soon. As we remarked before, Hedges is a good homeopath and THE CRITIQUE extends a courteous welcome.



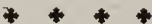
A Fort Collins osteopath has given up his profession and became a forest guard; salary, \$70 per month. This simple act is conclusive evidence the doctor is too smart to practice any profession.



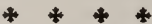
Dr. Homer J. Ostrom announces that April 7th he will remove his office to 130 West Fifty-seventh Street, New York City. Office hours—10 a. m. to 12 m., and by appointment. Telephone, 5520 Columbus.



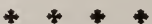
A tame trout at Winsted, Conn., so the papers say, answers to his name, "Mike," when called; eats from its master's hand and permits his back to be stroked like a cat. That sounds like a real fairy tale, not a fish story.



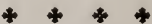
The new "Physician's Record" which the Colorado State Board of Health demands shall be made out by the attending midwife or doctor, is almost as voluminous as the census enumerator's senseless, endless-chain of "information."



Dr. Wm. R. Welch will give up his practice in Denver for at least a year, during which time he will cover as much of the globe as is consistent with good judgment and a desire to see things. THE CRITIQUE hopes he will have the time of his life.

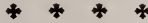


If you have any personal item or other news note which you think belongs in THE CRITIQUE, telephone editor of this journal and he will do the rest. We want to thank several who have been so courteous as to do this during the past month, and hope to be put under obligations to many for similar cause.

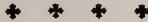


Certain city papers the early part of last month, contained a cute picture supposed to be one Dr. E. Bowen, of Paris, France, who is featured by the aforesaid papers as being the discoverer of an "Elixer

of Life," warranted to not rip, ravel or run down at the heel, and to prolong life all the way from fifteen to twenty years. If the secular press would pay more attention to praising meritorious methods of cure, than to giving up so much valuable space to every Tom, Dick and Harry who makes extravagant claims, such as are outlined in the foregoing, the world would be much better off physically and many people ditto financially.



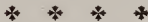
How often you have heard this: "I could eat a hatfull of homeopathic medicine and it would not hurt me." The implication is, if a medicine cannot "hurt" it cannot *cure*. This is untrue. That part of a drug which *cures*, never kills; and that part which *kills* never cures.—*Homeopathic Card Series*, April, 1910.



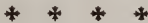
Don't fail to attend the forthcoming meeting of the Denver Homeopathic Club. Your presence on this occasion is needed that suitable entertainment be furnished members of the American Institute of Homeopathy when that whirlwind strikes the town in July. Go loaded to say something that will help the good cause along.



The April issue of *The Journal of the American Institute of Homeopathy* is one well worth preserving for future reference. The information contained therein is such as required additional "Transactions" under the old method of doing business. Continued congratulation from *The Critique* that such a capable man as Dr. Horner has been selected for the job.



A good, consistent homeopath, desiring to learn of an excellent opening in a large Illinois city, can hear something to their advantage by addressing editor of THE CRITIQUE upon this subject. Three thousand dollars necessary to swing this deal, but it is well well worth investigating. Nothing but simon-pure brand need take the trouble to answer this notice



Battle & Co., of St. Louis, have just issued No. 12 of their series of charts on dislocations. This series forms a most valuable and interesting addition to any physician's library. They will be sent free of charge on application, and back numbers will also be supplied. If you have missed any of these numbers, better write Battle & Co. for them before the supply is exhausted.



Mr. Frank E. Ellison, nephew of the Doctors Enos of Denver, who took his two first years at the Denver Homeopathic and will graduate from Hahnemann, of Chicago, this coming commencement, has been appointed interne at the Metropolitan Hospital, New York City. As this appointment came by competitive examination, the young man has every reason to be proud of his achievement.

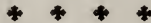


Colorado is winning recognition throughout the country for the thoroughness of the plans inaugurated by the Colorado Association for the Prevention and Control of Tuberculosis for the observance of Sunday, April 24th, as Tuberculosis Sunday. Requests are being received at the offices of the state association in the state capitol from practically every city and town in the state for speakers and literature. Many of the county

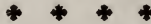
medical societies have appointed representatives from among their number to occupy pulpits, and as these plans are maturing, reports received at the office of the National Association in New York indicate that the audiences assembled to hear the "Gospel of Health" throughout the United States on that day will aggregate thirty-three million people. Leading divines of all denominations have given the movement their heartiest co-operation; notably, Bishop Nelson of the Protestant Episcopal church and Dr. Chas. F. Aked of the Fifth Avenue Baptist church of New York City.



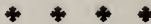
A shemale doctor of Seattle has discovered a sure cure for indigestion, her system being to "starve" the patient. Inasmuch as several of her clients have succumbed to the treatment and died, should, if any doubt still remains, convince the most skeptical of the efficacy of this intelligent idea in dispelling the disease. What is more to the point, the several cases treated thus far are bound to remain "cured."



The Iowa Homeopathic Journal, after reading Dr. Dewey's philanthropic editorial, March issue, *re* the Institute Journal situation, has this touching tribute of the philanthropist: "We are not informed how this proposition was brought about, but from the *tone of the editorial* (our italics), it is simply out of the goodness of Editor Dewey's heart." No doubt, ere this, Editor Huntoon has read some other editorials and has discovered that instead of being out of the goodness of Editor Dewey's heart it was more from the generosity of President Ward's pocketbook.



Under date of February 9th, 1910, Dr. B. L. Mukherj, Khagra P. O., (Murshidabad) Bengal, India, writes: "I am very glad to acknowledge receipt of the present number of 'THE CRITIQUE,' January, 1910. The 'Key to Successful Prescribing,' contributed by J. C. Holloway, is excellent and very interesting for a true Hahnemannian homeopath; also the get up is striking." We are pleased to know that nothing which has appeared in these pages, and much good homeopathy has first seen the light of day through THE CRITIQUE, has caused such widespread and favorable comment as the articles of Drs. Holloway and Loos. We hope to have them with us for many years.



Because of the current interest in the diet question resulting from the high prices of meat, the leading contributions to *Physical Culture* for March are particularly readable. In "What Shall We Eat," Upton Sinclair, author of "The Jungle," makes some pithy and pertinent comments upon the vegetarian diet as opposed to one in which meat is the chief factor. *Physical Culture's* editor, Bernarr Macfadden, also touches at length upon the advantages of a vegetarian diet as a refuge from the exorbitant prices of meat.

Among other timely and readable contributions in this number are: "Physical Training at Tuskegee," by Booker T. Washington; "General Rules for Health-Building," by Bernarr Macfadden; "Winter Sports of Americans Abroad," by Felix J. Koch, and a score or more of other interesting articles.

The menus of vegetarian dishes, with the receipts which accompany them, published in *Physical Culture* each month, are of especial interest to those seeking to cut down their ration of meat because of either choice or necessity.

DENVER HOMEOPATHIC CLUB

The Denver Homeopathic Club held its 265th meeting on April 2d at the Chateau Lafayette. The meeting proper was preceded by an informal supper, which feature seems to be highly appreciated by those attending. At the conclusion of the supper President Clinton Enos called the meeting to order, and after the reading of the minutes, Dr. J. W. Mastin presented the following resolutions of respect which were adopted:

WHEREAS, It has pleased the Great Physician to remove from earth Mrs. James Polk Willard; and

WHEREAS, Mrs. Willard was the wife of our esteemed co-worker, Doctor James Polk Willard, a faithful exponent of the homeopathic school; and,

WHEREAS, Mrs. Willard's life was one devoted to her family, friends, and the uplifting of humanity generally, the doing of noble deeds and the exemplification of the Golden Rule; therefore,

BE IT RESOLVED: That the Denver Homeopathic Club express heartfelt sorrow for our bereaved brother and family in this hour of deepest affliction. The inadequacy of words to convey sympathy in time of trouble such as has befallen our esteemed co-worker is never more forcibly brought to mind than in a case of this character; therefore, we will permit the silent sorrow felt in this particular instance by every member of the profession, to speak more potently than written words. Be it further

RESOLVED: That a copy of these resolutions be forwarded Dr. Willard and his family; the same spread upon the minutes of this society and a copy sent THE CRITIQUE for publication.

D. A. STRICKLER,
C. W. ENOS,
J. W. MASTIN.

Dr. Charles E. Fisher, of Chicago, was present and addressed the members regarding the plans for the entertainment of the delegates to the coming meeting of the American Institute. Dr. Fisher is chairman of the transportation committee, and he is endeavoring to make the stay in Colorado of the delegates and their friends as enjoyable as possible. On motion the chair appointed Drs. Mastin, Strickler and Burnham a committee on local arrangements, to plan for the reception and entertainment of the visitors. The Club has extended a formal invitation to the Institute to tarry in Denver on the journey to the coast.

The scientific program consisted of informal remarks by the members present. Dr. W. R. Welch introduced the subject of goitre, and outlined the use of the remedies, chiefly the iodides, in its treatment. Dr. N. G. Burnham emphasized the value of the thyroid extracts. Dr. W. M. Dake presented interesting data on the successful use of the vaccines in the treatment of acne. Dr. C. E. Fisher spoke of the successful treatment of several cases of beriberi recently encountered by him among Japanese laborers in railroad construction gangs.

Dr. J. W. Mastin was appointed by the chair to act as president for the next meeting, to be held Saturday evening, May 7.

C. D. FISHER, *Secretary*.

A NEW DISEASE.

The train was moving swiftly down upon a Southern road,
 The day was hot and all the folk the wear of travel showed.
 Across in yonder corner sat a darky, big and black,
 Enjoying all the beauties to be found along the track.

But as the sun blazed hotter, and the dust rose dense as smoke,
 His eyes got very heavy and his snore the echoes woke;
 And soon a tongue, big, red and thick, protruded from his mouth,
 And he no longer cared a straw if heading north or south.

A doctor, who was quite a wag and sat not far away,
 Said to his friends, "Now, watch me; some sharp practice I'll essay."
 A bottle of quinine he took, and on the bulky tongue,
 With deft and cautious hand in haste the bitter drug he flung.

The darkey did not move but seemed to rest in quiet dreams,
 Till at a crossing startled by the whistle's piercing screams;
 His eyes flew open and his tongue within his mouth was drawn,
 But shrieks of terror discomposed a mighty likely yawn.

"I wonder what's de matta; O, my Lawd, I feel so bad,
 I neva' felt like dis befo'; I spect's I's gwi-en mad.
 Dis tas'e dat's in my mouf is 'nouv to end me, I'll be bound
 I's shore de sickes' nigga dat you'll fin' above de groun'."

He called for the conductor with a voice that fairly roared
 And asked him please to find if any doctor was on board.
 "Why! What's the matter with you? 'Till you're hurt you needn't cry."
 "O, call him quick, conductor, I's so sick I's like to die."

"O, pshaw! There's nothing ails you; be a man and you're all right;
 You do not need a doctor, but you're paralyzed with fright."
 "O, you don't know; I's drefful sick, please help me while you can;
 Dis achin' head and *bitter* tas'e says I's a dyin' man."

"Here! Don't be foolish; straighten up, and tell us how you feel,
 Explain just what the trouble is and then your hurt we'll heal."
 That bitter taste had weakened him, but left him strength to bawl:
 "I don' know what de matta' is, les' I done *bus' my gall.*"

Contributed to THE CRITIQUE by

E. G. WHINNA, M. D., Philadelphia, Pa.

CHICAGO LETTER.

APRIL 18, 1910.

Dr. A. C. Cenoweth, Hahn. '08, is now located at Chalmers, Ind.

Dr. J. T. Kent passed his sixty-first birthday on Thursday, March 31st.

Dr. Francis Millard Sadden, Hahn. '00, has located at 6241 Ashland Avenue, Chicago.

Dr. H. W. Brant, Cardston, Alberta, Canada, was a recent post-graduate student at Hahnemann Medical College.

Dr. O. McNish, of London, England, returned home recently, after spending some time in the Chicago colleges and hospitals.

Don't forget the meeting of the Illinois State Homeopathic Society, to be held May 10th to 13th. A good program is arranged.

Dr. C. A. Washburn, Hahn. '08, has completed his term as interne in the Westboro, Mass., Insane Hospital and has located in Conway, Mass. The doctor reports a good practice.

The members and friends of the Englewood Homeopathic Society were entertained at the home of Dr. J. W. Hingston Tuesday evening, April 12th. All enjoyed a very pleasant evening.

The meeting of the Chicago Homeopathic Medical Society on March 17th was well attended, and a very instructive paper was presented by Dr. Clifford Mitchell, subject, "Urinary Analysis."

The April meeting of the Regular Homeopathic Society was held on the 5th of the month. A paper by Dr. J. H. Allen on "Miasms," and one by Dr. A. C. Teny on "Actina Mycoticus" were presented.

Dr. Byron Robinson, professor of surgery at the Chicago College of Physicians and Surgeons, died at 6 p. m. yesterday at his residence, 334 North Thatcher avenue, River Forest, at the age of 52 years. Dr. Robinson was born in Hollendale, Wis., and was graduated from the state university and from Rush Medical College, Chicago. Later he took special courses at the University of Heidelberg, the University of Vienna and in Berlin and London. At various times he has been connected with the Frances Willard Hospital and the Mary Thompson Hospital. He leaves a widow, formerly Dr. Lucy Waite. The funeral will be held tomorrow afternoon at the family residence and the body will be taken to Hollendale for burial.—*News*, March 4, 1910.

Following are the topics for the meetings to be held in the Chicago Public Library Building: Course of Lectures, Assembly Hall, Public Building (Randolph Street Entrance). Friday evenings, 8 o'clock. H. W. Pierson, M. D., Lecturer.

February 4.—Our Mind—Its Dual Nature.

February 11.—The Art of Self Control.

February 18.—Homeopathy—Our Standard.

February 25.—Why Homeopathy is Superior to all Forms of Mental Healing.

March 11.—Significance of Mental and Nervous Diseases. The great American Disease—"Nervous Prostration."

March 25.—Danger following Suppression; Skin Eruptions and Mucous Discharges with Local Applications; Pain in General and Headaches in Particular.

April 8.—The "Serum Treatment" Craze—a Pseudo Homeopathy, Diphtheria and Antitoxin.

April 22.—The Ideal Cure vs. Recovery.

May 13.—Individualization—The Single Remedy.

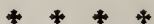
May 27.—Value of Symptoms. Order of Cure.

READING NOTICES

PHARYNGITIS. In the treatment of pharyngitis equal parts of Katharmon, glycerine and water is a very efficient application to stimulate the follicular secretions to a healthy condition.



HIGHEST THERAPEUTICAL VALUE. Dioviburnia has stood the critical test of the most exacting physicians for years and has been pronounced of the highest therapeutical value. Can always be relied upon in all functional disorders of the utrus and appendages, whether acute, sub-acute or chronic.



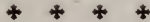
ALLOUEZ WATER. Allouez Water from Green Bay, Wis., is one of the few that show clinical evidence of its efficacy in renal disorders. In his late work, "Mineral Waters of the United States," Dr. James K. Cook, New York, writes of Allouez:

"There is a fortunate combination of ingredients in this water. The principal the bicarbonate of magnesia gives it antacid and laxative action. The latter effect is aided by the sulphate of sodium. Authorities are agreed that the carbonate of magnesia is an excellent antilithic in which uric acid is too abundant. The best effects of the water have been observed in glycosuria, diabetes, Bright's, rheumatism and malnutrition."



DIATHETIC ANEMIA. Although it is considered an axiomatic principle that successful therapy depends upon the abolition or removal of the causative factor of any diseased condition, it is often the part of clinical wisdom to adopt direct restorative and hematinic treatment while the underlying operative cause is being sought for and remedied. It is of course well understood that the general anemia and devitalization dependant upon and caused by any of the constitutional diatheses or dyscrasie cannot be successfully combated by hematics and tonic alone. In Specific, Rheumatic Tuberculous Malignant or Paludal infections, the primal cause must be attacked with all the weapons of modern medical warfare that are likely to be of service, either antidotal or nutritional. At the same time, it is quite certain that a perfectly bland, non-irritant and readily tolerable hemic restorative such as Pepto-Mangan (Gude), is needed. This palatable preparation of iron and manganese, in the form of organic peptonates, can almost always be given with distinct advantage to appetite, digestion, nutrition and general "well-being," while causative therapy is under way.

NOT INCOMPATIBLE. In an original article written for "Medical Reprints," Dr. George Selkirk Jones writes: "Another and most important subject for study will be that of incompatibility with respect to Antikamnia. At present I have not encountered this difficulty, for in the treatment of rheumatism, for example, with alkalies and potassium iodide, the occasional use of antikamnia tablets appears to act as a most useful auxiliary, and a quiescent condition of nerve, brought about by the action of the latter, appears to predispose towards a more perfect metabolism. In this respect I believe that antikamnia tablets are destined to play a new and important role in medical therapeutics, for if a nerve storm can be controlled during the course of a painful malady for which the approximate remedies are being exhibited, the chances are that the simple alleviation of pain for the time being may greatly facilitate the removal of the original cause of the malady. I have a case on hand at present in which this new feature is presented, viz., hemicrania in a woman, the result of periodic attacks of hepatic congestion, nothing appearing to influence the portal circulation so satisfactorily as cascara sagrada. This latter was taken at regular intervals during the day, whilst a single dose of two antikamnia tablets taken at bedtime produced in the mind of my patient a doubt as to which remedy was entitled to the credit. On my part I can attribute the good results already obtained to both, each having its allotted task to perform, the one hepatic, the other central, or neurotic. And so with reference to rheumatism, I am looking forward to a like happy experience. Why should the administration of iodide of potassium or salicine interfere with the action of antikamnia? At present I see no reason, but, on the contrary, shall continue to prescribe the latter as a 'night cap,' whilst relying upon the therapeutics of anti-rheumatic remedies."



**United States Circuit Court, District of Kansas—Third Division—
The Denver Chemical Mfg. Company, Complainant, vs. Colorado Chem-
ical Company, Defendant.**

This cause coming on to be heard in the United States Court House at Kansas City, Kansas, on the 26th day of January, A. D. 1910, the parties having agreed that it be there heard instead of in the Third Division, Mr. Wetmore appearing for the complainant and Mr. Jones for the defendant, upon the testimony in the case and due consideration having been had, it appears that the complainant is entitled to have a decree in accordance with the prayer of the complaint and it is hereby ordered, adjudged and decreed that the defendant, its officers, attorneys, servants, agents, workmen and employes and each and every of them be and they

hereby are restrained and enjoined from selling, offering for sale or advertising or procuring the sale of any medicine or preparation under the name of "Denver Mud," whether printed or in any manner inscribed, so that the words "Denver Mud" shall appear upon the wrapper of or advertisement of the defendant's said preparation, or upon the letterhead or other papers used by the defendant in its communications with the public or the trade in connection with its said preparation, or printed, directly or indirectly, or furnishing others with the means of representing, written or inscribed in any manner whatever or from representing directly or indirectly, that any preparation made or sold by the said defendant, its attorneys, servants, agents, workmen or employes, is the preparation and proprietary medicine made and sold by the complainant as aforesaid and known to the trade and to the public as "Denver Mud" as well as "Antiphlogistine," either by selling the same under any name so closely resembling the name "Denver Mud" as to be calculated to be mistaken therefor, or from violating the rights of the complainant hereinbefore set forth, in any manner whatsoever.

And it is further ordered, adjudged and decreed that the defendant deliver up any and all labels, advertisements or circulars and any and all cans or packages of the defendant's preparation having labels or wrappers with the said words "Denver Mud" printed upon them, as aforesaid, to be destroyed, and that a writ of injunction issue in accordance with this decree and it is further ordered, adjudged and decreed that the complainant recover from the defendant the profits made by the said defendant from the sale of the plastic dressing mentioned in the complaint under the name of "Denver Mud," and that the complainant recover from the defendant its damages to be assessed as the court may direct and that the defendant pay the complainant the costs of this suit to be taxed.

Dated this 3rd day of February, A. D. 1910.

JOHN C. POLLOCK, Judge.

United States of America, District of Kansas, ss.

I, Geo. F. Sharitt, Clerk of the aforesaid Court, do hereby certify that the above and foregoing is a true, full and complete copy of the order in the within entitled cause, as the same remains on file and of record in my office.

IN TESTIMONY WHEREOF, I hereunto sign my name and affix the seal of the said Court at my office in Fort Scott, in said District of Kansas, this 4th day of February, A. D. 1910.

(Seal)

GEO. F. SHARITT, Clerk,
By C. B. WHITE, Deputy Clerk.



THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath.—Letter No. 8.

THE EXACT MODE OF PREPARATION OF THE INDICATED
REMEDY.

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MY DEAR DOCTOR: There is no one thing that stamps the *homeopathicity* of a practitioner so decisively as the dynamic preparation of the drugs which he prescribes; and it is something into which he naturally grows after acquiring an accurate knowledge of the system founded by Hahnemann.

I note you say: "I generally employ the first, second or third dilution, sometimes the sixth; but in severe fevers, such as typhoid and malignant diphtheria, I have more confidence in the *tinctures*." So if you are especially anxious and think the disease deep-seated or malignant you settle down with perfect satisfaction and security with the *tinctures* so far as the "preparation" is concerned. This illustrates how difficult is the task of making a real homeopath of one who has been so misled. *You have so much to unlearn.* Your head must be emptied of such vagaries in order to make room for the truth. Your mind must be disabused of the crude, material conceptions which you have imbibed from non-homeopathic sources. If you had only had a real homeopath for a preceptor, how different your professional life would have been. He would have *started* you right; and then he would have recommended a homeopathic college *that teaches homeopathy.* As it is you have to undo much that has been done at great expense and labor, and, relying upon the Organon and chronic diseases, start again. But it is not too late. You can get the

key and you can learn how to use it rationally and successfully. *Let this be your determination.* To be a mongrel is to be a failure, so far as healing the sick is concerned. I pray that it may not be my misfortune to have a "homeopath" of that stamp administer to me when seriously ill. I would rather not be a doctor at all than be one without the therapeutic law, the homeopathic science and the healing art.

I observe you speak of using the first, second and third "dilutions." Now if you only use *dilutions* no wonder you cannot cure. If you only dilute the medicines, why the more you dilute the weaker they become. Some of our "regular" friends often display their ignorance by advancing this philosophy. They say: "Put a drop of medicine in the ocean and then dip up a teaspoonful for a dose." And then they will swell up and lean back and laugh as though they had said something. They remind me of a certain tall, well-developed young man who was just within the age limit for public schools. The school master exhausted all his powers in trying to teach him, but he either could not or would not understand. Finally the teacher, in despair, consulted the young man's parents and found to his amazement that he had been kicked on the head by a mule, when a boy.

Now if you do not know the difference between dilution and *potentization*, you are as bad off as the so-called "regulars." Hahnemann explains that you can take inert coloring matter and dilute, dilute, dilute until the color is completely lost. But he also explains that curative agents have a dual nature—an outer and an inner; that they consist of the material and immaterial; that they are composed of the crude elements which give color and taste, and the spirit of the drug or dynamis which is the part of the drug that cures. To speak correct homeopathic English, if using the word "dilutions," you should say *potentized* dilutions.

Speaking of the physician, Hahnemann says: "It should be a matter of conscience with him to be thoroughly convinced in every case that the patient always takes the right medicine." Then he further says: "The suitability of a medicine for

any given case of disease *does not depend on its accurate homeopathic selection alone*, but likewise on the proper size, or rather smallness of the dose. If we give *too strong a dose* of a medicine which may have been even quite homeopathically chosen for the morbid state before us, it must, notwithstanding the inherent beneficial character of its nature, prove injurious by its mere magnitude, and by the unnecessary too strong impression, which, by virtue of its homeopathic similarity of action, it makes upon the vital force upon those parts of the organism which are most sensitive, and are already most affected by the natural disease."

I have quoted the foregoing to show you that choosing the right remedy, important as it is, does not insure successful prescribing. That medicine, in its crude state, must undergo the wonderful change resulting from dilution and potentization which Hahnemann invented. His first purpose in this process was to *diminish the dose*—to avoid the excessive drug effects when prescribed by the law of similars; but he finally learned another lesson; namely, that what we call sickness is a morbid derangement of the vital force or animating power of the human system; that this vital force is not material but *spirit-like*; that it is the *dynamis* of the human body; and that the part of a drug which cures is its *inner nature*, the spirit of the drug, its *dynamis*; that the exact mode of preparation of the indicated medicine must be one which will unfold and set free its *spirit*, its *inner nature*, its *dynamis*, whereby it is made to correspond to the *dynamis of the patient*, and at the same time *develop its power* until it shall correspond to the patient's susceptibility. All this, he found, is accomplished by the *dynamization* of drugs which is by the process of *dilution* and *potentization*. This process he explains as follows: "Thus two drops of the fresh vegetable juice mingled with equal parts of alcohol and potentized by means of two succussions, whereby the first development of power is formed and this process is repeated through twenty-nine more phials, each of which is filled three-quarters full with ninety-nine drops of alcohol, and each succeeding phial is to be provided

with one drop from the preceding phial (which has already been shaken twice), and is in its turn twice shaken, and in the same manner at last the thirtieth development of power (potentized decillionth dilution), which is the one most generally used."

Then as to metals, he says: "All other substances adapted for medicinal use—except sulphur, which has of late years been only employed in the form of a highly diluted tincture—as pure or oxidized and sulphuretted metals and other metals, petroleum, phosphorus,, as also parts and juices of plants that can only be obtained in the dry state; animal substances, neutral salts, etc., all these are first to be potentized by trituration for three hours, up to the million-fold pulverulent attenuation, and of this one grain is to be dissolved, and brought to the thirtieth development of power through twenty-seven attenuating phials, in the same manner as the vegetable juices." (Par. 270-271.)

Now you have the process from the fountain head. And you will observe that Hahnemann *taught the world* how to convert *any* mineral into a liquid form with all its curative properties preserved and with *increased power*.

Now let us examine the process. First we notice he starts with two drops of the vegetable juice. Let us suppose it is belladonna. Those two drops contain the *nature* of belladonna, all of its curative properties, as fully as would two barrels. They contain both the crude material elements of that drug, and also its inner nature, its *spirit*, its *dynamis*. The purpose of the process is to separate the material from the immaterial or spirit of the drug, so that healthy parts of the system will not be affected, as they always are by the crude material elements, and so that by giving only the *immaterial*, the *dynamis*, the *spirit* of that medicine, we can achieve a gentle, mild and rapid cure by the law of similars; and should we fail to choose the indicated remedy it will neither affect the diseased parts of the system nor the healthy, but will be a *clear miss*, not being *similar* and not being *repeated*. However, should we desire to make a proving on the healthy human body with this spirit of the drug, by repeated doses, the picture will be brought out and with finer shades and more reliable characteristics *by far* than when the whole drug is used. But very little of the right medicine in the right potency is required to cure natural diseases. A further object of the process is to develop the curative power of that

dynamis, render it more penetrating and place it upon the plane of the vital force or dynamis of the system. All this is accomplished in the process of dynamization. Now we will resume examination of the process: When the two drops are mingled with ninety-eight drops of alcohol, *that is only a dilution*; but when this is then succussed by two sharp, quick strokes against an elastic body, such as the hand, *that is potentizing it*. That makes the first potency out of the first dilution. Now you take one drop out of that first potency and put it into phial number two. In this you put ninety-nine drops of alcohol. This makes the second dilution; and when succussed as was the contents of the first phial, which we call potentizing it, we have the second potency. That *one drop* which was taken from the first phial and placed in phial number two, contained *all the curative properties* which resided in the two drops of crude tincture in the first place; and as before stated, those two drops contained *the whole nature* of belladonna as fully as any quality imaginable. Now out of this second phial or second potency, we take one drop and place in phial number three. In this we put ninety-nine drops of alcohol, which gives us the *third dilution*; and when this is also potentized we have the third *potency*, and so on *ad infinitum*. After the twelfth phial is past no chemist and no microscope can find any of the crude elements which were in the two drops in the beginning of the process. Only the *spirit* of the drug is left. This spirit of the drug or dynamis, is further *developed*, like the polishing of a diamond, by the same process. One drop is taken from the preceding phial and placed in the succeeding one, with ninety-nine drops of alcohol. (Observe we use pure alcohol as a medium, and not *horse juice*.) At each step, potency by potency, phial by phial, in the one drop which is taken from the preceding phial and placed in the succeeding one, is *transplanted* the full nature of that drug, all its curative properties, only intensified in its penetrating power. The alcohol in each phial is merely a new medium in which the last potency is unfolded; and the succussion in each case the process by which it is *developed*.

With reference to the minerals, sugar of milk is used in the mortar for a medium, and the grinding or trituration with the pestle takes the place of succussion. But when we secure the third potency or trituration, then *one grain* dissolved in alcohol takes the place of *one drop* in the former process and this is then run up from potency to potency, the one drop taken from the preceding phial and placed in the suc-

ceeding one, *transplants* the *full nature*, all the *curative properties* of that mineral, to the ninety-nine drops of alcohol. And suppose you then take the last potency reached, say the thirtieth of two hundredth, and out of that phial you take *one drop* and transplant it to a little water in a tumbler and thus medicate that water with the *full nature* of that drug; and then by the use of a teaspoon you transplant that medicated water—containing *all the curative properties* of that original drug—to the vital force of the patient, through his sentient nerves. That is the process. That is the philosophy. Is it unreasonable?

When, in a severe case of fever as you say, you resort to the crude tincture, you lose sight of the very gist and essence of homeopathy. You forget, on such occasions, that Hahnemann said the curative power of a drug *is hidden in its inner nature*. Notice: “This spirit-like power to alter man’s state of health (and hence to cure diseases), *which lies hidden in the inner nature of medicines*, can never be discovered by us by a mere effort of reason; it is only by experience of the phenomena it displays when acting on the state of health of man that we can become clearly cognizant of it.” (Par. 20.)

Prove a high potency on yourself, doctor. Take the two-hundredth, the one-thousandth or fifty-thousandth. Choose a time when you are feeling as good as you ever felt in your life. Test one of these potencies in your own body according to Hahnemann’s directions, being careful that no other medicine, or food, or drink, shall interfere with its action. Let me furnish the potency; and after the proving, after all the symptoms produced, subjective and objective, have been carefully noted, then I will tell you the drug and the potency, and you can take a *materia medica* and read up the proving and see how far yours agrees with it. Of course, you understand, or ought to understand that all the symptoms laid down in the *materia medica* under a given drug were not all produced in one proving. Much depends upon the susceptibility of the prover. In one prover this is brought out, and in another that. But any odd, peculiar, distinguishing symptoms brought out in any one prover, points to that drug for *any* patient in whom the similar is found. It reveals the medicinal, curative powers of that drug. Try it, doctor, try it. It is a splendid method of disposing of your skepticism.

You may say, “Nothing but tincture or fluid extract would affect me.” Like some misguided patients you may

say: "It takes stronger medicine to affect me than for most people." Such persons do not know that the higher *the potency the stronger its curative power is*, provided it is capable of producing an aggravation; and some so-called homeopaths do not know that the potency of *any drug* is more powerful in a proving than the crude thing. Listen to Hahnemann on this point: "The most recent observations have shown that medicinal substances, when taken in their crude state by the experimenter for the purpose of testing their peculiar effects, do not exhibit nearly the full amount of the power that lies hidden in them which they do when they are taken for the same object *in high dilutions potentized by proper trituration and succussion*, by which simple operations the powers which in their crude state lay hidden, and, as it were, dormant, are developed and roused into activity to an incredible extent. In this manner we now find it best to investigate the medicinal powers *even of such substances as are deemed weak*, and the plan we adopt is to give to the experimenter, on an empty stomach, daily from four to six very small globules of the thirtieth potentized dilution of such a substance, moistened with a little water, and let him continue this for several days." (Par. 128.)

If in the *healthy* body, highly potentized dilutions are more powerful, why not in disease? The curative power in drugs is not something you can grasp with the hands, or even fully comprehend with the brain. It is a question even Hahnemann did not profess to comprehend. He, like many others, only knew *what these highly potentized dilutions would do when indicated*, and that was enough. To know they have an inherent power, a hidden power, over and above their *material* power, ought to satisfy the true physician.

When you resorted to the tincture, you were using the drug in *its weakest possible* form so far as cure is concerned. You were thinking of its color, its taste, its *material* elements. That is just what an allopath would do; and then he would think he could improve the matter by increasing the dose—giving "heroic" doses. But if you are going to be a real homeopath, if you are going to follow Hahnemann, you must learn right now that while the crude, material elements of a drug can poison, irritate the stomach, drug the system and even kill the patient, *they cure nothing*. When the whole drug is given in the form of tincture, in superficial complaints, nature is often able to sift out enough of the dynamis, the

spirit of the drug contained in the material elements, to cure; but *never* in deep-seated, miasmatic diseases.

Dynamic Medicines.

In this connection I wish to say a word regarding dynamic medicines. The root word from which we have dynamic signifies *power*; but Hahnemann always used the term in the sense of *spirit-like power*. Dynamic medicines are those remedies which, as potencies, consist of the dynamis or spirit of each drug, whether held in alcoholic solution or medicated pellets. They are hence *immaterial* medicines in contradistinction to the material elements, and a "dynamic physician," of whom Hahnemann speaks, is one who prescribes dynamic medicines and relies upon them as agents of cure. Dynamic medicines all look alike and taste alike; and, as Hahnemann says, they "never offend the taste." Or rather, he says, "in the homeopathic system the small doses of the appropriate medicine *never* offend the taste." This is a jolt against those so-called homeopaths who profess to be practicing the "homeopathic system" when prescribing the *crude tinctures*—colocynth, for instance.

Dynamic medicines are the ordinary products of the vegetable, animal and mineral kingdoms, used as curative agents, with their material elements eliminated. They consist therefore, of the *immaterial*, spirit-like (dynamic) power hidden in the inner nature of the drugs, and unfolded and developed by the process of dilution and potentization. Hence, while they cannot possibly irritate the most delicate stomach, they are far more penetrating and curative than the same drugs in their crude form. Besides, they are by this process, brought into correspondence to the unseen vital force which everywhere pervades the human organism, which is itself spirit-like (dynamic), which is deranged in disease and upon which medicines must act in order to cure. These are the medicines used by all real homeopaths and these only.

No, my dear, doctor, the medicinal power of a drug is not found in its crude, material elements; but in its inner nature is hidden the spirit of the drug, its dynamis, and it is *this* that penetrates to the vital force and cures. You must divest yourself of all materialism and comprehend this great truth ere you can follow Hahnemann and cure as he cured. We are so accustomed to measuring things by the bushel, weighing by the pound, estimating by what we see with our eyes and feel with our fingers, that it is difficult to realize that

each curative agent has hidden in its inner nature that which is *immaterial*, which is *dynamic*, which is spirit, as it were, and that it is *this* that cures. But such is the truth; and you will never be a real homeopath until you grasp that truth so fully and so practically that you can apply it in daily practice.

One of the strongest evidences, one of the most undeniable proofs of this truth, is the fact that perfectly *inert* substances in their crude form, such as tin, clay, salt, etc., become *the most powerful agents of cure* when sufficiently potentized. I call your attention particularly to another point: Hahnemann affirms that by the potentizing process *only*, "all" medicinal crude substances, including those which are inert, "*become* penetratingly efficacious and remedial." Now what do you think of your tinctures?

Again I quote from the founder of homeopathy to show you how he esteemed these dynamic remedies: "But when in such injuries the whole living organism requires, *as it always does*, active *dynamic* aid to put it in a position to accomplish the work of healing," etc.

Again, speaking of old-school practice, he says: "They sought to draw off the *materia peccans* from the (always only dynamically) diseased body, just as one lets a dirty fluid run out of a barrel through the tap-hole." Here he affirms that morbid influences which result in disease are *always* dynamic, that is, spirit-like. And that is unquestionably correct. He further elaborates this fact as follows: "Our vital force, as a spirit-like dynamis, cannot be attacked and affected by injurious influences on the healthy organism caused by the external inimical forces that disturb the harmonious play of life, otherwise than in a *spirit-like* (dynamic) way, and in like manner all such morbid derangements (diseases) cannot be removed from it by the physician *in any other way* than by the spirit-like (dynamic, virtual) alternative powers of the serviceable medicines acting upon our spirit-like vital force, which perceives them through the medium of the sentiment faculty of the nerves everywhere present in the organism, so that it is only by their dynamic action on the vital force that remedies are able to re-establish and do actually re-establish health and vital harmony, after the changes in the health of the patient cognizable by our senses (the totality of the symptoms), have revealed the disease to the carefully observing and investigating physician as fully as was requisite in order to enable him to cure it." (Par. 16.)

This quotation brings out the truth of my assertion in a former statement, namely, that Hahnemann used the word "dynamic" in the sense of *spirit-like*. It also brings out in bold relief the doctrine that the harmonious play of life cannot be disturbed by "external inimical forces" *only* in a spirit-like (dynamic) way. Also that morbid derangements cannot be removed *in any other* way than by the spirit-like (dynamic) powers of the serviceable medicines acting upon the spirit-like (dynamic) force.

Now, my dear doctor, if you can comprehend *this*, you will no longer question the propriety, utility and *necessity* of dynamized medicines. Hahnemann's decision was that the power hidden in the inner nature of drugs is the *curative power*, and the animating force hidden in the human organism is the invisible, *vital force*, and that each is *spirit-like*. Who is able to refute this? Again hear the founder of homeopathy: "By the word *intimately* I mean this: that when, for instance, the drop of a medicinal fluid has been shaken up *once* with one hundred drops of spirits of wine; that is to say, the phial containing both, held in the hand, has been rapidly moved from above downwards with *a single* smart jerk of the arm, there certainly ensues a thorough mixture of the whole, but with two, three, ten and more such strokes, this mixture becomes much more potentized, and *the spirit of this medicine*, so to speak, becomes much more unfolded, developed and rendered *much more penetrating in its action* on the nerves." (Foot note, page 194.)

Now you understand what Hahnemann meant by a dynamic medicine; he meant *the spirit* of the drug, the *dynamis*. That does not sound much like he used *tinctures* after he discovered the power of dynamization, or that he then thought his patients ever needed tinctures; nor does that sound much like the usual twaddle which monthly drips from much of our so-called homeopathic literature. I want to warn you—and I am not afraid to say it—*the great majority of professed homeopathic practitioners are materialists, and do not imitate the founder as to the exact mode of preparation of the indicated remedy*. The masses, not knowing the true doctrine, are easily gulled; and these mongrels station themselves in the reflected light of Hahnemann and his consistent followers, then *talk* about homeopathy. But it is all talk.

It is not surprising that one who feels self-satisfied when prescribing *tinctures*, would join the old-school in hum-

bugging the public with the doctrine that *material germs* infect healthy individuals. The doctrine is most preposterous. The fact is, germs always follow in the wake of diseases, but *never* precede them. They are *scavengers* and always hunting diseased tissue as a hot bed for propagation, but *never* cause such diseased tissue. Another point in this quotation: You will observe Hahnemann does not say the dynamic action of medicines sometimes cures; but, "It is *only* by their dynamic action on the vital force that remedies are able to re-establish and do actually re-establish health and vital harmony." This is true when the whole drug is given; that is, when the material elements have not been eliminated. But in deep-seated, chronic, miasmatic diseases, nature cannot use them effectively in that form. And nobody knows that fact better than experienced old-school physicians and mongrels. They may change the expressions of the disorder; they may suppress; they may palliate, but they *cannot cure*.

Dynamization of drugs unfolds and develops their *dynamic* power; and when you understand this subject better, you will realize that to administer dynamic remedies to sensitive subjects in a careless manner, as if they were inert, is a good deal like giving a child matches and powder to play with. They are *dangerous!* But properly used, each is harmless.

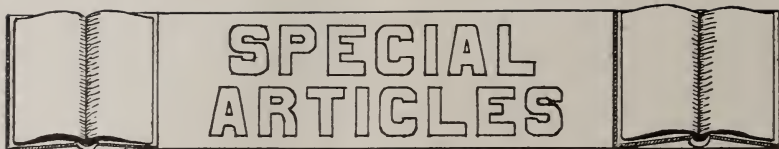
"The Exact Mode of Preparation" will be continued in my next letter. This is a most vital theme. This you *must* understand if you would be a Hahnemannian; and I flatter myself that you will be. You can if you *will*.

And the echo said: "I would rather not be a doctor at all than be one without the therapeutic law, the homeopathic science and the healing art."

Yours for dynamic medicines.

J. C. HOLLOWAY, M. D., Galesburg, Ill.

CORRECTION: In last month's issue several annoying errors crept into Dr. Holloway's most excellent article, responsibility for which rests wholly with the proofreader. Inasmuch as the meaning in both instances was mangled most unmercifully we will give their location in the journal that our readers may locate them and read correctly. In the last sentence of the fourth paragraph on page 150, there appeared "As a rule, however, he does not ask for sympathy any more than he does for instruction, because he is not conscious of his mercy." The last word should have been "misery." On page 152, fourteenth line from top: ("Of course" Hahnemann did mark such exceptions)," should have been "did not." Further apology or attention to the matter is wholly unnecessary.—*Editor.*



SPECIAL ARTICLES

A SHORT REVIEW OF ARSENICUM ALBUM.

By L. C. PHILLIPS, M. D.



ARSENICUM ALBUM is known in chemistry as white arsenic or arsenic trioxide, As_2O_3 , and often called arsenious acid. It is a most violent poison, and all the more so because it has neither taste nor odor to warn the victim of its presence. It is often employed as a sure and most painful journey over the Great Divide. Among the arts it is used in the manufacture of glass, dyes, face powder, vermin poison, wall paper and the like. With the dominant and Eclectic school of medicine its use is very limited indeed, mostly used in malaria, asthma, diseases of the skin and as tonic. Two decigrams will cause death.

Arsenicum album comes to us well proven. Its symptomatology is very voluminous. Like mercury and salt it was among the first remedies proven. There is not a fiber nor cell in the human body but that is effected by this drug, so deeply does it enter the economy. I do not think of a single disturbance of a single organ or tissue of the body in which arsenicum might not be indicated. Its action is deep and long lasting. Its characteristics stand forth in its proving with unusual clearness, and seldom to be mistaken in sickness. As a polychrest it is a star of first magnitude. Because of its depth of action, next to sulphur, no doubt, it is used more often than any other medicine in our *materia medica*.

While its effect upon the system is universal, its main force is spent upon the circulatory, nervous, digestive and renal system.

With the circulatory system we find a wonderful train of symptoms,—general coldness, collapse, angina, oppression, ascites, dropsy, weak and rapid pulse, black blood, cancers, suffocation, ulcers, gangrene, carbuncles and all septic condi-

tions, all with anguish, restlessness, burning aggravated from cold and ameliorated by heat.

With the nervous system we have every shade and picture of melancholy, delusion, anxiousness, anguish, fear, fainting, convulsions, neuralgia, any and all disturbances of the nerves, from a tingling sensation along a filament to the worst form of paralysis—all accompanied by restlessness, general weakness, irritability of stomach, burning pains and modality of heat and cold.

With the digestive system we have all forms of bowel complaints from simple case of piles to the most malignant form of typhoid, cholera and yellow fever. You will find ascites, inflammation, chronic and acute enterities, cancer, gastritis, gastric ulcer, black vomit with nausea and vomiting and great prostration, burning pains, insatiable thirst, restlessness and fear of death. And thus we might continue on through the renal, glandular and muscular system until we have studied every system of the body, but this is enough to freshen your minds again regarding the importance and scope of arsenicum as a curative agent.

The generals or grand characteristics of arsenicum stand out as beacon lights all through the symptomatology of this remedy. We will sketch the most important of them, especially those you will find forcing themselves upon you in almost every arsenicum case.

First: *Anxiousness about getting well and fear of death* is often met in severe cases. Their eyes seem to pierce you through. You will never know what this stare is unless you have seen it in the eye of a yellow fever victim near unto death.

Second: *Restlessness*, usually mental, often physical. Must move from one place to another; tries first one bed, then another. In severe cases will shift about when you doubt his ability to move at all.

Third: *Coldness—from cold and from heat*. Always cold; cold extremities, cold sweat, cold breath, temperature sub-normal, collapse. Everything cold makes him

feel worse. Cold food and drink—stomach disturbances; cold water—skin complaints. On the other hand he is always better and made more comfortable by heat and warm things. There are perhaps a few exceptions to this modality, but only in local conditions. In this connection I desire to report case No. 1.

Was called to see a white lady of about 50 years of age. She had been sick for about three years—because of other complaint. As usual, disgusted with drugs and doctors. She kept a boarding house and did most of the bed room work herself, hence was compelled to use a great deal of cold water in cleansing the wash bowls, lavatories and the like. She complained of a peculiar susceptibility of skin to cold water or cold things. The skin was normal when warm and she was well in every way except at the time when something cold irritated the skin, then she complained of being “ill at ease.” When she placed her hands in cold water they would puff right up in a few moments like rubber bags full of air. You could almost see it. No pain, no burning, just a sensation of being nervous. One evening she forced herself to eat a dish of ice cream, and before she had finished one-half her cream her tongue, lips and pharynx were so swollen she almost strangled to death before she could get hot water. When riding on a street car the side of her face turned to the cool breeze would swell. Hot and warm applications acted just as quickly in reducing the swelling. I gave arsenicum, 2-c, and after a week never had a return of the trouble.

Gen. No. 4: *Burning pains ameliorated by heat.* Skin complaints, eczema, urticaria, ulcers, all burn like fire. Stomach disorders attended with burning pains, disturbances of bowels, typhoid, enteritis with burning. We have plenty remedies indicated in burning pains, but few from hot applications. I will report here case No. 2:

During fall of 1905 we had an epidemic of yellow fever of some 565 cases. Of these I treated forty-eight cases, landing everyone safely. In this group of cases are included my son, my brother, my wife and self and a physician of the old

school. No doubt you are surprised at my unusual group of cases. However, I was very much so when a 'phone message came at 2 A. M., (note the hour) to call professionally and immediately to see our old school brother. Found him in a rooming house of about 35 rooms, everyone of which was vacant except the two rooms occupied by the Doctor and his wife. The Doctor was a large portly fellow of about 30 years. He had been sick for three days and during the last twelve hours had been gradually passing into black vomit. His treatment so far had been creasote and carbolic acid, about a drop of each in a teaspoonful of water every hour, with digitalis and strychnia for collapse. This was ordered by two well informed old school physicians of the city. Here I may add that the death rate during this epidemic was about 17%. As I entered he was vomiting as only a yellow fever victim can, a forceful, copious, exhaustive expulsion of contents of stomach. Each time he vomited the hot vapor of carbolic acid was most nauseating to the nurse, his wife and myself, the only company present. He was not only very restless but very nervous, complaining constantly of burning of mouth and throat and stomach and begging for water. The least amount of liquids of any kind taken came back immediately. Before I would prescribe for him I had his promise to take absolutely nothing except what I gave him. I ordered the carbolic acid solution emptied into the bed vessel; that he be given all the hot water he could hold. Of course all present to-day know the remedy prescribed. I did not have my favorite 2-c of arsenicum with me, so I gave him about the 8-x in pellets every two hours. He vomited twice, following the administration of the remedy; the third day was up and the fourth day went down town for a shave.

Characteristic No. 5: *Thirst and irritability of stomach.* While this symptom is made manifest through the stomach, it could be well called a local-general because of its value and importance. If the case calls for arsenicum you will seldom find this grand leader absent. It is found so frequent and so decided that in cases having only this thirst and peculiar vomit you will help or cure your patient if you will just shut your eyes and give arsenicum. This is the reason some so-called Homeopaths succeed; they labor under the old saying "that guessing is all right when you hit." Scientific guessing? as it were. This irritability of stomach and thirst is no joke. At times the thirst is intense. The more they drink

the more they vomit. In some cases it is an interesting scrap between an effort to quench the thirst and an effort to keep the stomach from refusing the liquid.

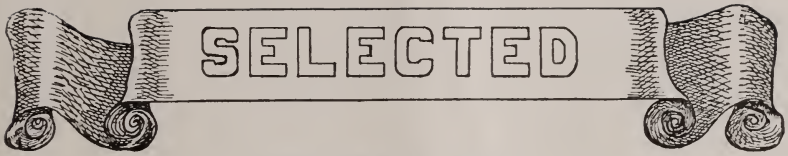
In this connection I will report case No. 3: Was called one evening to see Miss Nellie, a little girl about ten years of age. Nellie was sick unto death with cholera morbus. The vomiting and purging was often and weakening. She could not keep one-half a teaspoonful of water on her stomach five minutes, all the while begging for water to satisfy her burning thirst; when her purging time came she would turn pale and cold perspiration would present itself upon the exposed part of her body; she was restless, rolling and throwing her hands; temperature sub-normal. These are the main symptoms of her age. She received arsenicum, 2-c, and soon her troubled soul was quiet in sleep. She received no other medicine.

General No. 6: The *last* that I shall consider and least in my opinion, is *general aggravated at 1 to 2 A. M.* In vain have I asked and watched for this general, given in such black type in our materia medica literature, and so seldom have I noticed it, I have long since ceased to give it serious attention. Your experience may be different. I'm only giving mine.

Arsenicum is one among the few major remedies in malaria. I've given quinine in malaria five or six times since practicing medicine, while arsenicum, ipicacuanha, natrum mur., are given nearly every day. That don't sound like quinine is ranking so well as a specific in march-miasm. Here it simply is not indicated, yet given all the time. Arsenicum chill is, often time mixed, nothing definite, chill now severe, now short, sometimes may be absent with high fever and vice versa. When you find a regular paroxysm—it is, usually severe. Chill severe with blue and cold extremities ameliorated by heat, followed by high burning fever, insatiable thirst for small amounts, much vomiting, restlessness, followed by light or cold sweating and unusual weakness.

Arsenicum is all but synonymous with malignancy. You find carbuncle, cancer, ulcers, collapse, septicemia, blood poison, cholera, yellow fever, typhoid, malaria, what a fatal collection of human ailments. But know arsenicum and you will meet such foes with a brave heart and, with a few other remedies, conquer and seldom fail.

Pensacola, Fla., November 1, '09.



THE SMALL DOSE.



THE *size* of the homeopathic dose, its *tastelessness* and its *power to cure* puzzle the uninformed. Anything that is meted out in small portions they call "homeopathic doses."

True, a homeopathic dose is always small, still its homeopathicity does not depend wholly upon its size, the form of "little pills," or the doctor who prescribes it, but upon its *preparation*, interval of repeating and its power to produce in healthy subjects an artificial sickness *similar* to the affection sought to be cured. The "regular" studies to know how small a dose *will kill*; but the homeopath, how small a dose *will cure*. Not that the "regular" intends to kill, but because an overdose of crude medicine *may kill*. The homeopath does not have to study that proposition at all, for the following reasons: Each medicinal substance possesses a dual nature—an outer and an inner; its outer, consisting of the material elements, accounts for its color, taste, drugging effects, irritation of the stomach, and its *kill-*ing power. These material elements *cure nothing*. Its inner, consisting of its dynamis, immaterial and spirit-like, preserved in alcoholic solution, accounts for *the curative power of the medicine*. This is the only part of drugs prescribed by *real* homeopaths. Enough of the dynamis is often appropriated to cure *superficial ailments* when the whole drug is administered; but when *dynamic potencies* are given they will cure the most chronic and complicated diseases without any possible injury. Besides they act quicker and longer and penetrate deeper. Now you see why real homeopathic preparations have no color and *never* offend the taste.

It is a reflection that any intelligent adult will voluntarily pour into his stomach the *nasty, crude, poisonous stuff* issued by allopaths, but to force it down the throats of helpless children, is *unpardonable*; and it is *never* necessary.—*Homeopathic Card Series*.

A FRUITLESS TASK.



AN able editorial in the Ithaca *New York Journal* takes the medical profession at large and the Massachusetts profession in particular to task, for making war upon Christian Science practitioners. It continues as follows:

“If medical science savored less of empiricism, if its professors and practitioners were more nearly agreed in their diagnoses of diseases and their methods of treatment, if those who rank as authorities would less frequently break into print with statements that all the rest are mistaken and only they are right, if there were fewer disagreements and a more rigid adherence to the theories and rules that are laid down in the books, we might eventually be led to believe that those who write on this subject speak with the voice of authority.

“As a matter of fact, the whole system of medical science seems to be in a state of flux, as witness the changes in practice that are continually being made. Five years ago operations for appendicitis—a disease which ever since the world began had been diagnosed as something else until its origin was discovered accidentally or otherwise—were of everyday occurrence. Now the London *Lancet*, the highest medical authority in the English speaking world, declares that most of them were wholly unnecessary, and that relief could have better obtained by employing other and less heroic measures. Physicians are declaring that there is more danger in giving too much than too little medicine.”

Since most of the changes and advances in medical science have been made through the investigations of those schools which dominant medicine calls “irregular,” it is the opinion of the editor of the Ithaca *Journal*, and our own opinion as well, that the allopathic school has as much justification in asking for legislation to protect the people from those who practice homeopathy as it has in asking for laws prohibiting the practice of Christian Science.

We know of homeopathic boards of examiners who persecute the osteopaths. The recent coalition of allopathy and osteopathy in New York to down homeopathy shows that it is largely a case of dog eat dog all over the medical political field. We see the pitiful spectacle of an ex-president of the

American Institute of Homeopathy going about the country whining because he could not get a license to practice in a community where his first vice-president was on the board, and we are forced to the belief that harmonizing the medical profession is a fruitless task.

However, there is nothing less becoming or more worthy of condemnation than to see the homeopath who has succeeded in getting into power persecuting the osteopath, the chiropractic or the Christian Scientist. The whole history of homeopathy is one of persecution from the time the apothecaries drove its founder from city to city to the present.

If any of these systems which are being persecuted have any good in them they will survive. Homeopathy has survived 120 years. If it had been an error it would have fallen of its own weight. Doctors of all professional men can afford to be patient.—Editorial, *Medical Century*.



THE REDUCTION OF TEMPERATURE IN CHILDREN WITHOUT THE AID OF DRUGS.

—The most satisfactory antipyretic used for young children is cold, but this has its dangers. Nervous irritability is calmed down by means of the ice cap or sponging. The best method in managing a feverish child is to place an ice bag at the head and a hot water bag at the feet. This will equalize the circulation.

In order to cold sponge the child all the clothing should be removed and the child placed in a blanket. The sponging should be continued for twenty minutes.

Irrigation of the colon is of great importance in reducing the temperature. This permits the removal of products of intestinal decomposition, carries in fluid for the body and reduces the temperature. Rectal irrigation can be repeated every three hours if the indications warrant. The author strongly recommends these irrigations in typhoid fever.

Plenty of fresh air is a valuable adjunct in the management of feverish children. Placing the children in the open air for a few hours each day is advocated regardless of the age or the disease from which they may be suffering.—W. C. Holopeter, *Pediatrics*.



CONTRIBUTED

DIFFERENT ROUTES are available from Los Angeles going North to San Francisco, both via the Southern Pacific, and tickets are honored via either route, viz :

One, the Coast Line, via Santa Barbara, Paso Robles, Monterey, San Jose and Palo Alto. There are two excellent trains, the daylight leaving Los Angeles at 8 a. m., arrives in San Francisco at 9:30 p. m. same day. The Lark leaves Los Angeles at 8 p. m., arriving at San Francisco at 9:30 a. m.

The other, the Valley Line, via the San Joaquin Valley, leaves Los Angeles at 6 p. m. and arrives at San Francisco at 7:30 next morning. The trip to Yosemite National Park and the Wawona and Mariposa Grove Big Trees is made from Merced, on the Valley Line, at an expense for rail and stage transportation of \$33.50.

Going north from San Francisco, going east via the Canadian Pacific, Great Northern, or Northern Pacific, there are three trains via Southern Pacific Shasta Route leaving San Francisco daily. The Limited leaves at 11 a. m., arriving in Portland at 2:30 p. m. the next afternoon and at Seattle 9:30 the same evening that it reaches Portland.

There are three great wonders of nature that stand out pre-eminent in their grandeur and sublimity, and may all be easily seen by the traveler to California. They are the Yosemite National Park with its groves and Big Trees, the Grand Canyon of the Colorado, in Arizona, and the Yellowstone National Park, Wyoming.

Passengers with tickets reading via all northern routes may ship from Puget Sound points for the wonderful inland sea trip to Alaska. Ships sailing:

July 20—S. S. Cottage City.

July 26—S. S. Queen, S. S. Spokane, S. S. Seattle.

August 1—S. S. Cottage City.

August 7—S. S. Seattle.

Fares—Including berth and meals, \$125, two in a room, on the Queen and Spokane, which are the larger boats, with

better accommodations, and make an extra trip up Glacier Bay to Muir Glacier, taking thirteen days. On steamers Seattle and Cottage City, \$66 for an eleven-day trip.

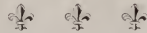
All steamers stop at all the principal ports.

A trip to the Hawaiian territory, 2,100 miles from San Francisco, may be taken via Oceanic Steamship Company's S. S. Alameda, July 30th, returning arrives in San Francisco August 16th, giving five days at Honolulu. Cost, \$110 round trip, includes everything except expenses of stay at Honolulu.

Fraternally yours,

LOCAL PRESS COMMITTEE.

WALTER E. NICHOLS, *Chairman*; A. W. BUELL, M. D.,
R. A. CAMPBELL, M. D., H. C. OATMAN, M. D., G. M. WEBSTER, M. D.



INCOMES OF PHYSICIANS REDUCED.—In the *Lancet-Clinic*, November 27, 1909, appears a letter in the correspondence department signed "A. Medicus, Jr.," which discusses the economic side of the practice of medicine. Commenting on a previous communication, Medicus admits the influence of recent financial depressions, increasing accessions to the ranks from medical colleges, the influence of present-day preventive medicine and public sanitation, etc., in decreasing the average income of physicians, but adds that three great evils are mainly responsible for present economic conditions; the abuse of medical charity, the development of contract practice, and the lack of system on the part of individual physicians in keeping and collecting their accounts.

Discussing the average income of the physician, which he places at \$600 per annum, or about \$1.60 per day, he says: "Compare this with the average wage of the most ordinary laborer and then you may feel that comparisons are indeed odious at times. If you wish to know where the shoe pinches most, ask the physician's wife and his creditors. Ministers' and schools teachers' wives have been immortalized in prose and poetry for their ability to make both ends meet and for their heroic fortitude in facing genteel poverty. The physician's wife is fast joining them." He states that the names of 20,000 physicians appear on the dead-beat list of a national organization, and that an officer of the organization states that the list should contain the names of at least 20,000 more."—*Journal of the American Medical Association*.



EDITORIAL SECTION



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No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

A. I. H. MEETING.



ONCE MORE, THE "OFFICIAL ROUTE."

Notwithstanding numerous assurances that the "official route" was an assured fact and that the very best accommodations had been secured by the regularly appointed transportation committee, there seems to still remain in the minds of several self-constituted managers of everything under the sun, a lingering impression that it is within their power to regulate, even though it be necessary to ruin the comfort and convenience of members of the American Institute *en route* the forthcoming meeting at Pasadena.

In the first place they have sneered at the judgment of the committee for its selection of a route that would include the San Pedro line, claiming it an impossibility that that line could be put in proper shape for the operation of trains with any degree of safety by the time set for the meeting. That this particular objection has been overcome may be readily seen by the following clipping from the Denver Evening *Post*, of May 10th:

"The San Pedro, Los Angeles & Salt Lake railroad, which has been out of commission since December 31, 1909, by reason of damage to tracks from storm and flood, will resume operation June 15, between its terminal points, Salt Lake City, Los Angeles and San Pedro.

"This information was received in Denver today by Charles E. Hooper, general agent for the road, who will reinstate his old employes June 1.

"The damage to the Clark Road, as the property is familiarly known, has been estimated at \$15,000,000, and it was predicted that a year would elapse before the road would be restored to operation. But by a mighty effort on the part of the management a temporary line has been constructed along the old route, and it is now almost ready for transcontinental business.

"While the line has been under reconstruction, engineers have been locating a new survey, and it is thought that the new and permanent route will lie much higher up on the mountains.

"The news that the Clark Road is about to resume operations was received with much enthusiasm among Denver railroad officials, as the owners of the property have had the sincere sympathy of all their rivals over the terrific disaster which befell the road—a disaster said to be the most expensive and far-reaching which ever befell any railroad in the world."

It is the source of much satisfaction that we are permitted to say there has been the largest reservation of space up to the present time ever made for a similar gathering; there is at present enough berths engaged to guarantee at least one full train, with a possible necessity for another section. Taking these things into consideration, along with the number which will join the party from Denver and points south, it is not at all unlikely the New York delegation, guided by Pooh-Bah Dewey and others, will not present a very impressive sight, so far as numbers are concerned, when they arrive at the place of meeting, and will be more than sorry they did not travel the "official route."

THE CRITIQUE regrets there is a difference in opinion as to transportation possibilities, but is glad to know our eastern friends will "get there" some way. We have received several letters of inquiry regarding time, cost and other matters, all of which have been referred to the proper parties for adjustment. One characteristic communication we cannot omit and only wish there were more of a similar sentiment:

OKLAHOMA CITY, OKLA., May 13, 1910.

DEAR DOCTOR:

I have received the itinerary of the route selected by the official committee to meeting at Pasadena, California. Now I am very anxious to meet the party at Denver.

I can take the Santa Fe from here to Pasadena direct, but prefer to go with the boys on route selected by the committee if possible.

I am always loyal.

J HENSLEY.

How vastly different from the foregoing is the following suggestion of *Medical Century*, erstwhile official orchestra of the American Institute, whose editor is at present in the employ of the Institute as Field Secretary and Chief Propagander at two or three thousand dollars per year, with additional remuneration for *expenses*. If any one will inform us of the time when anything has been done by this individual for the advancement of homeopathy unless he could associate the event with some personal promotion scheme, we will be only too glad to give extensive publicity to the affair. Here is what the Field Secretary of the A. I. H. has to say; compare this with Dr. Jos. Hensley's loyal sentiments:

"*THE ROUTE TO THE INSTITUTE.* The Eastern members of the Institute and their friends have selected not only the route but the trains they are to take to the meeting. We learned while visiting Eastern cities last month that a party of some twenty-five had already been made up of those who wished to spend as little time on the road as possible. This party will leave Chicago on the evening of July 6th, and go directly to Long Beach via the California Limited, the fine Atchison, Topeka & Santa Fe train. They will spend a whole day at the Grand Canon *en route*, and will arrive at Long Beach early on Monday the 11th in ample time for the opening of the meeting.

"A second party will be made up leaving Chicago on the same train, July 4th, the party will, by virtue of starting two days earlier, have the side trip from La Junta to Denver, Colorado Springs, Pike's Peak and the Garden of the Gods without extra charge; they can also visit the Royal Gorge from Pueblo, which will give them all the Rocky Mountain scenery really worth seeing. They will then meet the party leaving Chicago on the evening of July 6th at La Junta, and both visit the Grand Canon, and have the rest of the journey together.

"Thus inducements are offered to those who wish to make the trip without loss of time in the truly homeopathic way of the safest, speediest and most pleasant route; and also to those who, having a little more time, desire to spend a couple of days looking over Denver, Colorado Springs, Pike's Peak, Royal Gorge—in fact, the best of the Rocky Mountain scenery. Salt Lake City, Ogden, and the Yellowstone are much more conveniently visited on the return trip. We advise all our readers who contemplate attending the meeting to go this route. At Kansas City the parties will be joined by the Cincinnati, Indianapolis, Louisville and St. Louis delegations on the 5th or 7th, as each may select, and if the size of the parties warrant special trains or sections will be provided. We are assured of the best there is in the line of modern Pullman coaches, dining coaches, electric fans, etc., and the temperature charts of the past show the Atchison route to be the coolest of all routes during the month of July."—*Medical Century*.



HALL WE HAVE A NATIONAL HEALTH BUREAU?

Reasons why the Medical Bills now before congress should be defeated (Senate Bill 6049, House Bills 24549, 24828, 24827, 24875, 25876) :

Do you know that these five bills before the present congress, if passed, could be so used, and the concealed purpose of which is to give such powers to a national department or bureau or "officer" of health, and that the political doctors are making the final supreme effort to get one of them passed before the close of the present session?

Do you know that the terms of all of the bills are so subtle that such bureau or department could at any time take action according to its interests or prejudices without specific legislation while the moral effect would be to commit the United States government to the establishment of a system of medicine, denying to the people the right to determine for themselves the kind of medical treatment they shall employ?

The establishment of either a Department or Bureau of Public Health would be hazardous as well as superfluous legislation. The fact that the American Medical Association is the author of these measures gives ground for serious reflection. The A. M. A. is reactionary in its policies with marked tendencies to coercion and repression. Men who have dared to break away from it have been put under the ban very much as heretics in religion and traitors in the state. The history of this association shows that its aim has been to control and dominate state legislatures by an elaborate officialism and by making itself an essential part of the government.

The establishment of a Bureau or Department of Public Health would create a medical trust. A medical trust is no more likely to "do justly and love mercy" than is a sugar trust or a beef trust. Such a bureau or department would be a hindrance to intellectual freedom and independent medical research.

It is a question whether a medical combination operating under the government which would in effect monopolize the healing art in favor of one school of medicine would be constitutional. This could only be determined by judicature in the courts, but it would be wiser to obviate any such necessity by refusing to pass any such bills.

If any of the above bills were passed they would further complicate the adjustment of the rights of states and the attempt of the Federal authorities to control.

In the past, state and other local authorities operating in harmony with the public health and marine hospital service have been able to successfully control quarantine.

It has been stated that one of the objects of a Federal Department or Bureau is the study of disease and the acquiring of valuable information about the cause and cure of disease and the prevention of contagion. It has yet to be shown how such a department or bureau would add to the fund of intelligence concerning these matters. Such research and study is already being carried on by public and private agencies and philanthropies already in existence and this is being done to better advantage than would be possible by a Federal Department or Bureau.

A Federal Health Board would not of itself do one thing to prevent disease. If state and municipal health boards already in existence with ample laws to support their dictum can not prevent the spread of disease, a bigger health board, operating under Federal authority, could not hope to do more. A multiplication of officials will not lessen the tendency to disease.

If the same money that would be expended annually on this proposed department or bureau were to be expended for improving of the

housing of the poor in our great cities and thereby giving better sanitary conditions to the congested districts of our great cities, more practical good would result than could possibly follow the creation of a Federal Department or Bureau.

One of the reasons urged for the passage of the above bills is that 600,000 persons die annually in the United States of preventable diseases. If these diseases are preventable why can they not be checked and eliminated by the existing medical agencies? Would a new board of doctors in any way add to the forces now in existence for the suppression of disease? A great deal of disease is caused by overcrowding, by sweat shops, and by immoral conditions generally. A new department of political doctors does not promise much in the way of a cure for these causes of disease. There is nothing practical about the reasons offered for the creation of a Federal Department or Bureau.

"The scientific investigation of the contamination of water supply" does not require the creation of a new bureau. Such work has been carried on and can be carried on successfully by the existing bureaus in the Agricultural Department and other branches of the government.

If a new department or bureau were to be created neither could have any police powers under the Constitution; that is to say, neither a department or bureau could legally make regulations or issue orders affecting the welfare or the conduct of the people in any state. To be effective such a department or bureau would be obliged to exercise police power, but this it can not do legally, therefore, such a department or bureau would either have to operate in defiance of the Constitution or it would exist as a perfectly useless branch of the government.

Statutory standards in any line of human effort are restrictive. This is particularly true of the various sciences affected by the above bills.

It is beyond the province of government to foster or promote one class of scientific endeavor as against another and anything that thus tends to interfere with liberty of conscience is undemocratic and constitutionally repugnant to the current thought.

If the object is to care for the public health generally, there is no authority in the Constitution for such a department. That is a matter for local regulation. If there is sanction for such a department, excuse can be found for the Federal government to take over all branches of local government. A department of education, a department of highways and other departments, with cabinet officers at their head, can with equal propriety, be created, until all the functions of government now exercised by the state, will be usurped by Congress.

To prevent this unjust medical legislation you should wire or write immediately to your senators and representatives at Washington asking them to do all possible to defeat these bills.

For further information and literature write "The National League for Medical Freedom," Metropolitan Building, New York City, N. Y.

The foregoing document has been handed us and we take no little satisfaction in observing thereby that the American Medical Association is quite likely to have some determined opposition to its persistent effort towards monopolising the medical business of the United States.

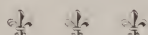
For the past five years there has been a most persistent propagandism of the proposition to establish a National Health Bureau, or, what would be much better, a "Commissioner" to whom all matters pertaining to medical practice

would be submitted. It has masqueraded as an idea originating among the whole medical profession and to clothe the scheme in garments other than A. M. A cut. has donned habiliments purporting to be those of a "Committee of One Hundred," but no one need the aid of either magnifying glass or search warrant to disclose the cloven hoof of the A. M. A. regardless the attempted disguise.

Just whether the American public is prepared to accept of even a mild form of medical servitude is somewhat problematical, but if they desire anything of this sort, the quickest and most effective way for them to bind themselves hand and foot without possible hope of escape from a bondage along side of which the serfdom of Russia would be birdlike in its freedom, is to permit this unfair and un-American bit of legislation to be enacted.

Every physician, layman or other advocate of a fair deal, should write his or her senator or representative in congress, protesting against this outrage against the intelligence and independence of a free people.

Get busy; do it now!



MEETING PLACE CHANGED. Owing to apparent indifference of the new management of Hotel Virginia, Long Beach, and fear of the arrangements committee for the Los Angeles meeting that members attending the Institute might suffer thereby, it has been decided the forthcoming meeting will be held at Pasadena, instead of Palm Beach, and that the Hotel Maryland will be the headquarters instead of the Hotel Virginia. The following editorial from *The Pacific Coast Journal of Homeopathy* explains the situation completely and may be relied upon to the limit:

"The announcement at this time that the American Institute of Homeopathy, in July, will meet in Pasadena instead of Long Beach, will be a matter of surprise to many, and may possibly lead those eastern friends who are not familiar with the geography of Southern California into the belief that something very much out of the ordinary has taken place and that a revision of the entire program and a complete upsetting of all the plans formulated will follow as a matter of necessity. But this is not in any sense the case.

"The one reason why a change in this part of the program was believed wise if not unavoidable, lies in the fact that the Hotel Virginia at Long Beach, which in the beginning had shown great eagerness to entertain the American Institute, and to make all kinds of efforts to insure the comfort of its members, has, under a new management, shown

a disposition to cater to the demands of prospective summer visitors at the expense, almost assuredly, of our own friends. As the demand of the 'regular summer trade' increased it grew more and more difficult to make satisfactory reservations for our own people, and it finally became evident that some specific understanding must be had between the local committee of arrangements and the manager of the 'Virginia' to relieve the committee of that apprehension which was growing into an unbearable dread that at the last moment our own friends would be without many of those personal comforts which had been promised them, and promised in perfect good faith. The committee did not receive satisfactory assurance of good faith, hence the change.

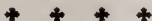
The change from Long Beach to Pasadena is no greater than a change of headquarters would be from one leading hotel of Chicago to another, each having attractions of its own and both being equally accessible and convenient. Both Long Beach and Pasadena are in close social and business relations to Los Angeles, and only a short distance from the larger city. Long Beach some thirty miles oceanward, Pasadena about half that distance in the opposite direction. Each place has attractions of its own; those of Long Beach depend altogether upon its situation by the sea, while those of Pasadena arise largely from its charming surroundings and from the exquisite, restful beauty of this gem of American residence cities. It is difficult to speak of Pasadena to one who has never seen California, without taking the serious risk of being deemed extravagant in speech to a point of blameworthy exaggeration. Its very rapid growth is the result of those advantages of climate and location which has attracted so large a number of wealthy easterners that the town is frequently spoken of as a city of millionaires. The houses of a large number of these people are perfect gems from every point of view. The marvelous wealth of flowers, the result of a semi-tropical climate and the liberality with which irrigation is applied, makes even a modest cottage a bower of beauty, and, with the soft outlines of the foothills forming a background which for effectiveness stands without a peer, in the midst of orange groves whose perfume pervades every nook and corner of the city and country surrounding it, Pasadena is a gem and winds itself about the hearts of all who ever were subjected to its witchery. It is this very witchery of the place which is responsible for its wonderful growth, since people who have once tasted of it are rarely able to keep away from it.

"The writer fancies that the eastern friends who happen to glance over these lines are broadly smiling at which to them may seem a mere attempt to put things in the best light possible; but the only trouble the poor editorial chatterer is just now experiencing arises from the fact that he is anxious to tell only a small fraction of the truth in order to force eastern colleagues, after they have come here to start that dear old-fashioned Methodist hymn, 'The Half Has Never Been Told.'

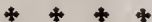
"In a city so distinguished for its beauty and wealth, particularly in California, elegant hotels soon spring up in surprising numbers, and Pasadena has its full share of them. Of these, the Maryland is one of the most commodious and homelike. The arrangements made will insure every comfort and our people will be treated like 'guests of honor.' It will be a bit warmer than at the seashore, but if that is a loss, many other attractive features will make us quickly forget all about it, and the restfulness of the place, the absence of the pandemonium which is so common a thing at the seashore resorts, its nearness to Los Angeles, and the settled air of refinement which belongs to the place will, so the writer sincerely believes, make us all feel that a kindly Providence has been at the helm and is responsible for a change which will leave us all the gainers."

MISCELLANEOUS

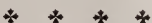
Send a personal item to THE CRITIQUE occasionally.



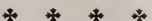
At the recent city election in Denver, this town went "wet."



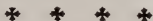
The three homeopathic-aldermanic candidates at the late election were all defeated.



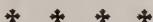
It is hoped a large delegation of homeopaths will attend the Los Angeles meeting of the A. I. H.



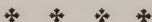
Dr. William V. Neel, one of the best homeopaths in the country, is secretary of the Henderson (Ky.) City Board of Health.



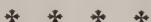
Dr. C. W. Enos was candidate for alderman of the Fourteenth ward on the "Citizens" ticket at the election held the 17th of last month.



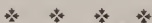
Commencement exercises of Denver and Gross College of Medicine were held at Trinity Methodist Episcopal Church, Denver, Thursday evening, May 26, 1910.



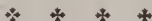
Don't forget: YOU have been appointed a member of the Reception Committee to meet the homeopathic physicians who will visit Denver the 6th of next month.



"The Fourteenth Annual Meeting" is the way the official folder reads in exploiting the forthcoming Institute meeting at Pasadena. A slight difference of about fifty-two years. Don't let that deter you from going, however.



The San Pedro line will be open for business in time for A. I. H. trains in July. Train service was resumed between terminals the 15th of last month. Don't worry about not getting there via the route selected by the transportation committee.

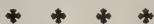


Dr. E. H. King, one of the oldest practitioners of homeopathy in Denver, desires an office associate. Either write or call upon the doctor, room 23, Union Block, 1114 Sixteenth street, Denver; you may be just the man he is looking for and THE CRITIQUE will vouch for Dr. King.

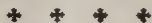


Dr. H. Peterman, Ardmore, Okla., writes THE CRITIQUE under date May 10th, that he will retire from practice, having devoted forty years of his life to homeopathic medicine. He is pleased to say an able young man has been secured to succeed him and he will retire from active

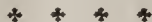
practice. THE CRITIQUE wishes the doctor a long and happy vacation from professional cares and his successor abundant prosperity.



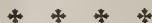
Dr. Charles Branch Cowles, Denver Homeopathic, '08, was a candidate for alderman from the Fourth ward on the Republican ticket at the election held the 17th of last month. He was not elected.



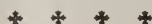
THE CRITIQUE regrets to announce the death of Dr. Enos, Sr., of Jerseyville, Ill., father of the Doctors Enos of this city. The grand old homeopath was ninety-five years of age at the time of his death.



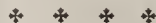
Dr. Charles Dake, Hot Springs, Ark., brother of Dr. Walter N. Dake of this city, paid a brief visit to Denver the latter part of April and the first of May. His stay was made necessarily brief owing to professional duties which demanded his presence in California.



An adjourned meeting of the Denver Homeopathic Club will be held the first Saturday night of this month. Postal card announcements will be sent every homeopath physician in the city. Remember YOU have been appointed on the reception committee to A. I. H. members.



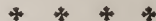
The managing editor of THE CRITIQUE was a candidate for alderman of the Second ward, Denver, on the Republican ticket, at the election held the 17th of last month. He is now qualified to tell all about "How it Feels to Be Defeated for Office." Anyone want the story at space rates?



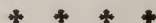
There is being erected in Denver, two buildings that will be devoted exclusively to doctors and dentists. This looks very much as though there was a trifling preponderance of professional men in the medical line, else there would be no occasion for all this extra office space in their behalf.



At the sixty-fifth annual commencement exercises of the Eclectic Medical College of Cincinnati, Ohio, twenty seniors were given diplomas to practice medicine. This is one of the most successful institutions in the United States and has but recently moved into spacious and elegant quarters of its own.



At the annual meeting of the Park Avenue Hospital Association, formerly Denver Homeopathic, held the latter part of April, several new members were elected on the governing directorate. It is hoped the one-man control of this institution has been eliminated for good and all. Dr. D. A. Strickler was elected president of the board.

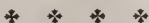


Messrs. Boericke & Tafel have purchased the remaining copies of Jousset's *Practice*, translated from the French by Dr. John Arshagouni. The publisher's price was \$7.00 and \$8.00. The price is now reduced to \$3.00 in strong buckram binding, plus book expressage. Dr. Jousset rewrote the third edition of this work from the manuscript of which this translation was made, but it has not as yet been printed in France. It is probably the most practical and helpful homeopathic practice ever

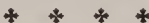
published, and at \$3.00 is a rare bargain. Every busy doctor ought to have a copy.



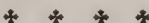
Dr. Giles F. Roosevelt, a former prominent physician of this city, has deserted the practice of medicine and is now promoting a land scheme in San Juan County, New Mexico. He is vice-president of the company and has offices 404 Continental Building, Denver, Colo. Success to him.



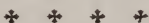
Dr. J. M. Walker has but recently returned from a rather extended trip East, during which time he visited several scenes of his early manhood and enjoyed himself immensely. He hopes to attend the Institute meeting in July and is much interested in the entertainment of Institute members during their stay in Denver, *en route* to Los Angeles.



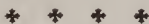
Dr. H. Emoline Williams, 319 East Woolman street, Butte, Mont., formerly assistant in Dr. Kent's office, Chicago, and consequently a homeopath of high order, writes THE CRITIQUE she is not doing professional work in Montana and that she expects to visit New Mexico soon. THE CRITIQUE can recommend Dr. Williams, wherever she may locate.



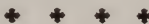
Dewey and a small bunch of Sizzling Santa Fe boosters, will go to the Los Angeles meeting via the Sizzling Santa Fe. THE CRITIQUE feels certain this course will not endear this gentleman and his friends to the hearts of loyal members. Besides that the loyal ones will have much the pleasanter time *en route*. Rule or ruin is the motto of some.



According to newspaper reports, which are backed by a Colorado state law, nearly every child is suffering from some form of trouble which requires immediate surgical attention. One man was arrested in April for failure to provide suitable medical attention to a young son who was afflicted with tonsillar troubles of some sort, and forced to promise immediate reformation.



Dr. Lillian Pollock, prominent in homeopathic circles of this city, spent two weeks in Portland, Ore., the past month. She is a supreme-grand-high-mucky-muck in the Women of Woodcraft and her trip had to do with that organization. Dr. Pollock was missed from the May meeting of the Denver Homeopathic Club, of which she has been a faithful attendant since its reorganization.

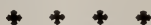


During the absence of Dr. W. A. Cates, of Nelson, Neb., who is at present sojourning in Colorado, Dr. J. M. S. Chesshir, of Superior, Neb., has had charge of the former's practice. Dr. Chesshir was married at Guide Rock, Neb., the 4th of last month, to Miss Clara M. Marsh, daughter of one of Guide Rock's most prosperous and prominent merchants. THE CRITIQUE congratulates the doctor; that goes without saying, and we believe every one concerned comes in for a large amount of well wishes.

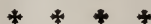


A new homeopathic publication will be put upon the market in England at an early day. A large surplus number of copies of the journal are to be printed every month; this surplus it is proposed to distribute gratis among those of the profession who are ignorant of homeopathy,

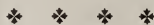
hoping thereby to rouse more professional interest than now exists, and to combat present ignorance of the aims, methods and results of this system of healing. That looks goods to THE CRITIQUE and we wish the new venture unbounded success.



One of those good Dienst articles is assured for next month, the editor having in his possession at this time, copy for same. You all know what a "Dienst" article stands for, in the first place: *Homeopathy*; mixed with that is a whole lot of good, common sense and all put in such shape as to be not only palatable but profitable to those who take the dose as directed.



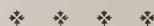
Every homeopathic physician should feel it his or her duty to join the American Institute of Homeopathy. This is our national society and needs our support. It only costs five dollars this year, and this includes the Institute Journal for one year. Without this national organization our school would be in a sorry plight. Send your application to H. V. Halbert, 31 Washington street, Chicago, Ill., and it will be attended to.—*The Clinique.*



Dr. Margaret H. Beeler was called to Atchison, Kan., the 19th of last month to attend professionally a young lady of that city. She was inclined to think her trip would be extended as far as Philadelphia, and was obliged to leave her patients in care of others during her absence from the city. Dr. Beeler has a large and lucrative practice in Denver, all secured by strict attention to business and an intelligent interpretation of the homeopathic law. Success to her.



Dr. John Fearn, Oakland, Cal., has this to say in a paper published in February number of the *Eclectic Medical Journal*: "Homeopathy is succeeding and gaining favor, not merely because their remedies are pleasant to take, as many say, but because their prescribing is the result of close study, and this explains their success in dealing with the sick. It is this success that has opened for them avenues of practice among the wise and wealthy wherever they are found."



We understand the Park Avenue Hospital of this city, which is a homeopathic institution and should be called the Denver Homeopathic Hospital, cleared between nineteen hundred and two thousand dollars above all expenses last year. Many improvements are being inaugurated and it only remains a question of short duration until the entire homeopathic profession will take interest in this institution and that its former name will be restored. "Oh! Let it be soon!"

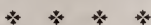


Dr. Joseph Hensley, ex-second vice-president of the A. I. H., and member of the Oklahoma Board of Medical Examiners, will come to Denver in July and join the "official" train delegates notwithstanding he could much better and with much less inconvenience take the Santa Fe in his own town and go direct to the meeting. Dr. Hensley besides being loyal, is a homeopath of the sort that is a credit to the cause. What we need is more such men and fewer of the sort who place personal advancement above everything else.



Every member of the American Institute of Homeopathy should write his or her senator or congressman and urge their opposition to

the passage of medical bills establishing a National Board of Health. It is only another move on part of the A. M. A. to monopolize the medical practice of the United States; is unconstitutional, un-American, and unfair, and should meet with vigorous opposition on part of fair-minded and fearless advocates of a fair deal.



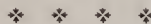
The Socialist mayor of Milwaukee has called from Chicago a physician—not a Socialist—whom he believes peculiarly suited to managing the department of health, and to whom he is to pay twice his Chicago salary. This may be an exceptional instance of unusual intelligence, but there'll be something doing when the Milwaukee doctors discuss this new discovery. This is a case demanding immediate attention from the A. M. A. and the National Health Bureau.



Tennessee needs more good homeopaths. The state is one abounding in natural resources. The climate is delightful. The state is rapidly pushing to the front as a manufacturing center and with the available coal and timber resources it is destined to become one of the foremost states in the Union. There are many good openings for up-to-date homeopaths and any information along this line will be cheerfully given by communicating with Dr. William A. Boies, of Knoxville, Tenn.



We have received a beautifully gotten up booklet illustrating interesting industrial and other attractions of Piqua, Ohio. Among the many magnificent homes shown in the collection none is more elegant and home-like than the residence of Dr. J. C. Fahenstock, one of the prominent physicians of the place, a fine homeopath and gentleman, and the editor of THE CRITIQUE is pleased to see evidences of his prosperity in this boost for a "Greater Piqua, Ohio." May it become greater and then some.



DOCTOR FELL.—I do not love you, Doctor Fell; the reason why, I'll briefly tell: The doctor of the olden days had kindly words and pleasant ways; and though his pills were on the bum, and sent some off to Kingdom Come, and though he liked to swell the hosts of skeletons and sheeted ghosts, it never was his foolish plan to use a saw on every man. Unlike the modern maniacs, who carve their patients with an ax, he dealt out calomel or nux, and soaked us for a pair of bucks, and if he kills us—good old soul! he left us to be planted whole. When I am sickly and unstrung, you ask me to unfurl my tongue; you feel my pulse and prod my back, and say my liver's out of whack, and then you shed your vest and coat, and push a lantern down my throat, and say: "Great Cæsar! What a heart! I'll have to take you all apart." And on your table I am laid, while you go out to hunt a spade, to dig around among my works and find the blamed old germ that lurks around the angles of my frame—the way you carve me is a shame. When winter comes, with frost and snow, I have a chilblain on my toe; and when for linament I beg, you want to amputate my leg; and when my throat gets sore and raw, you want to cure it with a saw; to cure my baldness, you, I ween, would run me through a guillotine. A leg of mine is now at rest among the doctors of the West; an Eastern doctor has in brine about eight inches of my spine; the jaw that once adorned my mouth, is kept in pickle in the South. I do not love you, Doctor Fell; you carve too fluently and well; I fear you and your edged tools; I'll send to correspondence schools for absent treatment when I'm ill—or hit the good old-fashioned pill.—WALT MASON, in the *Emporia Gazette*.

CHICAGO LETTER.

Drs. Dave and Bertha Brewer, Hahn, '09, are now located in Portland, Ore.

The dance given by the Hahnemann Nurses on May 3rd was enjoyed by their friends.

Dr. Pratt had a special clinical week at Hering College early in May, which was well attended.

Dr. Nettie Campbell, Hering '05, has moved from Chicago and is now practicing in Davenport, Ia.

Dr. A. H. Grimmer, Hahn, '06, has moved his residence to 442 East Thirty-fourth street, Chicago.

Dr. Chester Moe, Hahn, '09, has completed his service as interne in Hahnemann Hospital, Chicago, and will locate in this city.

Dr. E. E. Vaughn, Chicago, desires two homeopathic internes for the Chicago Union Hospital. Good places for anyone desiring hospital training.

Dr. W. A. Dewey of Ann Arbor, Mich., one of the speakers at the meeting of the Illinois Homeopathic Medical Association, was entertained at luncheon by the Alpha Sigma fraternity, of which he is a member.

The graduation exercises of the Hahnemann Hospital Nurses' Training School were held May 5th, sixteen nurses of the class of 1910 receiving diplomas. Their many friends enjoyed the exercises and reception which followed.

The 1910 session of the Illinois Homeopathic Medical Association was held May 10, 11, 12 and 13. The first three days were devoted to papers and discussion. On Friday, the 13th, the special clinics were held at Hahnemann College. A banquet on Wednesday evening at the New Southern Hotel was well attended and a paper by Dr. H. R. Chislett, "A Few Thoughts on Medical Education," was appreciated. Dr. W. A. Dewey of Ann Arbor, and Dr. W. H. Watters of Boston, were among the speakers present. J. W. Ward of San Francisco, also delivered a paper "Liberty of Medical Opinion and Its Relation to Homeopathy."

At the April meeting of the Chicago Homeopathic Society two very interesting papers were presented: "Clinical Significance of Skin Disease," by Dr. C. D. Collins, and "The Eye," by Dr. E. J. George. The annual business meeting of the Society was held April 21st and the following officers were elected.

President—Dr. Sarah Hobson.
Vice-President—Dr. Paul Hulhorst.
Secretary—Dr. P. M. Cliver.
Treasurer—Dr. Schott.

Chicago, Ill., May 17, 1910.

OKLAHOMA IS CALLING FOR ONE HUNDRED HOMEOPATHS.

There are one hundred homeopaths in the Eastern states and one hundred homeopaths in the Northern states looking for a good location for a homeopath. In Oklahoma there are one hundred good locations looking for just one good homeopath. Oklahoma is a beautiful state to live in and the state is rich in coal, oil, gas and many rich minerals. The soil is of the richest and most productive kind.

The State Board of Medical Examiners in Oklahoma is very fair and we have two very good homeopaths on the board. There is reciprocity with many of the Eastern and Northern states.

Below shows names, population and scarcity of homeopaths in them:

<i>City.</i>	<i>Population.</i>	<i>Number of Homeopaths.</i>
Oklahoma City, Okla.	48,000	6
Muskogee, Okla.	30,000	1
Lawton, Okla.	9,000	1
Chickasha, Okla.	15,000	3
Tulsa, Okla.	20,000	2
Guthrie, Okla.	20,000	2
Ardmore, Okla.	10,000	1
Norman, Okla.	4,000	2
Blackwell, Okla.	4,000	2
Enid, Okla.	15,000	1
Tecumseh, Okla.	1,500	1
Sulphur, Okla.	4,000	None
Salpulpa, Okla.	10,000	None
Shawnee, Okla.	20,000	None
McAlester, Okla.	12,000	None
Anadarko, Okla.	4,500	None
Bartelsville, Okla.	10,000	None
Mangum, Okla.	6,000	None
Cleveland, Okla.	4,000	None
Durant, Okla.	6,000	None
Tahlequeh, Okla.	4,000	None
Wynnewood, Okla.	3,339	None
Alva, Okla.	4,500	None
Pawnee, Okla.	3,000	None
Perry, Okla.	4,500	None
Wagoner, Okla.	4,000	None
Newkirk, Okla.	3,000	None
Coalgate, Okla.	4,000	None
Pauls Valley, Okla.	3,000	None
Ada, Okla.	3,000	None
Okemah, Okla.	2,500	None

Ten towns of population 2,500 and good thickly settled farms around and have no homeopath.

For information, write Committee on Promulgation: W. L. Bonnell, M. D., Chickasha, Okla.; Lottie S. Cunningham, M. D., Tulsa, Okla.

READING NOTICES

ALLOUEZ acts promptly on the kidneys, liver and bowels. Where there is a rheumatic element back of the cutaneous lesion much good can be received. Probably more benefit is derived in eczema than in any other disorders. The alkaline slightly laxative waters should always be employed.

PAINFUL MONTHLY PERIODS. Many doctors prescribe a combination of Dioviburnia and Neurosine (equal parts) to abate the pain and nervousness of dysmenorrhœa. Dioviburnia acting as a reconstructor to the parts affected, Neurosine allaying the pain, resuscitating and toning the nervous system. Physicians can prescribe Dioviburnia and Neurosine with impunity as these products contain no opium, morphine, chloral or other deleterious drugs.

HAGEE'S CORDIAL. The extract of cod liver oil used in the preparation of Hagee's Cordial of the Extract of Cod Liver Oil Compound, is made under such conditions that the medicinally active principles of the oil are separated from the fatty materials without in the least changing their state of combination or solubility, so that even the most complex specific lecithine of cod liver oil is contained as such in the extract and transferred unchanged to the cordial.

Clinical experience with Hagee's Cordial (an experience which has now extended over many years throughout the United States) justifies the assertion that its therapeutic indications are precisely those which belong to cod liver oil in its natural conditions.

A VERY GRAVE ERROR. The experience of many of the best men of the profession, not only of the United States but abroad, has established the clinical value of antikamnia tablets. Among those who have paid high tributes to their value and who occupy positions of great eminence, may be mentioned Dr. J. Acheson Wilkin and Dr. R. J. Blackham, practitioners of London. They have found these tablets of value in the neuralgias and nervous headaches resulting from over-work and prolonged mental strain, paroxysmal attacks of sciatica, brow-ague, painful menstruation, la grippe and allied conditions. Indeed, the practitioner who has such cases as the latter come under his observation, and who attempts their relief by opiates and stronger drugs, when such an efficient and harmless an agent can be used, commits a grave error.

Experience goes to prove that two antikamnia tablets in an ounce of sherry wine, taken every two to four hours, will carry the patient through these painful periods with great satisfaction.—*Medical Reprints*, London, England.

"MILK DIET" ANEMIA. While it is generally conceded that milk is a complete aliment in the sense that it represents the three essential food elements, *i. e.*, proteids, carbohydrates and fats (together with inorganic salts and water), it is equally well known that this otherwise highly nutritive fluid is exceedingly poor in iron. It is not to be wondered at, therefore, that after a prolonged milk diet, some degree of Anemia is very likely to supervene. This is especially true after a long-continued typhoid, as well as in cases of chronic nephritic disease, in which milk is the principal or exclusive food. The occurrence of such a "milk diet" Anemia seems to be, in many instances, responsible for a tardy and protracted convalescence. Such iron-poverty can be prevented by administering Pepto-Mangan (Gude) both during and after the milk diet period, thus supplying the essential iron in the most easily tolerable, non-irritant and promptly assimilable form. This palatable organic, feruginous compound is entirely free from disturbing effect upon the digestion, and does not irritate, or constipate, nor does it in any way interfere with such other treatment as the physician may see fit to adopt.



THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath.—Letter No. 9.

THE EXACT MODE OF PREPARATION OF THE INDICATED
REMEDY. DYNAMIC POWER.

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MY DEAR DOCTOR:—I am requested to explain why, if potencies are so effective in extinguishing disease, "*potentized meat and bread* would not be more nutritious for the physical man." This I shall now attempt to do. The organs and tissue of the body have a *material* basis. The blood supplies the *sensible materials* necessary for the formation of every tissue and fluid in the body, and for every functional process. These materials are *organic* and *inorganic*; the first consisting of sugar, fats and albuminous matter; the latter of water and *cell-salts*. The twelve blood salts necessary to health—to the structure, maintenance and functional activity of the organs and tissue of the body, are, *in health*, extracted from the material food. If, however, there is a deficiency of one or more of these minerals, be it lime, salt, iron or magnesia, the remedy is not to *supply these minerals*, as Dr. Schuessler imagined, but *correct the deranged vital force of the system, the great engine back of normal digestion and assimilation*, so that these salts already furnished by nature in our food may be *appropriated*.

Here is a person, for instance, *craving salt*; and yet he eats salt daily. Now to conclude that he needs *material chloride or sodium* on the theory that he is deficient in that *cell-salt*, is like Benjamin Franklin's crawfish—"progressing backwards!" What he needs, as a rule, is *potentized salt—immaterial salt*, natrum muriaticum; and this will correct the

deranged vital force of his body so that the *material salt* will be assimilated. *Craving salt* is a "key-note" of nat. mur. and where this is found the whole image, very often, may be discovered if you look for it. I say very often, because carbo. veg., rhus., verat. and other remedies have this symptom as pronounced as nat. mur. But if it is a nat. mur. case, as I have assumed, then salt as an *immaterial medicine*, the 200 or 1,000 potency, or even the 50-m. corrects the vital force so he can *appropriate his food* and thus secure an abundant supply of all the tissue-salts his body requires.

This explanation why the Schuessler system proves to be "too short at one end" in so many cases in a practical test.

I visited a prominent poultryman a few months ago and while showing me his beautiful standard-bred birds, he complained that the eggs had very thin shells and some had no shells at all. "And yet," said he, "there is a box of oyster shells before them all the time." I answered: "Your birds are not right. They can not appropriate the material shells which are so necessary in forming the egg shell." I gave him a potency of the carbonate of lime to be put in their drinking water and in a few weeks he reported "all is well with the hens." Though an egg-shell is almost wholly composed of carbonate of lime, still a *potency* of that mineral could not *make shells*; it could and did put the hens' systems in a condition where the material carbonate of lime in the oyster-shells could do the work.

So in brief I answer the question in this way: The physical body demands *material food*, the vital force of that body, when deranged, demands and must have *immaterial medicine*. The constituents of the body, whether organic or inorganic, are all *material* and require material substances for renewal; but the vital force is *immaterial* and, when deranged, calls for immaterial agents of cure.

The person who proposed the foregoing question has not learned the nice distinction between the *material* and, *immaterial*. Potencies hold sway in their own field; but a *materialist* can not use them. In the daily rounds of a general

practice, my dear doctor, you will find much to annoy and perplex and many things which cannot be met with potencies. For instance, the babe has been born and perhaps you are waiting for the placenta when, without warning, a hemorrhage is heard like the roaring of water in a branch after a heavy rain. Now, this is not the time for potencies. Had potencies been properly selected and administered in preparing the poor woman for this ordeal, post partum hemorrhage would not have occurred. Now you are facing a mechanical condition and you must act and act quickly.

Insert your hand into the uterus between the placenta and uterine wall, separating them, then remove the former. If this does not prove effective, again insert your hand into the uterine cavity and scratch the interior wall until it contracts. Then administer the indicated potency according to the totality of the symptoms to cure the systemic disorder.

Following this experience perhaps you are called to see a child which has swallowed a large portion of poison. This, again, is not the time for potencies. The demand now upon you is a knowledge of chemistry; and you must *act quicky*. And, maybe the very same day, you are called to see a man with a broken bone. This is not a time for potency, only so far as it may control the traumatic fever and promote knitting. What you need now is a knowledge of surgery. So it goes week in and week out; during these sore experiences your friends and patrons are enjoying their social functions, but you are forgotten.

In the darkness and mud; in the sunshine and rain you toil on, daily listening to the complaints of the sick and *trying* to appear pleasant and affable as if life were made up of fragrant flowers and beds of roses. But in spite of your strongest resolutions and moral tendencies, you will sometimes reach the conclusions indicated by the copyrighted post card caricature under which is printed:

“Life is just one d——d thing after another.”

But still there is a legitimate field for potencies and within that *domain there is no substitute*. I shall soon refer

you to such men as Hahnemann and Boenninghausen regarding the *dose*, and the attentive reader and the alert student will see that there is as much in *knowing how to use potencies* as in their exact preparation.

If you are positive you know how to find the right remedy for a given case, and found it, and still it would not cure neither in the first, second, third, sixth, or even the tincture, as a *materialistic* doctor you would be at the end of your rope. In such event it could not be said that you have the "Key to successful prescribing." If at such a time you should open the *Organon* and hear Hahnemann still telling the world that it is *only* by their dynamic action on the vital force that medicines are able to cure, I should think you would be disposed to listen and profit by the words of the founder of the system you profess to practice. It does not matter whether the disease is acute or chronic, his statement still stands with the same force and the same irrefutable truth. Personally I know of no reason why the high potencies or dynamic medicines should be efficacious in chronic diseases more than acute. As a matter of fact I use the same potencies for acute and chronic. This idea that dynamic medicines may work in chronic cases, but not in acute, is born of *materialists*. Hahnemann never taught it. True, in some chronic cases only a very high potency can reach the vital force and alter it, but the same is true of some acute cases. If a patient is very low with some acute disorder, his vital force almost overpowered, the right medicine in a very high potency will often prove to be his only salvation. Then there are other acute troubles of a malignant character which can be headed off at once with a potency suited to the case. Only recently I was called to treat a fat, hearty boy of seven years. The mother said he was in the best of health except his throat. He would make a peculiar noise something like a chicken with a grain of corn lodged in the trachia. At times when sitting in a deep study and when eating, the noise was loud, sharp and repeated; and it was very noticeable to all in his presence. The mother and father were very anxious to know what the ailment was.

“Well,” said I, “it is chorea of the throat; but that does not help us to cure him. You must tell me what symptoms you have noticed and carefully and accurately answer the questions which I shall now propound to you.” I ascertained that he was unusually nervous; that he did not sleep good, and that he sometimes made this noise during sleep; that he had night-sweats and had had for sometime; that saliva would run out of his mouth during sleep and wet the pillow; that the night-sweats stained yellow; and that his disposition had changed in a marked degree—now being very easily irritated, very cross and ugly. Also that he had suffered a very severe fright some three years previous. I prescribed merc.v., 1-m. This stopped the night-sweats, the nightly flow of saliva and altered his disposition to some extent, but the chorea was the same. I then gave him the same medicine in the 3-m. potency. This helped the chorea very much, but only for a short time. Repeated again, but the improvement did not continue but a few days. I then gave him the same remedy in the 50-m. potency, a small powder made of number five pellets; and I had given the 1-m. and 3-m. potencies the same way. He now grew worse—decidedly worse. I waited, but the aggravation did not subside. I then gave him hep. sulph., 2-c to antidote the merc.v., 50-m. This, in the course of a week brought him back to the point where I found him, minus the night-sweats and flow of saliva. I then gave him merc., 50-m., *three pellets*—No. 5. This resulted in *immediate improvement and a final cure*, after being repeated a few times.

Now, my young doctor, when we get to the dose question, remember what I have related. In giving you this case to illustrate the power of high potencies, I have given all of it including the dose. And, like Hahneman, “*We ourselves only maintain what we of a certainty know.*”

Now, go with me to visit that young wife where I was called a few days since. Let us (on paper) make the visit over again. Get right in, doctor, and may be I can give you a hint or two by showing you how I treat acute troubles. Mrs. W., this is my friend Dr. B., who once thought that he graduated in a homeopathic college; that he heard homeopathic lectures; that he was supplied with the best homeopathic books; but when he got into practice he would not even call

himself a homeopath! He is now making an honest effort to learn homeopathy as Hahnemann taught it and practiced it. I feel sure you will have no objections to his presence especially as he is to perpetuate the pure, homeopathic healing art. He desires to observe how I secure the image of your sickness and what I prescribe. Thank you! Now, what is your trouble this morning, Mrs. M? You heard that doctor. She says, "she has had a diarrhoea every morning for more than a week." What else? "A headache especially over the left eye." All right. What else? She says, "the 'small of the back' nearly kills her." Yes, we have that noted. And that is all. Well, I guess that is quite enough at one time for one little woman. Now, Mrs. W., how early does that diarrhoea disturb you? Write that down, doctor. She says, "about seven o'clock a. m., and that she has frequent stools until about ten o'clock; and that she is not disturbed again until about seven the following morning." Now, right under that, doctor, write *morning aggravation*.

What is the character of the stools? Note that, doctor. "Thin, brownish *mucus*. Some blood the last day or two." Now, Mrs. W., describe your feelings and sensations before stool, during stool, and after stool. Note that, doctor, and underscore it. "*A feeling after stool like more ought to pass.*" Now, Mrs. W., are the stools copious and always about the same? There, doctor, draw two lines under that statement; "NEVER COPIOUS, AND SOMETIMES NONE AT ALL." *Thirst*. Now, Mrs. W., what is your usual disposition when well? Note that, doctor. She says, "she is regarded as being good natured; but in the last few days her husband talked of applying for a divorce—she is so *cross and irritable*." What is the character of the headache? "Dull pain over the left eye." Yes, I see the tongue is coated thick, dirty, yellowish-white. You will observe also, doctor, there is a yellowness of the eyes and face. Now, will you order a tumbler half full of water, and a teaspoon? Thank you! Now, doctor, I am dissolving a small powder of *nux vomica*, 1-m., in this water; and I shall stir it thoroughly—give it "the homeopathic stir!" Mrs. W., you may take a spoonful of this now; and you may repeat it after every stool or effort to stool. (It will not be surprising to real homeopaths that one visit was all that was needed. The following morning she missed the diarrhoea entirely).

You observed, doctor, when I was "taking the case," I

did not ask a question which was leading in character. Each time she answered she was forced to *say something*, and something which was descriptive of her own feelings and sensations which she alone could tell.

If, on such occasions, you get a remedy in your head which you think *ought* to be indicated, and keep stretching the shoe a little until you succeed in deceiving yourself in the delusion that *that* is the remedy, you will see on a little reflection that you biased your patient by the form of questions and made her say *what you wanted her to say*. So long as you pursue such a course as that you never will possess the "key to successful prescribing." Let the patient tell her own story in her own way and undisturbed until you have noted the outlines. Then review each heading one by one and draw out the *particular, unusual, uncommon, distinguishing* symptoms and modalities—better by this, and worse by that. Let it be your fixed purpose to secure a record of her symptoms, subjective and objective, *as they actually exist*. Then if you do not know the remedy which has produced a similar image, open your repertory (which should always be with you) and hunt it down. If you find, the image has not fully developed, *wait*. If it has been partly suppressed, give the most suitable antidote and bring the picture out again. *No man can prescribe successfully without the image of the patient's sickness*. Remember that.

Now, let us consult Hahnemann again about *dynamic power*. In paragraph 269, he says: "The homeopathic system of medicine develops for its use, to a hitherto unheard of degree, the spirit-like medicinal powers of the crude substances by means of a process peculiar to it." I quoted this paragraph in my previous letter, I think, but for a different purpose. I now wish to impress upon your mind by these words of the master, the fact that potentization was devised by homeopathy; that it is a part of the system, for the system and for those who practice it; that this process of potentization is *peculiar* to homeopathy; that it still lives for the specific purpose of developing "*the spirit-like medicinal powers of the crude substances*" to be used by homeopathic physicians. All of this is clearly stated in the paragraph just quoted. Now, to think of a professed homeopath using *tinctures*, is a travesty upon pure homeopathy!

The doctrine sometimes advanced by pseudo-homeopaths, that one can practice homeopathy by prescribing crude

substances, is here refuted. A tincture may be similar so far as the remedy is concerned, but the "mode of preparation of the remedy" is left out of the question. These pseudo-homeopaths take much pride in pointing to the fact that Hahnemann used low potencies, but they do not tell the people what he had to say of his practice in later years. Observe the following, doctor, and do not permit any one to mislead you on that ground: "The praise bestowed of late by some few homeopaths on the larger dose is owing to this: Either that they chose low dinamizations of the medicine to be administered, as I myself used to do twenty years ago, from not knowing any better, or that the medicines selected were not perfectly homeopathic." (*Organon*, p. 188, Foot-note).

It is not denied that the founder of homeopathy once used low potencies, but be it known to all men by the foregoing words from his own pen, that it was "*from not knowing any better.*" And that is your fix, doctor. When you find a serious case, one which imperatively demands a high development of power of the indicated medicine, you resort to the tinctures "*from not knowing any better.*" And you have lots of company! All so-called regulars and all who have identified themselves with what Hahnemann called "the new mongrel sect." They have never learned the lesson. But the highest conceptions of these men as physicians, is from a *materialistic* standpoint. They have long made it an effective fighting point to impress the public with the doctrine that drugs in a high development of power are inert because devoid of all killing power. This theory is based on the hypothesis that a medicine, in order to demonstrate its power to cure, must first display its power to kill! And by the impress of thousands of years the public has become quite well indoctrinated in this stupid heresy. The answer to all such, my dear doctor, is this: However poisonous a medicine may be in the beginning of the process of potentization, when its dynamis is liberated from its material elements and raised to a high development of power and it is thus prepared for homeopathic use, the killing power has been completely eliminated so that *no amount* of such potency can possibly kill. That part of a drug which *kills* never cures; and that part which *cures* never kills. But while thus getting rid of the killing power inherent in the crude substance of the drug, we have, by this potentizing process, uncovered and brought to the surface the invisible but *curative* power of that drug, namely,

its dynamis, the *drug-spirit*, which was hidden in its inner nature.

No physician can ever hope to be a successful homeopath, until he divests himself wholly and completely of all materialism and educates himself up to a full appreciation of the foregoing truth. Right here, doctor, would probably be a good place to say that your tendency to drift into old-school methods; to resort to tinctures when you are the most anxious to cure, is wholly due to your *materialism, skepticism, and ignorance*. You may call that plain talk, but if you are ever to be a true Hahnemannian physician, a "dynamic physician," somebody will have to tell you this secret, and possibly I can do as good a job when it comes to discharging this duty, as any one else. Doctor Kent had to tell me and had he failed of his duty I might have been an ignorant, blundering, materialistic *mongrel* to this day. As it is, I shall always venerate the man and cherish his memory!

Another argument: All must admit that Hahnemann taught the "spirit-like" action of drugs. Only the dynamis or *drug-spirit* can have a "spirit-like" power. It is "spirit-like" because it is *immaterial*. As already stated, in some acute and superficial diseases Nature is able to appropriate enough of the drug to cure when the crude is given; but it is the *spirit* of the drug which is appropriated even then. That is what I want you to understand. Hence, if it is the *drug-spirit* that must act upon the *spirit-like* vital force, why give the crude elements at all?

Again: Every drug has its distinct individuality; and that which individualizes it is its *spirit*, its *dynamis*, when brought in contact with the dynamis of the healthy human body. There is no test to which the crude elements of a drug can be put that will reveal the curative principle of that drug. Chemistry, nor microscope, nor any other device of man can accomplish this feat. The reason is the *curative principle* does not reside in the crude elements, but in the *drug-spirit*. *This* tested in the healthy human body reveals the curative principle hidden in the inner nature of each drug, and enables us to prescribe with scientific accuracy and to cure with a satisfying certainty—*secundum artem*.

Again I quote from Hahnemann: "From unbelief in the efficacy of the small and attenuated doses of medicine which I made known to the medical world after a thousand warning trials, as being the most efficient (distrusting my faithful

asservations and reasons), men prefer to endanger their patients for years longer with large and larger doses. Owing to this, they generally do not live to see the curative effects, even as was the case with myself before I attained this diminution of dose. The cause of this was that it was overlooked that these doses by their attenuation were all the more suitable for their homeopathic use, owing to the development of their dynamic power of operation." (*Preface to first edition, Chronic Diseases*). I told you in a previous letter, doctor, that Hahnemann's first motive in potentizing the drug was to diminish the dose; that the fact that this process developed the curative power of the drug was discovered afterward. Here he acknowledges this in plain words. He invented the process of potentization and by it "attained this diminution of dose;" but he says "it was *overlooked* that these doses by their attenuation were all the more suitable for their homeopathic use, owing to the development of their *dynamic power* of operation." That is the doctrine. First, diminution of dose; and second, *development of dynamic power*. First, eliminate the material elements of a drug that those parts of the human system not affected by disease may not be affected by the drug; and second, develop the dynamic power of the drug that it may be made to correspond to the patient's susceptibility and penetrate to the very innermost, reaching the vital force when it could not otherwise and thus extinguish disease and saving life when the same could not be accomplished by any other means. If any call in question this philosophy, surely it should not be one who professes to practice homeopathy; to have graduated in a homeopathic college; to have imbibed homeopathic doctrine, and to be a follower of Hahnemann.

If you can only bring yourself to understand and to appreciate, doctor, the double fact just quoted from Hahnemann that potentization diminishes the *material* and develops the *immaterial*, you will have no further trouble as to the preparation of medicines.

Now a few clinical cases out of my private practice may help you here.

1.—A boy of five years had prolapsus of the rectum more than one year. The rectum came down some three or four inches at each stool. The prolapsed rectum was covered with very dark blood. He broke out on the forehead in a hot sweat while straining at stool; and he had the "never-

get-done feeling." Stool consisted of mucous and blood. These are the *characteristics* which form the image of *mercurius vivius*. I gave him that remedy in the 3-m. potency until relieved. It held the rectum up two weeks. I repeated this experiment *three times*, but two weeks amelioration was the limit of that potency. I then gave him *one dose* of the same medicine in the 50-m. and the rectum never came down again—now more than three years. That certainly proves beyond a doubt that there is more dynamic power in the 50-m. than in the 3-m.

2.—A chronic case of ague in which the patient had chilled every day for more than a year, and for which a mongrel had been giving *natrum mur.*, 3-x and 6-x without effect, was permanently cured with three doses of *natrum mur.*, 200.

3.—A case of dysmenorrhoea in which the patient complained of a severe pain running from the pubic region to "the small of the back" and from which she had "suffered death," as she said, for more than twenty years, was permanently cured with *sabina*, c. m. potency.

4.—"Malarial chills" in a strong man of fifty: chilled about 9 a. m.; no thirst in any stage; wanted to be covered during chill *and also during the hot stage*; threw the covers off when sweating good; tongue coated a thick, dirty, yellowish-white. I gave him *one dose* of *nux. v.*, 1-m., and he never chilled again.

5.—Girl of twelve years, skin eruption. Arms, legs, chest and back almost raw; had to wrap her hands at night to prevent scratching the skin off; *always worse by the heat of the bed*. Her father had spent hundreds of dollars with "skin specialists" in an effort to cure her; and after three years scratching and old-school daubing, a few doses of sulphur, 6-M., cured her gently and permanently.

6.—Lady of 46 years had suffered more than twenty years with protruding haemorrhoids. She lived one and a half miles from the city. Said she: "for more than twenty years, every time I came to town in the buggy, the first thing on arriving was to hunt a water closet and put my piles back;" "piles throb like hammers pounding;" had "hot flashes;" must have door or window open at night, even in cool weather; complained that the neck-band of her dress and her collar annoyed her very much. *Lachesis*, 2-m., resulted in a complete cure. She can now ride in a buggy as far as she

wishes, but no piles come down. She has remained cured more than two years.

The dynamic power of drugs is the power that is stronger than disease. This understood and standing on this basic truth, your next greatest trouble will be *securing all the salient facts*; drawing out and building up the *image* in each individual sickness; constructing the antitype; finding the *likeness* which is to be matched.

There is one remarkable fact to which I wish to call your attention in this connection, namely, that all those doctors who reject the dynamic power of drugs; who either prescribe tincture or very low potencies, are always wanting to "assist" and "help" the prescribed remedy. On the other hand, those who rely upon the dynamis raised to a higher power of development do not consider that any "help" is needed. They have so much confidence in each prescription that they do not throw in another drug or two, a little ointment, a little liniment, a few suppositories, some local treatment, some electricity, the use of a vibrator, etc., etc. They know what the indicated remedy will do when given singly and alone in the proper potency and dose, and at proper intervals, and as masters of the healing art they do not molest its gentle and certain action by so-called "adjuvants"—old-school trash! Mark this difference, my dear doctor, and in your hours of inquiry and meditation ascertain, if possible, the reason for it.

And the echo said, "*The dynamic power of drugs is the power that is stronger than disease.*"

In my next letter I shall speak of *the proper dose*, and *the proper period for repeating the dose*.

Yours for Hahnemannian Homeopathy,

J. C. HOLLOWAY, M. D., Galesburg, Ill.



PERFORATION OF THE BOWEL IN TYPHOID FEVER.*

WILLIAM A. BOIES, M. D.



IN taking up the subject of perforation in typhoid fever, I wish to emphasize the importance of painstaking and careful study as regards its cause diagnosis and treatment.

Much has been said regarding the diet in typhoid. In my judgment herein lies the key note in the prevention of

the serious complications. There is far more danger in over feeding a typhoid patient than in underfeeding him. The old saying, "Feed a patient to keep up his strength" is too absurd to be considered. Metabolism is seriously interfered with and what ever food is given, should be of such a character as will be readily absorbed and cause as little irritation as possible.

Personally, I have used very little milk in my typhoid work. We often lose sight of the fact that there is as much solid matter in a pint of milk as there is in a lamb chop. Where the patient will tolerate it, I usually give some bland form of nourishment such as egg albumen, peptonoids, and in many cases, buttermilk, which I much prefer to sweet milk. Watch the stools for evidence of undigested food. In such a condition and especially if associated with diarrhoea and increased temperature, stop all nourishment for a few days and you will usually be gratified to see a change for the better.

Water and plenty of it should be given and right here let me urge upon you the importance of directing that it be given it stated quantities and at stated intervals. Many typhoid patients do not call for water and if left to their own desires this important adjunct in treatment may be neglected. Many advocate the complete exclusion of food. Some will tolerate it and do well. Others, particularly if they be anæmic and poorly nourished will need in my judgment some form of nourishment and in this class of cases the physician's tact and judgment are put to the test. Given a case where the nutrition at the onset is far below the normal standard, an exclusion of food will sometimes favor perforation by predisposing to a poorly nourished intestinal wall.

The frequent tepid sponge will assist materially in reducing arterial tension and promoting the general welfare of the patient. If in spite of care and watchfulness we have the serious complications, we can at least feel that they were due to no fault of ours.

If we are confronted with perforation, let me again urge upon you the great importance of early diagnosis. In a ser-

*Read before Kentucky State Homeopathic Society, Mammoth Cave, Ky., Meeting of 1910.

ious case explain the symptoms to the nurse and advise her to communicate with you at once in the event of alarming symptoms. How shall we recognize the dreaded perforation? One of the most constant symptoms is sudden, sharp and many times agonizing pain in the abdomen. Together with it we usually find some variation in the pulse and temperature. The pulse becomes more rapid and often somewhat thready. The temperature after an initial rise will drop several degrees, often below normal. If the tympany has not been excessive we will often find obliteration of liver dullness. The face looks pinched. More or less sweating is apt to be present and we have the picture of collapse. At this stage mark out your line of treatment and act quickly. With the increase in pulse rate, we usually find increase in respiration. There may be hiccough, nausea and vomiting.

Now, as to the treatment. When such a complication is feared, get in touch with some surgeon and advise him of the possibilities. With modern surgical technique the percentage of recoveries follow—operation for perforation are sufficient to warrant me in advising immediate operation, provided the patient can have the advantage of modern surgical methods. In the event too much time has elapsed and surgical assistance is not available, the only possible chance the patient has is in the indicated remedy, which should be given at frequent intervals and the immediate suspension of all peristalsis by means of small doses of morphine, given of course hypodermically.

About a year ago, I was treating a young lady who was having a severe attack of typhoid fever. In the fourth week, her temperature had been running maximum 105, pulse 110, tympanitis not excessive. In the early part of the week she had a severe hemorrhage. Several days following, the nurse phoned me that the patient had complained of sudden, sharp pain in the ileo-cecal region, her pulse was 130, temperature 97. I was soon at her bedside and found the symptoms as described and, a complete obliteration of liver dullness. I called counsel and after going over the condition thoroughly we decided not to operate owing to the surroundings. We gave her carbo. veg. 200 and instructed the nurse to give her the H. M. C. combination as often as was necessary to control peristalsis. We gave the smallest amount possible to obtain the desired effect. Within ten hours her pulse was 160 and hardly perceptible; her delirium was furious and

the tympanitis was excessive. To make a long story short, after a rather tedious convalescence, she finally recovered and is perfectly well today.

Notwithstanding the few recoveries without operation, I unhesitatingly advise operation, with proper surgical technique and early diagnosis.

Knoxville, Tenn.



A PROVING AND AN AGGRAVATION.

IN THE PRACTICE of medicine it is well to observe the effects of different foods and atmospheric changes on our patients. Many lessons of great value are learned in this manner.

I have a patient, tall, well-nourished, mixed temperament, very delicate, of sensitive nervous system, in her menopause, and suffering from a varicose ulcer on left lower limb. This patient has made very commendable progress in every way, and is so deeply impressed with the effects of food and medicine that she has made careful study of these things as they affect her individually.

One day while relating her symptoms she asked if certain foods would cause functional changes in certain organs of the body. Being assured that such was the case she related repeated provings of asparagus. Let us hear what she says voluntarily.

“Doctor, I have never been able to eat asparagus as other people do for the reason that it makes me sick. Years ago I discovered very painful conditions when I ate asparagus, and later determined to watch it more carefully. One year ago I ate three meals of asparagus on three successive days and noted the results as before with this difference—this time they seemed more intense than before.

My symptoms came on almost immediately and continued in decreasing severity during the following summer months. I was first taken with severe irritation in the bladder which amounted to burning pains with very frequent desire to urinate. Urinating did not relieve to any great extent the sense of irritation nor the frequency of desire, until nearly three weeks after eating the asparagus. This irritation continued, noticeably, all summer. I was also annoyed

with very much nervous irritability, which affected me mentally as well as physically. I was sensitive, disposed to get cross—irritable at the slightest offense, which is contrary to my normal condition. I had a constant bad feeling (patient could not define this more than a *bad feeling*) all summer."

Since this she has eaten none of the vegetable, nor has she had any more of the symptoms she has mentioned.

The other case is that of a lady, blonde, well nourished, and through the menopause. This lady has been a great sufferer from headaches. One brother-in-law is a physician and two brothers-in-law are druggists and between them the poor woman had a abundance of headache powders.

She had at all times, much dyspnoea, but more particularly during a headache and when taking headache powders. There was much gastric disturbance, distension of the stomach, and abdomen, cyanotic appearance of the face, much pallor in the morning with great lassitude at all times.

The symptoms as presented were not similar to any one remedy, because of the inexcusable confusions caused by palliations. Months of hard work, and different remedies were necessary to clear the case sufficiently to get a picture one might be able to recognize.

This picture though somewhat dim and blurred, was that of *carbo-veg*. A single dose of the 10,000-potency was administered, and in twenty-four hours the most violent aggravations took place. This consisted of the return of an old headache, but shorter in duration than formerly, violent distention of stomach and abdomen for some hours followed by severe nausea and vomiting. The vomiting was composed largely of a yellowish-green substance and "O! so bitter;" cold clammy skin with intolerance of heat but no cardiac disturbance whatever. The severe aggravation continued for nearly twelve hours, then slowly subsided, and since then my good patient has felt better than for years, despite increasing age and profuse "doping" in the past.

The point at issue is this—the more nearly similar the remedy is to the disease the more speedy and certain the recovery from disease.

It is not necessary to add by way of hortation, the imperative obligation, on every physician, of knowing and practicing this immutable law of similars.

G. E. DIENST.

81 Fox St., Aurora, Ill., May 21, '10.



SPECIAL ARTICLES



THE DUTY OF THE PHYSICIAN.*

"The duty of the physician is to restore health to the sick."—*Organon*, paragraph 1.

"He is likewise a preserver of health if he knows the things that derange health and cause disorder and how to remove them from persons in health."—*Organon*, paragraph 4.

"* * * The ascertainable physical constitution of the patient, his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual functions, etc., are to be taken into consideration."—*Organon*, paragraph 5.

"The individualizing examination of a case of disorder demands of the physician nothing but freedom from prejudice and sound senses, attention in observing, and fidelity in tracing the picture of disorder."—*Organon*, paragraph 83.

"When a person falls ill, it is only the spiritual self-acting vital force, everywhere present in his organism, that is primarily deranged, deranged to such an abnormal state that it can furnish the organism with its disagreeable sensations and incline it to the irregular processes which we call disease."—*Organon*, paragraph 11.



THESE PERCEPTIONS which were expressed by Hahnemann nearly 100 years ago are being perceived and expressed in modern language in all countries to-day. As the truth is perceived by various persons, it controls them more or less strongly and induces them to attempt to apply the truth according to their previous training, in cults and systems more or less one-sided (unbalanced). Thus religious enthusiasm, mental healing, personal influence of hypnotic character are employed, all in the effort to restore health, while the medical profession is aroused in alarm to contemplate the possibility of being forced out of line from lack of material for practice.

Never, in the course of all history, was it more essential for the physician, the restorer and preserver of health, to maintain an unprejudiced mind, sound understanding and attentive observation and faithful discrimination in judging the elements of disorder and their relation to each other. The

*Read before the Hahnemann Round Table.

time has passed when the study of nature and intellectual subjects is confined to the professions of clergy, law and medicine. The general participation in educational advantages by the majority of people is now counted simple duty for preparation for life in modern times.

As a consequence of this condition of affairs, there is common discussion of causes and effects, repetition of other people's opinions and tendency to formulate all varieties of individual opinions on subjects related to life and health. Unfortunately these discussions are not all developed along lines of rational thought and the conclusions reached are not consistent with demonstrable truth. In the midst of all this formulating of theories, in college and out of college, the physician must wisely perceive and test everything with an unprejudiced, rational mind and be observing of, and attentive to, the many, complex, influences which disturb the harmony of health in modern times.

A Peculiar Physician.

Hahnemann was a peculiar physician to the people of his time. His methods of investigation, the emphasis he laid upon items considered unimportant by others, the form and manner of administering remedies and perhaps, most of all the cures he accomplished, distinguished him among all the professional contemporaries and no less to the minds of his patients and their friends. He was peculiar because he was a master. He was a master investigator, a master thinker, a master in perception, a master prescriber, a master student in all lines.

To the present time, every true follower of Hahnemann's methods, every true disciple of Homeopathy applying the doctrines faithfully, is a peculiar physician. "You are different from other doctors" is not uncommonly heard by each one of his disciples. The patients of these physicians are similarly considered peculiar because they do not follow the popular lines in use of all sorts of makeshifts and applications in occasions of suffering or disorder.

The rational healer must have a reason for everything used, for every step taken and every direction given, for everything prescribed and everything prohibited. There must be always a reason in the mind of the physician though the reason may not always be communicated to those concerned. This constitutes a peculiarity, for too frequently among those claiming to direct in lines of health, no better reason is available for directions given than that some one else has done the thing or it happens to be the most convenient.

The disciples of Hahnemann to-day are peculiar also in the results obtained in their work. In proportion to the faithfulness with which the fundamental principles of the Master teacher are employed shall they attain similar success in guiding their patients to health. In proportion to the neglect in these things shall they be disappointed and discouraged.

Relation of Physician and Patient.

Health is universally acceded to be the greatest attainable wealth; a priceless treasure which makes possible almost all desirable attainments, without which nothing else is quite as pleasing or as valuable. If we but have our health, what could we not undertake, what would we not relinquish? If we have not our health, what is worth while? So many forms of disorder, indeed, the most distressing ones, are of a nature that are commonly considered strictly personal; disturbances which the patients or their friends are reluctant to admit or discuss. Mental disturbances, disturbances of sexual functions and specific poisons we are reluctant to disclose.

For this reason, it is not strange that patients desire not only a reliable physician but one who can be trusted with their confidence and respect. Especially in such cases one desires gentle, pure minded, circumspect consideration, wise treatment and most reliable directions for care. In these, as in all other cases, the husband, wife, parent or child would seek to entrust the most precious treasure, the health of loved ones, to one of unprejudiced mind, sound senses and faithful and attentive in following the course of the disorder. Here the most intimate relations must be disclosed that the key may be found to a solution of the problems and the relation of the patient and physician is unique.

Because in some instances of physical disorder, the intellectual, social and moral disturbances most clearly distinguish the case, because the occupation, mode of living and habits oftentimes occasion the disorders present, because the domestic and social relations and sexual functions sometimes occasion and sometimes reveal the physical disturbances, all these things must be taken into consideration. It is the duty of the physician to know what part these things have in the patients' condition, that the treatment may be properly administered and also that proper directions may be carefully advised to assist in restoration to health.

The physician should be familiar with the influences exerted in our present day civilization, emotional, mental, nutritive and reflex influences that the prescription which is found indicated may be aided in its power by harmonious life while the obstacles to recovery shall be removed. Adjuvants, as narcotics or suppressive drugs, applications and stimulants are not admitted by the prescriber of homeopathic remedies but obedience to hygienic laws, physical, mental and emotional, is one requirement that cannot be too strongly emphasized.

Service to the Patient.

As it is the duty of the physician to heal the sick, it is not out of place to consider the nature of the service which is to be rendered to those in need. *Physician* is derived from a word signifying a *revealer of nature, a philosopher*. This idea is carried into the present day duties of the profession. We must reveal the laws of nature in health and its disturbance that the children of men shall no more offend and shall repair the offenses previously committed.

When the patient applies for removal of some disfiguring eruption, that appeal is only an introduction of the physician to the patient's real needs. The fact of internal disorder which is expressed by the eruption is clear to the physician and that disorder is the aim of attention. With the attention of the patient directed toward the true condition of health, the desire for that condition is made paramount to the wish merely for removal of superficial blemishes.

When the physician is requested to quiet a restless sufferer it cannot be a satisfaction to dull the sensitive nerves to the functional cries for help, permitting the ravages of unrecognized disorder to continue. Duty here demands that the true nature of the *occasion* of restlessness and suffering be revealed and these be removed by dispelling the occasion

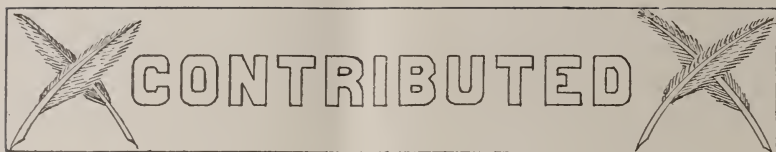
within. It may be that the patient requests a diagnosis of groups of symptoms or abnormal tissue changes. The physician does not stop at a diagnosis of tumor or inflammation. This occasion of the consultation affords an opportunity for the physician to discover what disorder in the patient produced these conditions and what remedies will restore order. It may be demonstrated that the particular thing for which the consultation was made is a safeguard to the system or a revealer of more serious disturbances.

It is further part of the duty of the physician to impress upon those to whom opportunity opens the doorway, the relation of disorder and symptoms, the difference between curative and suppressive treatment, the wisdom and necessity of reference to books in selecting remedies, the importance of careful reporting of symptoms in the course of treatment, the value of the individual selection of remedies and evil of using drugs or other treatments, aimed at disorders by name. It is the duty of the revealer of nature to lead the people to perceive that when the patient is in the care of one, who is responsible for health of that individual, all disorders of whatever part be reported and referred to that physician. That the physician will restore health must include the idea that he can care for babies, children and adults, and comprehends ear troubles, stomach troubles and pelvic organs, avoiding the distribution of the patient among many specialists.

Instruction of the patient has been frequently discussed but these considerations must emphasize the absolute necessity of including instruction to patients, attendants and all liable to need medical attention, for without co-operation restoration to health would many times be impossible. Furthermore, maintenance of health and of health restored, must depend upon the action of the individual concerned when the physician has not oversight. Complete fulfilment of this duty must include the continuing of the good attained while the physician is in charge, that the good may progress and be further transmitted.

The ideal which the physician is to set before the patients and friends will be accepted by them and respected, in proportion as the physician individually presents a character clean, pure and lofty. The example will always enforce the value of the precept. The character of the physician must precede the faithful performance of duty.

Harrisburg, Pennsylvania.



DON'T SIZZLE!

"Sizzle!" To Shivel; With a Hissing Sound.



MEMBERS OF THE AMERICAN INSTITUTE OF HOMEOPATHY, have you ever crossed the plains in July?

If you have you will know what I mean.
If you have not, DON'T!

It has been my fortune to have crossed the continent sixteen times.

I have traveled the deserts and alkali plains of New Mexico and Arizona on the Southern Pacific with the thermometer registering 126 degrees in the shade in Yuma.

To avoid this unbearable heat I have returned on the Santa Fe with it registering 115 in the shade at The Needles.

On both routes in July I have known the windows of sleepers and coaches to be shut down tight, curtains drawn and ventilators closed, the passengers all but suffocating for a time, in efforts to keep out the dust and sands from summer simoons blown from long distances beyond where it is possible to fight them with oil.

There are great stretches of monotonous prairie and alkali plain for every scintilla of scenery. No matter how delightful the more southerly lines in winter, when they are unquestionably preferable in many respects to more northerly routes at that season, in summer at times they are awful!

The Transportation Committee of the Institute took this into serious account in selecting an official route for the coming California meeting. At best there are hot stretches in summer on almost every line of railway in the country. But there are few, if any, hotter or more disagreeable in July than the southern lines to California.

Therefore, bearing in mind the general discomfort experienced at certain disagreeably hot meetings of the Institute, the committee decided against an inordinately hot itinerary, against considerable pressure, most of it unfairly brought, in its duty of providing a comfortable journey for the members to the Coast. It has chosen the most delightful route across the continent, against one of the most uncomfortable in summer. At one time it looked as if it might have to accept the disagreeable route, whether or no, but, fortunately, it has been relieved from that distressing necessity and is able to put the Institute across the Transcontinental Divide in comfort, security and pleasure.

It is not necessary to sizzle!

The "American Institute of Homeopathy Special"—its own official train—will leave Chicago via the Burlington-Colorado Midland-San Pedro-Salt Lake route on Monday, July 4th, at 5:45 p. m. Already, six weeks ahead of starting time, enough reservations have been recorded to guarantee one splendid full train. This does not look like the appeal, therefore, of a "lost cause," as some would make it appear. It now looks as if we will have to have two Institute specials instead of one.

The official train will be composed of standard Pullmans, of the very latest and most sanitary designs, a combination sleeper and library observation car, a compartment sleeper, a baggage car and our own diner. If there are two trains the second will be made up as is the first. We have demanded and been assured the very best product of the Pullman shops.

By taking our own diners the antiquated "twenty minutes for gorging" of rival lines at frontier eating stations will be avoided.

By having selected the Colorado Midland and Denver & Rio Grande route from Denver to Salt Lake, the Institute will be given a journey across the famous "Transcontinental Divide" at its highest railway points, among the loftiest

peaks, the greatest number of snow-caps, the wildest gorges and the most magnificent vistas of the Rockies, instead of sweltering on monotonous prairies fanned by burning winds under arid skies beclouded only by intolerable storms of sand and alkali dust. The altitudes via the "Official Route" more than double in average those of any opposing route. It is sheer nonsense and a play upon credulity to suggest that a journey across the arid part of the continent is as comfortable as an itinerary that encompasses the summit of the Rockies, with altitudes of as high as 11,000 feet, an assumption quite as correct as that because Flagstaff, a government signal station, which was the coldest point in the United States on January 4th, is somewhat cooler than the hottest points on the more northerly routes, the entire road is a near approach to the north pole. Anyone who thinks for himself needs no elaborate argument to convince him that of two routes the most northerly and the one attaining the highest altitudes, the one that crosses the divide among the mountains, with magnificent ranges, beautiful vistas and jungfrau snow-caps on all sides is by far a preferable route for July than a road that crosses hundreds upon hundreds of miles of dreary and arid plain, for which not even one fair vista, at from twenty to twenty-five dollars, all told, of extra expense, will in any considerable degree compensate.

You don't have to sizzle by going the official way.

The officers of the Institute are booked for the official train.

It will be met at the California line by the California delegation with a genuine California welcome.

Brief stops will be made at the most interesting and important cities along the line; none protracted.

At Denver the whole profession will greet us, and an inexpensive side trip among the mountains, from 11,600 to 14,000 feet above the sea, is a part of the program for those who care to take it at an extra expense of from \$3.00 to \$4.00.

The propogandistic features of the itinerary will be under supervision of Dr. George Royal, chairman of the Medical Council.

From Salt Lake the itinerary will be via the "San Pedro Line," which for a good part of its mileage offers scenic attractions of the greatest charm, which should not be missed. The road is fully reconstructed, washouts never occur in that section in summer, and all necessary provision has been made for our special against anything and everything that can be foreseen.

Denver, Colorado Springs and Salt Lake are a trio of American cities who want the Institute—and we want them!

Because of the unexpectedly large advance recordings for reservations farther applications should be made to the secretary of the Institute's transportation committee, Dr. T. E. Costain, 42 Madison Street, Chicago, without delay. The Pullman Company requires time in order to be sure it can guarantee additional equipment of the highest class.

Members of the committee will be on hand at the Burlington offices and station to see that the Institute is taken care of.

The Burlington officials are also taking a lively personal interest in the success of the itinerary and will have a special force detailed for the duty of welcoming us and starting the Institute off on its transcontinental journey aright.

The official itinerary should be and doubtless will be one continual source of delight and profit. All the members are urged to go via the Institute's own official trains.

Cordially,

C. E. FISHER, *Chairman.*

N. B.—Whatever you do, don't "shrivel with a hissing sound."

It is best to consult local ticket agents for summer excursion rates to the American Institute of Homeopathy meeting at Pasadena, and to select return route at the same time, in order to take advantage of the reduced fares from starting point to return. Sales dates for the Institute are July 1st to 8th inclusive, tickets purchasable everywhere. Make the starting date from Chicago, July 4th. From the East the Pennsylvania Road discharges its passengers in the Union Station, from which the Burlington starts.

Tickets may be purchased to San Francisco at the same price as for the meeting, via the official route to Los Angeles.



EDITORIAL SECTION



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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.



ENVER HEADQUARTERS A. I. H. EN-ROUTE PASADENA. We are pleased to print herewith a cut of the Brown Palace Hotel, Denver, Colorado, which has been selected headquarters of American Institute delegates during their sojourn in this city July 6th, *en route* the Pasadena meeting. Arrangements have been made with the management of this world-famous hostelry whereby such members of the Institute as may feel disposed to take advantage of the Denver profession's hospitality on this occasion, will be made to feel entirely at home. In addition to the public reception rooms, there will be two suites provided: one for the ladies and a similar space for the gentlemen, where all will be welcome; personal effects taken charge of; opportunity afforded for toilet changes and other necessary attention which will, no doubt, be appreciated by all. Each suite will be in charge of a hotel attendant, and un-



Headquarters A. I. H., Denver.

usual effort made to see that all necessary wants of our guests be supplied.

It is scarcely necessary THE CRITIQUE say much regarding the headquarters inasmuch as most everyone has some idea of the elegance of the Brown Palace Hotel of Denver. We wish to say however, at the present time artisans and artists are at work in the building, which is being completely renovated and refurnished and, unless some unforeseen occurrence supervenes, American Institute members will be among the first to participate in the new surroundings of this new-old establishment during their short stay in Denver.

The house is under new management and from what little experience we have had with the same it certainly seems "that a kindly Providence had been at the helm" as our California contemporary remarks, inasmuch as the new management appears unusually desirous of doing something whereby Denver and Denver organizations may derive benefits. The committee feel that in the securing of concessions from the "Brown" they made a ten strike which will redound to the credit of Denver and Denver homeopaths.



FIELD SECRETARY FOR THE INSTITUTE. At the present time the American Institute of Homeopathy is supposed to have a strong supporter in the present "Field Secretary of the Medical Council," but just whether this arrangement is of any real value to the afore-said association or not is a question.

While THE CRITIQUE may not hear of everything that happens in homeopathic circles, it has yet to learn of anything having been accomplished by the present incumbent of this position, and as Institute matters should be under control of the Institute, might it not be a move in the right direction for the A. I. H. at this next meeting, to dispense the services of the "Field Secretary of the Medical Council" and substitute instead a "Field Secretary of the American Institute of Homeopathy?"

We believe there are any number of men in the profession, from their knowledge of the requirements and possible legal obstacles which it will be necessary we surmount during the next few years, who are amply able to attend to these duties, and at the same time spread broadcast great joy to the everlasting honor and benefit of homeopathy.

We hope Dr. Ward will take this matter up in his "address," and now we are on this subject, let us see how this would look: "Dr. Arndt, San Francisco, Cal., Field Secretary, *American Institute of Homceopathy.*"



ALDERMANIC ORDINANCE NO. 49.—While the great majority of our readers may be ignorant of any such document, we will say the object of the introduction of the foregoing ordinance has to do, more than that referring to any other public safeguard, with the maintaining of a city upon the highest plane of desirability, insofar as a residence place is concerned, by adding to the health and consequent happiness of its inhabitants, inasmuch as it provides for the disposal of sewer discharges of the City and County of Denver in a sanitary and up-to-date manner.

Added to this it will provide the means of taking what has heretofore been looked upon and treated as absolutely waste products and converting them into useful and beneficial substances, at the same time placing them at the disposal of the public for practical purposes, more particularly those pertaining to the promotion of agriculture. Furthermore it would abate an abominable nuisance in certain sections of the city, thus minimizing a menace to the health of the entire city, which, instead of lessening each day under so-called strictly sanitary surroundings, is magnified in a proportionately alarming manner with the increase in our population and prosperity.

It is only a question of a few years until the city will be brought face to face with the proposition of providing a system whereby the offal be conveyed far beyond the city and county limits and no one is better aware of this fact than the city authorities themselves, consequently now that a reliable organization makes a proposition to protect the city in every way and to do this work in a highly sanitary manner, thus abating an alarming menace to health and a nuisance which has been maintained for years by the antiquated system of dumping the contents of Denver's sewers into the open Platte river at several points within the city limits, it is hoped those in authority will have foresight and fearlessness sufficient to take advantage of the offer made by the Denver Irrigation and Fertilizer Company.

The objects for which the company was organized were "*To file upon and appropriate the water and waste water which shall be from time to time discharged by the sewers of the City of Denver to irrigation and beneficial uses; to gather the discharges of the sewers of the City of Denver into a large sanitary sewer or pipe line and carry the same beyond the city limits of the City of Denver; to filter the water and settle the solids contained in the discharge of the sewers of the City of Denver, and apply the filtered water to agricultural and irrigation purposes; and to use and apply the solids after settling and filtering, for fertilizing purposes.*"

Aristotle, several hundred years before the Christian Era, wrote very learnedly concerning "The Necessity of Good Water," and in this topic of every day concernment the ancients were far in advance of later times. This famous Greek philosopher said: "Since every attention should be given to the health of the inhabitants, it is of great importance that the city should have a good situation; and next, that the inhabitants should have good water to drink; and this must not be regarded as a matter of secondary moment." No doubt had the ancients been as far advanced in sanitary science as they were upon the question of pure water, we would have something from the pen of this illustrious individual upon a subject which is of vital importance to the health and happiness of every large community.

Denver has the situation and the water, but Denver's treatment of its sewage is far behind her requirements, and if she expects to maintain her high standing as a health center with an exceedingly low mortality rate, it is only a question of a short time until the present sewer system of the city, or at least that portion which deals with the removal of sewer discharges, be brought up to the highest mark of modern perfection.

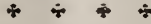
It is to be hoped this aldermanic bill will not be juggled and side-tracked by a lot of tricky politicians or that the authorities be over-influenced by certain newspapers or the claims of the newly created Water Commission, inasmuch as this is a matter which concerns the entire city and is one that cannot be acted upon too promptly, nor can it be acted upon otherwise than in a manner proposed by the Denver Irrigation and Fertilizer Company, or some other organization, having for its object, among other things, the conservation of public health and safety.

MISCELLANEOUS

Several interesting communications crowded out of this issue for want of space.



Dr. Fisher has another to-the-point article in this issue regarding the official train and route. It is worth reading.



Those who find the cover of their *CRITIQUE* loose when received will please advise the editor. We have had some complaint concerning this condition.



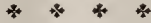
Found—A homeopathic medicine case containing fifty-four vials. Same may be had by applying to Dr. J. H. Morrow, 67 Barth Block, Denver, Colo.



Dr. C. W. Enos returned to Denver the latter part of May, from a short visit to his old home in Illinois, where he attended the funeral of his father, who died at the ripe old age of ninety-five years.



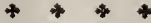
Among the foreign subscriptions received this month was the following: "Herren Franz Leo & Co., Hofbuchhandlung, Wein 1. Opernring, Austria." The request for back numbers, we regret to say, *in all cases*, will not be undertaken.



Dr. J. H. Kellogg, Battle Creek sanitarium boomer, succeeds in securing space in the secular press with his customary ease, by declaring "if the increase of insanity continues at its present rate we shall all be insane in 265 years." Oh, grape nuts!



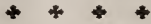
The International Hahnemannian association met in Kansas City the 27th, 28th and 29th of last month. The change in time of meeting was made to accommodate members of A. I. H. who wished to attend the American Institute at Pasadena.



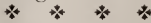
Dr. Wm. R. Welch left Denver the first of last month for a protracted trip abroad. We are unable to say just where the doctor will sojourn the longest, but as he has promised *THE CRITIQUE* an occasional communication we feel he will not become lost entirely.



Dr. Clinton Enos returned to Denver, after attending the funeral of his father at Jerseyville, Ill., the latter part of May. He stopped off at Alton, Illinois, to visit a brother who is a prominent physician of that city and while there operated on a patient for gall stones. Dr. Enos is fast acquiring considerable prominence as a surgeon.



Among the Denver doctors who were arranging to attend the California meeting of the A. I. H. this month when this was written, were Doctors J. B. Brown, C. D. Fisher, Ella Griffith, E. B. Swerdfeger, Grant S. Peck, and Dr. S. S. Smythe. No doubt this number will be largely augmented by the time everything is in readiness to start.

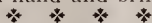


In recent years great advances have been made in the art of printing, not only in color effects but in artistic typography and improved methods of illustration. The railroads are the quickest to take advantage of the newest and the most up-to-date processes in artistic printing. A particularly fine example of the highest class of illustrated pamphlet work is

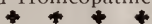
"A Glimpse of Utah," just issued by the Passenger Department of the Denver and Rio Grande Railroad. The text is by the brilliant writer, Judge E. F. Colborn, of Salt Lake City, and the excellent illustrations picture the many unique features of that interesting state, Utah.



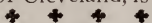
Homeopathic physicians of the City of Denver, of the entire State of Colorado, for that matter, are reminded of the reception to be tendered A. I. H. members *en route* the Pasadena meeting, July 6th. This function will be held at the Brown Palace Hotel from 2 to 3 o'clock p. m., Wednesday, July 6th, 1910. Be on hand and bring your wife and friends.



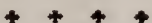
The Cleveland Homeopathy Medical College is out for blood and business. This institution is after fifty freshmen for the class of 1910-11, and from the manner in which they are going after things we are inclined to believe their wants will be realized. What makes the matter that much more certain is the fact of the promotors being of that opinion too. Success to the Cleveland Homeopathic.



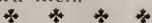
The *Cleveland Medical and Surgical Reporter* already announces an aspirant for A. I. H. honors. It proposes the name of Dr. G. J. Jones, Cleveland, Ohio, for president of the Institute next year. That listens good to THE CRITIQUE, inasmuch as the *Reporter* remarks: "Next year the meeting will be held in the East and we will require another good man for president. Dr. G. J. Jones, of Cleveland, is the man." So say we, all of us.



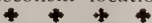
Dr. George Phillips, Kansas City Homeopathic College, '09, has accepted the position of interne at the Park Avenue Hospital, assuming his duties thereat June 1st. Dr. Phillips comes highly recommended and will have charge of Dr. Wm. R. Welch's practice during that gentleman's absence the forthcoming year. THE CRITIQUE extends Dr. Phillips a most cordial welcome.



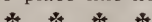
Dr. C. E. Fisher, the energetic chairman of the Transportation Committee, A. I. H., will relinquish his position in Wyoming the first of this month and after his return from the California meeting, will, no doubt, harvest his 200 acres near Sterling, Colorado. If Fisher ever undertakes the latter job and goes at it like he does other important matters, there'll be no need for a call for extra men.



Dr. Paul B. Wallace, surgeon, Homeopathic physician, osteopath, Canon City, Colorado, who has been sojourning in Wisconsin during the past year, paid a pleasant visit to THE CRITIQUE on his way to Canon, the fore part of last month. He has been doing work in Grand Rapids, Wis., as stated above, and we are pleased to say has been unusually successful. The many friends of Dr. C. S. Rowley hereabouts will be pleased to learn he is doing nicely in his Wisconsin location.

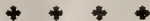


Miss Mary Anderson, daughter of the business manager, returned to Denver for the summer the 18th of last month, after a successful and highly enjoyed attendance at Bradford Seminary for young ladies, situated near Boston. "Bradford" is one of the oldest institutions of the kind in the United States, having been in operation over one hundred years—one hundred and seven, to be accurate. Miss Mary appreciates the fact, however, "there is no place like home."



Dr. J. C. Irvine, a prominent homeopathic physician of Denver, accompanied by his wife, left this city the 18th of last month for a somewhat protracted trip overland in their Olds touring car. During their trip they anticipate short stops in Omaha, Chicago, several points in Indiana, Ohio, Pennsylvania and New York. They will round out the trip with a jaunt

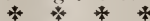
along the coast of Maine and will return to Denver in the fall. THE CRITIQUE congratulates the doctor and wife, on the possibilities for so much pleasure and trusts their highest expectations in this direction will be more than realized.



"St. Louis, June 9.—Tongues were a-wagging today over the 'clinic' held by the members of the American Medical association at a stag banquet last night, when scientific curiosity regarding the human form is said to have got the better of the physicians when a 'bare-foot' dancer performed for them.

"A local paper says the dancer removed enough clothing during the dance so that her feet were not lonesome, much to the delight of the physicians, who applauded wildly. The house of delegates today began an investigation of the affair."—*Rocky Mountain News*.

It is to be devoutly hoped the Pasadena entertainers will not suggest any such form of hilarity during the A. I. H. meeting this month. Of course should anything of the sort take place, please see that the newspapers are "fixed" against featuring the event in the news items.



Mr. Belvedere Brooks, president of the Western Union Telegraph Company, headquarters New York City, was a visitor in Denver the latter part of May. THE CRITIQUE takes pleasure in recording a pleasant visit from this capable and courteous gentleman who began service with the company over which he now has almost complete control, as a messenger boy. That old gag about the messenger boy standing still when in search of anything, does not, evidently, apply to Mr. Brooks.



The following communication from Dr. Eli G. Jones, published in a recent issue of the Burlington (N. J.), *Enterprise*, shows the right spirit *re* medical legislation. Leave it to the "dear people" to correct abuses proposed by the A. M. A. and other agitators:

"In regard to Governor Fort's action in vetoing the osteopath bill, I have been surprised that any medical man or body of medical men should presume to dictate to the governor of the state what he shall do or what he shall not do. I am glad we have a governor who can use his own brains, instead of having to depend upon someone else. We are told that medical laws are for the 'protection of the people,' when the truth of the matter is that there has never been an instance on record where the people have ever asked for protection. It is the doctors of the old school that want protection. The electics and homeopaths have never asked for any medical laws to protect them, for the simple reason that they do not fear competition from their brother physicians.

"Any law on the statute books of a state making it a crime to heal the sick is a disgrace to any state. It is taking away the divine right of the people to choose their own physician when they are sick, whether it be an osteopath, mental science, Christian science, or any form of healing. It may interest your readers to know that there are in the United States today 30,000 practitioners of some form of drugless healing, and they are patronized by 17,600,000 of our people. At the rate drugless healing has increased within the past ten years, in 1920 there will be 160,000 medical doctors who will only have 33,000,000 people to depend upon for their bread and butter. As a profession we profess to be able to heal the sick, and we have simply got to 'make good' or see the drugless healers grow and fatten on our failures. Medical laws have been the best things to boom drugless healing that possibly could have been devised by the old school.

"It is a well-known law in horticulture that with some shrubs the more you stir the dirt around them the faster they grow. Let them alone and they will wither and die. When will the doctors learn wisdom and let these drugless healers alone."

CHICAGO LETTER.

Dr. F. H. Lovell, Hahn. '09, is now located in New York City, doing post-graduate work.

Dr. Clyde Van Patten, Hahn. '11, has a summer hospital appointment as interne at Rochester, N. J.

The catalogue of Hering Medical College for 1910-11 is now out, with several changes from the last issue.

The graduating exercises for the nurses of the Chicago Baptist Hospital were held on Tuesday evening, June 7th.

Dr. I. H. Lockwood, Hahn. '09, was a recent Chicago visitor, after spending a year as interne in Flower Hospital, New York City.

On May 18th the Alpha Sigma fraternity gave a very enjoyable dinner at the Warner Hotel, for their members of the class of 1910.

Dr. W. V. Hedges, Hahn. '07, Frankfort, Ill., has recently been a patient in Hahnemann Hospital undergoing an operation for appendicitis.

Dr. Mark Mizener, Hahn. '09, after spending a year as interne at Metropolitan Hospital of New York, has returned to Chicago for a short stay. The doctor is looking for a Western location.

Dr. H. C. H. Shroeder, Hahn. '09, was a recent visitor in Chicago, after spending a year in Metropolitan Hospital, New York. The doctor speaks highly of the experience obtained there. He expects to locate in Texas.

The graduating exercises of Hering Medical College, class of 1910, were held Thursday, June 2, in Assembly Hall of the Auditorium Building; twelve members of the class receiving diplomas. A banquet was held at the Great Northern Hotel.

At the annual meeting of the Regular Homeopathic Medical Society held June 7th, the following officers were elected:

President, DR. J. B. S. KING.

Vice-President and Treasurer, DR. E. O. RICHBERG.

Secretary, DR. E. B. BECKWITH.

The graduation exercises of Hahnemann Medical College were held Thursday, May 26, thirty-one members of the class of 1910 receiving diplomas. Twenty-four members of the class have received hospital appointments, as follows:

H. C. Boyer, Metropolitan Hospital, N. Y.

A. E. Gilster, Metropolitan Hospital, N. Y.

W. L. Meng, Metropolitan Hospital, N. Y.

T. E. Ellison, Metropolitan Hospital, N. Y.

A. M. Azman, Metropolitan Hospital, N. Y.

F. W. Sigmund, Metropolitan Hospital, N. Y.

H. P. Knapp, Flower Hospital, N. Y.

A. H. Ahrens, Flower Hospital, N. Y.

J. H. Johnson, Hahnemann Hospital, Chicago.

W. A. Thompson, Hahnemann Hospital, Chicago.

R. C. Dienst, Hahnemann Hospital, Chicago.

D. G. Brunjes, Hahnemann Hospital, Chicago.

W. C. Allen, Hahnemann Hospital, Rochester, N. Y.

A. W. McDonough, Hahnemann Hospital, Rochester, N. Y.

L. G. Lewis, Hahnemann Hospital, Buffalo, N. Y.

D. J. Milburn, Hahnemann Hospital, Buffalo, N. Y.

H. E. Whittaker, Boston Homeopathic, Boston, Mass.

Mary Parker, Boston Homeopathic, Boston, Mass.

Eleanor Lovejoy, Southern Women's Hospital, Philadelphia, Pa.

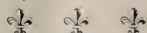
J. K. Stewart, San Francisco, County Hospital, San Francisco, Cal.

James Robertson, San Francisco, County Hospital, San Francisco, Cal.

A. E. Robertson, Montreal Homeopathic Hospital, Montreal, Canada.

L. C. Bassett, Chicago Union Hospital, Chicago.

J. W. Eubank, Chicago Homeopathic Hospital, Chicago.
 Professor Shaeler Matthews, Dean of the University of Chicago
 Divinity School, delivered the address to the class.
Chicago, Illinois, June 16th, '10.



SOUTHERN HOMEOPATHS' MEDICAL ASSOCIATION.

The next session of the S. H. M. A. will be held in Jacksonville, Fla., December 6th, 7th and 8th of this year.

We wish to call your attention to the advantage of visiting this beautiful city with its ideal winter climate. Moreover, Dr. Henry R. Stout and his associates promise to make every delegate feel at home.

On the members of the S. H. M. A. rests not only the success of the twenty-seventh session, but the success of homeopathy in the South. It is only by doing for ourselves that we can expect co-operation from other sections. Every profession, enterprise and industry in the South show growth, each reaching out and demanding its share of national recognition. Shall our school alone stand quiescent and sink into oblivion thereby? It is for you to decide.

If you are already a member, you can help materially by giving immediate attention to the demand of the bureau chairman, or by sending your dues to the treasurer, or yet again by helping us secure new members. If you are not a member, become one now by filling out enclosed blank and mailig it to us with required dues, \$2.00.

In this connection, we wish to announce that arrangements have been made whereby a member of the Southern or an applicant for membership, may be eligible to the Southern and the Institute of Homeopathy by filling out the enclosed applications and payment of back dues, or first year's dues to the Southern. The latter's initiation fee and first year's dues being remitted.

The *Medical Century* has been selected as the official organ, so every paper presented as well as the transactions of the sessions will be published.

Again asking for your valued co-operation and urging you to attend the twenty-seventh session of the S. H. M. A., we are,

Cordially yours,

JNO. T. CREBBIN, *Secretary.*



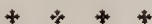
NEW MEDICAL BOOKS.

DISEASES OF THE DIGESTIVE SYSTEM, by E. O. Adams, M. D.,
 Professor of the Theory and Practice of Medicine and Clinical Medicine,
 Cleveland Homeopathic Medical College; Member of the American
 Institute of Homeopathy, etc. The Cleveland Homeopathic Publishing
 Company, 668 Rose Building, Cleveland, Ohio, 1910. Price, \$2.00.

Here is a little book that gives every evidence of practical investigation upon the subject involved. The author claims the book is designed: (1) "To give as accurately and concisely as possible the newer ideas which have developed, in addition to the older established ones." (2) "To give a technique for laboratory methods of diagnosis which is as simple and practical as is that used in examining the urine." (3) "To give directions in regard to dietetics which are in accordance with modern knowledge of the chemistry of foods and the pathology of digestion." (4) "To give remedies, together with their indications which the experience of fifteen years of especial attention to this class of diseases has demonstrated to be of value." He adds further: "The book is not intended to be encyclopaedic, but to be concise and practical" and from a careful consideration of the contents we are inclined to concede all claims made for it. The book is well printed, arranged and indexed and will prove a very valuable additon to any library.

READING NOTICES

PAPINE: In all forms of diarrhea and dysentery—when it becomes necessary to allay excessive peristalsis, overcome spasm and control pain, there is no remedy that gives as uniform satisfaction as Papine. The sedative, analgesic action of this remedy is manifested immediately, and the characteristic tenesmus is relieved almost as promptly. Here, again, the recovery of the patient is not interrupted by the customary severe constipation by which the use of other opiates is commonly followed.



FEMALE NEUROSES. There is scarcely a writer of prominence today who does not lay much stress upon the importance of early prolonged treatment of the primary manifestations of an almost infinite variety of nervous affections with the view of preventing the constant development of still graver troubles as well as to relieve present suffering. In the treatment of Female Neuroses, a combination of Divoburnia and Neurosine (equal parts) administered in dessertspoonful doses every three hours will prove most efficient.



PROVEN MERIT VERSUS THEORY. The thing that counts—RESULTS—have proven that a cod liver oil product with the grease left out is as active therapeutically, and more so when its palatability is considered, as the greasy, nauseating, unrefined cod liver oil. It is this feature that has won for Cord. Ext. Ol. Morrhuæ Comp. (Hagee) the good opinion of a large share of physicians, and it is why they continue to use it day after day. It not only possesses every virtue of the crude oil, but its value has been enhanced by the addition of the hypophosphites of lime and soda.

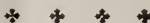


AFTERWARDS. During the acute stages of any serious illness, such as Typhoid, Pneumonia, La Grippe, etc., the attention of the physician is, of course, centered upon the ways and means of conducting the patient through the stress and storm of the disease, into the peaceful harbor of convalescence. In many instances, when this point is reached, the physician is inclined to relax his efforts and, perhaps, fails to appreciate the extent of the general devitalization that has followed the severe systemic infection from which the patient has just recovered. Unless the reparative and restorative forces of Nature are fortified and stimulated, a slow and tardy convalescence is apt to supervene. The devitalizing influence of the infectious diseases is exerted principally upon the blood itself, the vital tissue of the organism, and an easily tolerable, readily absorbable and promptly efficient hematinic is therefore always in order. Pepto-Mangan (Gude) is peculiarly adapted to the needs of the con-

valescent invalid, because, being palatable and non-irritant, it does not impair the appetite or disturb the digestion. Its freedom from constipating effect is another distinct point in its favor.



THE FIRST SYMPTOMS OF MIGRAINE. Dr. J. J. Caldwell, of Baltimore, Md., in "*Medical Progress*," writes as follows: "The treatment of migraine, to be correct, must be adjusted on the basis of the element of causation. Constipation, if present, should be treated by a proper dietary and regular habits, but purgatives should be avoided. Only mild laxatives should be employed, and they should be abandoned when diet regulates the bowels, as proper diet will do. During the premonitory stage we can generally abort or rather prevent the development of an attack by the administration of two antikamnia tablets. They should be given as soon as the first symptoms of the attack are manifest. If then, all symptoms are not speedily dissipated, another dose should be given in three-quarters of an hour or an hour. This means is a most effectual one to abort an attack, and when the attack is developed, antikamnia tablets will relieve the pain usually in about forty minutes."



THE IMPORTANCE OF STANDARDIZATION. The vegetable drugs used in medicine cannot always be grown under the same conditions. The soil, the season, the gathering time, the temperature—these are variable factors. Consequently, one cannot reasonably expect that the amount of medicinal substance in root, leaf, bark or seed will be constant. Two lots of digitalis leaves may look exactly alike to the experienced botanist, yet in content of active principle they may differ widely. As a matter of course, preparations of drug-plants must be variable in strength if made according to the antiquated method whose basic idea is that one kilo of crude drug will produce one liter or fluid extract. Suppose that the two lots of digitalis leaves referred to were extracted or percolated by the same operator, in the same manner, and during the same period of time. Would the products be of equal therapeutic activity? Obviously not. In each case the drug would be made to yield one liter of fluid extract, but this very fidelity to pharmacopoeial direction would carry over to the finished product the inequalities present in the crude drug.

The only way to secure uniformity in drug products is to standardize them—in other words, to adjust them to definite strength by systematic assay, chemical or physiological. This principle is now pretty well recognized by our leading pharmaceutical manufacturers. In fact, it is one of the manufacturers, in all probability, that modern medicine owes much of its scientific character. Reference is here made to Messrs. Parke, Davis & Co., who were the first to enter the fields of both chemical and physiological assay and who have practiced and preached standardization for a third of a century.

It is a healthful sign that the medical practitioner of today is giving serious thought to the subject of quality in medicinal preparation, for it is a logical assumption that the pharmaceutical market contains many therapeutic agents of very doubtful value. The physician has an obligation to himself and to his patient—an obligation which does not cease with the mere writing of a prescription. His further duty lies in assuring himself that the best quality of drugs shall be used in the compounding of that prescription. And this duty is performed through specification of the brand—a brand that he knows is reliable.



THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath.—Letter No. 10.

PROPER DOSE, AND PROPER PERIOD FOR REPEATING THE DOSE.

(Copyrighted August, 1910. All rights reserved.)

MY DEAR DOCTOR: Each time I begin a letter to you I wonder if what I have said has made any impression upon your mind. Hahnemann himself realized most keenly that his full and unreserved explanation of the science and philosophy of the homeopathic system of medicine was not appreciated by the masses in the medical profession, but rejected *without investigation*. And, it is worthy of note, even today, that those who protest the loudest and diverge the farthest, know the least about the system. Now at this juncture I would have you revert your mind to the points already advanced. 1. Perceiving what is to be cured in every individual case of disease. 2. Clearly perceiving what is curative in each individual medicine. 3. How to adapt, according to clearly defined principles, what is curative in medicines to what is undoubtedly morbid in the patient. 4. That the first task in such adaptation is to find the indicated medicine. 5. The mode of preparation of the indicated medicine, or potentization. Now comes the *proper dose* of the indicated medicine and *how often it should be repeated*.

One point I have failed to emphasize in my former letters which I must not neglect, namely, the *single remedy*. You will observe Hahnemann always talks about the "indicated *medicine*," "choice of the *remedy*." And in paragraph 272, he says: "In no case is it requisite to administer more than *one single, simple* medicinal substance at one time."

I ask you to observe how common it is for those doctors who oppose or reject dynamic medicines to prescribe *more than one medicine at one time*. And this is one of the ear-marks of *mongrelism*. Only the other day I was called into a new family. The mother said they had employed a homeopathic physician for many years—in fact, would not have any other. When I was ready to prescribe she said:

"Shall I get two glasses, doctor?" I knew instantly, as any true homeopath would, just what kind of a "homeopath" she had employed! Notice how broad and unlimited is Hahnemann's statement: "*In no case* is it requisite," etc. Then is it possible for a man to be a homeopathist and prescribe *two* medicines at one time? I unhesitatingly answer *no*; unless those two medicines have been tested in the healthy human body in precisely the same form and order in which they are prescribed, like sulphur and calcarea carb. known when combined and tested together, as hep. sulph. But to give one individual medicine one hour, and another individual medicine the next hour, is wholly unauthorized by the founder of homeopathy. He alternated *when the symptoms alternated*, and only then. For instance, it is common for a case now demanding sulphur to run into a nux vomica case; and *vice versa*. The experienced homeopath is not surprised if a case now calling for pulsatilla turns into a kali. mur. case—in fact, he rather expects it; but he does not prescribe kali. mur. until the symptom demand it. Hence, Hahnemann says: "As the true physician finds simple medicines, administered singly and uncombined, all that he can possibly desire (artificial disease-forces which are able by homeopathic power completely to overpower, extinguish, and permanently cure natural diseases), he will, mindful of the wise maxim that "it is wrong to attempt to employ complex means when simple means suffice," never think of giving as a remedy any but a single, simple medicinal substance."

So get right here, doctor, to start on. Two individual medicines are *never* indicated at one time in one patient. (See Paragraph 274.) And when two or more medicines are compounded, it is "impossible to foresee how they may hinder and alter each other's actions on the human body." Furthermore, our knowledge of therapeutic agents is promoted by using one remedy at a time, an advantage that is lost by the employment of compound medicines and by alternating. So we will now assume that you will prescribe but one remedy at one time; but how large or rather how small, shall be the dose? is the next question. This is, perhaps, the hardest lesson to learn. The gentle, spirit-like influence the dynamic remedy has upon the spirit-like vital force, is difficult for us to comprehend. Hence, we should give the more credence to what the master says regarding this important subject. We now quote from paragraph 276: "For this reason, a medicine, even though it may be homeopathically suited to the case

of disease, does harm in every dose that is too large; the more harm the larger dose, and by the magnitude of the dose it does more harm the greater its homeopathicity and the higher the potency selected, and it does much more injury than any equally large dose of a medicine that is unhomeopathic, and in no respect adapted to the morbid state." That is a lesson few have learned. The higher the potency and the greater its homeopathicity, the more harm it does if the dose is too large. If we ask why? he answers: "By the unnecessary, too strong impression, which, by virtue of its homeopathic similarity of action, it makes upon the vital force which it attacks, and, through the vital force, upon those parts of the organism which are the most sensitive, and are already most affected by the natural disease." This results in what is known as a "homeopathic aggravation," that is, the artificial medicinal disease being so similar to the natural disease, gives the *appearance* of an aggravation of the natural disease to be cured. This is caused by *too large a dose*. The patient no longer suffers from the original disease, but he does suffer from the medicinal disease which is *excessive*, of too great *intensity*. Hence, the rule laid down by Hahnemann is, make the dose (whatever the potency), just large enough to cause this homeopathic aggravation to be barely observable.

Personally I think we sometimes cure without *any* observable aggravation; but we are more prone to mistake the true homeopathic aggravation for the *original natural disease*, and hence conclude the patient is worse and that we have not chosen the right remedy. This is one of the nicest points in the practice of homeopathy. Experience alone can teach us here and guide us in making the dose small enough. When the medicine is too crude, the dose too large, and similar, great harm results by over-exciting the vital force and thus apparently intensifying the existing disease. This is why no old school physician can administer *his* medicines by the law of similars. But in a very high potency the same objectionable results follow repeated doses, or a dose which is too large. If the medicine chosen is dissimilar, not at all adapted by the law of similars to the morbid state, and the dose is too large or too frequently repeated, it then affects parts of the system not affected by the natural disease and hence produces *new symptoms* and adds a drug disease. This shows the observing physician, in the latter instance, that the wrong medicine has been chosen; and in the former, that the prepa-

ration of the indicated remedy does not meet the plane of the patient's susceptibility. And the high potency in a dose too large, or small doses too frequently repeated, shows him the *exaggerated reaction* which results from such indiscretion when the medicine chosen is the similinum.

There is no doubt in the world that thousands of doctors have prescribed today for symptoms produced by the medicine administered yesterday. And tomorrow and the next day they will repeat their experiences. However, it is little use to talk to such fellows. They are not conscious of their misery. Now, doctor, your fear, no doubt, will be that you will get the dose too small and not give enough medicine each dose to be effective. Let all such fear vanish when you read the following from the master: "The dose of the homeopathically selected remedy *can never be prepared so small* that it shall not be stronger than the natural disease, and shall not be able to overpower, extinguish and cure it, at least in part, as long as it is capable of causing some, though but a slight preponderance of its own symptoms over those of the disease resembling it (slight homeopathic aggravation), immediately after its ingestion." (Paragraph 279.)

The homeopathic aggravation, as before defined, is proof that the dose was not too small and that the right remedy has been chosen, and that the medicine is *genuine* and of unimpaired strength. Perhaps I should here call your attention to a matter some do not understand, viewing the possibility that you are one of that number. That is, as to what constitutes a remedy *homeopathic to a case*. Some erroneously conclude they are taking a medicine which is homeopathic if it has been prescribed by one professing to be a homeopathic physician; but this does not follow by any means. A medicine may have been prepared by a homeopathic pharmacy, carried in a homeopathic case, prescribed by a homeopathic physician and still not be homeopathic to the case of individual disease to be cured. Its *homeopathicity* depends entirely upon the fact that it has produced in the healthy human body an artificial disease *similar* to the natural disease to be cured; and that it has been so prepared as to correspond to the patient's dynamic plane of susceptibility.

How often should the dose be repeated? Here, again, the average homeopathic physician fails to comply with the specific instructions of the founder. We are so prone to force things. We fail to fully appreciate the *dynamic power* of the indicated remedy properly prepared.

Listen to Hahnemann: "Under these conditions, the smallest doses of the best selected homeopathic medicine may be repeated with the best, often with incredible results, at intervals of fourteen, twelve, ten, eight, seven days, and, where rapidity is requisite, in chronic diseases resembling cases of acute, diseases, at still shorter intervals, but in acute diseases at very much shorter periods—every twenty-four, twelve, eight, four hours in the very acutest every hour, up to as often as every five minutes—in every case in proportion to the more or less rapid course of the disease and of the action of the medicine employed." (Par. 247.)

Again: "In order to discover this middle path, we must be guided as well by the nature of the different medicinal substances, as also by the corporal constitution of the patient and the magnitude of his disease." Again: "I know that in order to find the right mean one must be guided by *the nature of the different medicines* as well as *the personal idiosyncrasies of the patient*, and *the gravity of the illness*, for example, Sulph. in chronic psoric diseases in the smallest dose (tr. sulph. 30th), can seldom be advantageously repeated in robust persons with developed psora, oftener than every seventh day, a period necessarily lengthened when using this method on weakly or susceptible patients, in whose case it may be well to give such a dose every ninth, twelfth or fourteenth day, henceforth repeated thus until the medicine ceases to be useful; we then find (continuing sulph. as an example), that in psoric diseases seldom fewer than four, often six to eight, or even ten such doses (tr. sulph. 30th) are needed for the complete annihilation of that part of the chronic disease best removable by sulphur, provided no allopathic abuse of it has yet occurred; thus a newly formed (primary) itch, even when covering the whole body in persons not too debilitated can be completely cured in ten to twelve weeks (*i. e.*, with 10-12 globules) of tr. sulph. 30th, so that it will seldom be necessary to aid it with a couple of doses of carbo veg. (also once a week), without the least external treatment, except a frequent change of linen and good regimen."

Now, doctor, I have quoted Hahnemann at length here, because the foregoing has helped me more than all else in the successful treatment of chronic diseases, and I know it will help you if you heed it. Observe the complete cure in ten or twelve weeks with ten or twelve globules—one globule per week. But that will only hold in high potency, and with medicines like sulph., *i. e.* of a similar nature. Also observe that

little hint of throwing in as an aid to Sulph. in such cases, a couple of doses of carbo. veg., also high. Such hints, from such a source, are as rich morsels on the tongue. Then observe the rules for repeating the dose—nature of the different medicines; the personal idiosyncrasies of the patient; the gravity of the illness. There are the rules. Now, doctor, I feel sure Hahnemann knew more about these matters than we do, and if we could only bring ourselves to realize this fact, we might profit by his experience. How many are taking hep. sulph. today every two hours? Yet, Hahnemann says: “hep. sulph. calc. can rarely be taken or smelt at shorter intervals than every fourteen or fifteen days.” Again: “But the careful homeopathic physician would not venture soon to repeat the same dose of the same remedy again and again, as from such a practice he has frequently experienced no advantage, but most frequently, on close observation, decided disadvantage. He generally witnessed aggravation, from even the smallest dose of the most similar remedy, which he had given one day, when repeated the next day and the next.

Now, in cases where he was convinced of the correctness of his choice of the homeopathic medicine, in order to obtain more benefit for the patient than he was able to get hitherto from prescribing a single small dose, the idea often naturally struck him to increase the dose, since, for the reason given above, one single dose only should be given; and, for instance, in place of giving a single very minute globule moistened with medicine in the highest dynamization, to administer six, seven or eight of them at once, and even a half or a whole drop. But the result was almost always less favorable than it should have been; it was often actually unfavorable, often even very bad—an injury that, in a patient so treated, it is difficult to repair. The difficulty in this case is not solved by giving, instead, lower dynamizations of the remedy in a large dose. Thus, increasing the strength of the single doses of the homeopathic medicine with the view of effecting the degree of pathogenetic excitation of the vital force necessary to produce satisfactory salutary reaction, fails altogether, as experience teaches, to accomplish the desired object.” (Note page 173.)

From the foregoing most any physician today may learn something. Dr. Dunham usually gave eight or ten globules at one dose, though admitting that *one* would be equally effective if medicated; but fearing that *one* might not have been touched with the liquid potency, he gave several. A poor

excuse is said to be better than none! The fact is, but few of Hahnemann's followers, save Bonninghausen and Gross, have been able to divorce themselves from *materialism* and follow him with *exactness*. And yet, only such strictness can promise the success enjoyed by Hahnemann and his *faithful* followers.

The simple rule of allowing the action of the first dose to exhaust itself before repeating, is easily followed; but to prescribe *one globule* medicated with a high potency, bespeaks knowledge, experience and dynamic philosophy.

The average homeopathic physician of today who prescribes dynamic medicines, makes the dose *too large* and repeats *too often*. It ought to be our chief concern to distinguish between an exaggerated action of the medicine administered, and an actual aggravation of the original disease. If the former, the vital force will soon overcome the intensity of action if given the opportunity, and the patient will recover; but if the latter, a new remedy must be selected.

I think the rule submitted by Hahnemann a good one, that the second dose should not be given until the action of the first is exhausted. However, I know by experience that several doses repeated at moderately short intervals in acute diseases are often unobjectionable, *if discontinued as soon as reaction sets in*. However, the rules before quoted must govern. "Should the practitioner find, on prescribing one of these (Ignatia, Bryonia or Rhus.), selected on strict homeopathic principles, that no improvement follows, he will in most cases soon effect his object by giving (in acute diseases, even within a few hours) a fresh and equally small dose of the same medicine." Now, doctor, here is a law we must all heed if we would claim the "key to successful prescribing": "Every perceptibly progressive and strikingly increasing amelioration in a treatment (acute) or persistent (chronic) disease, is a condition which, *as long as it lasts*, completely precludes every repetition of the administration of any *medicine whatsoever*, because all the good the medicine taken continues to *effect* is now *hastening* towards its completion! Every new dose of any medicine whatsoever, even of the one last administered, that has hitherto shown its self to be salutary, would in this case disturb the work of amelioration." (Par. 245.)

How hard it is for us (ordinary weaklings) to learn such lessons. We are so anxious to hasten the cure we give

a little more and yet a little more medicine, even after improvement is quite perceptible, only to discover later on that in our anxiety to help our patient we retarded his cure, or perhaps made it impossible. I tell you, doctor, I am more and more impressed with Hahnemann's statement, that the physician's high and only mission is to cure; and I am also impressed with the fact that he will never fill his mission until he learns to follow Hahnemann *with exactness*.

That should be his daily study and his meditation by night. If he can *cure*, all else will come his way in due season. As a homeopathic physician he *must* cure, or fail. The old-school practitioner has a class of followers who get all they have been used to and all they have been taught to expect, however bungling his treatment, and, like Barnum's patrons, they seem to like to be humbugged! But not so in homeopathy. The demand upon us for a *cure* is imperative. The masses will hang on to a doctor even until death, if he gives them "dope"—strong, crude, poisonous, *nasty* drugs, providing they have not been taught a better way. Hence, the traditional doctor and his imitators (mongrels) do not encounter what you will have to meet if you are going to be a real, true, homeopathic physician. Our patients the world over are of an intellectual, thinking, investigating class. If you can *cure*, they become strong, uncompromising, loyal patrons and advocates of homeopathy. If you are a failure in this your *only* mission, they drift back to old-school ranks or mongrel irregularities where they can get the traditional *dope*. But there is but one law of cure. All real cures are brought about by this law, either by skill or by accident. If you would not have your professional ambition smothered by failures to *cure*, study *that law*.

You are already sensible of the fact that there is more in successful prescribing than choosing the right remedy, important as that is. All the little details to which I have called your attention are for your patient's good and for your good. This reminds me of one more item I wanted to mention. We often have to follow the old-school in chronic cases, which, by bad treatment, have been spoiled. You will find it impossible to succeed in such cases if you do not know how to proceed. Here again we can do no better than follow the master. If sulphur is indicated and you have reason to know the patient has had too much sulphur as the "regular" prescribes it, though years have intervened, give him a small dose of mer. metall, and let this act at least nine days. Then the vital force

will permit the sulphur potency to exercise a beneficial influence. "But it not infrequently happens that the vital force refuses to permit several doses of sulphur, even though they may be essential for the cure of the chronic malady and are given at the intervals mentioned above (eight, nine, twelve or fourteen days), to act quietly on itself; this refusal it reveals by some, though moderate, Sulphur symptoms, which it allows to appear in the patient during the treatment. In such cases it is sometimes advisable to administer a small dose of *nux vomica*, allowing it to act for eight or ten days, in order to dispose the system again to allow succeeding doses of the Sulphur to act quietly and effectually upon it. In those cases for which it is adapted, puls. is preferable.

If, on the other hand, too much merc. has been given, prescribe *hep. sulph.* Sepia and sil. must only be given at long intervals and *without* any intermediate remedy. But in prescribing sulphur, he says, instead of giving eight, nine or ten doses in uninterrupted succession, though at proper intervals, it is best after every second or third dose (which have been given eight to fourteen days apart), to give a dose of some other medicine which must be allowed to act eight, nine or fourteen days. That "some other medicine" must be one which, for the case in hand, is "next in point of homeopathic suitability."

By observing these instructions you can cure chronic cases which can be cured in no other way. Take my advice, doctor, and study the Organon daily; and study it *to follow its directions*. We have found Hahnemann true and trustworthy in other particulars—testing medicines in healthy human subjects, prescribing on the totality of the symptoms, the law of similars, preparation of the drug by potentization, withholding the medicine when improvement is perceptible, etc., why not trust him in what he says about *the smallest possible dose?* For instance: "In such cases we have only to let the patient smell a single time strongly at a globule the size of a mustard seed moistened with *merc. metall.*" Hahnemann and his assistants used this smelling method of administering the dose *exclusively* in a general practice, in both acute and chronic diseases, for one whole year preceding his written description of it. He says: "The medicinal aura thus inhaled comes in contact with the nerves in the walls of the spacious cavities it traverses without obstruction, and thus produces a salutary influence on the vital force, in the mildest yet most powerful manner, and this is much preferable to every other

mode of administering the medicament in substance by the mouth." Again: "By this olfaction the power of the medicine is exercised upon the patient in, *at least*, the same degree of strength, and that more quietly and yet just as long as when the dose of medicine is taken by the mouth, and *that*, consequently, the intervals at which the olfaction should be repeated should not be shorter than in the ingestion of the material dose by the mouth. A patient even destitute of the sense of smell may expect an equally perfect action and cure from the medicine by olfaction."

Before he learned this lesson, he experienced several "accidents." He says: "Still ignorant of the strength of its medicinal power, I gave *sepia* in too large a dose. This trouble was still more manifest when I gave *lycopodium* and *silicea*, potentized to the one-billionth degree, giving four to six pellets, though only as large as poppy seeds."

Some of our best homeopaths have misinterpreted Hahnemann in what he has said regarding the size of the dose. They seem to think he referred to the *potency*. But when he says "four to six pellets" made a dose too large when giving lyc. and silica, though "potentized to the one-billionth degree;" and when he is specific in directing that *one globule* of sulph. he administered for a dose; and when describing "the smallest possible dose" he says "we have only to let the patient smell *a single time* strongly at a *globule* the size of a *mustard seed* moistened with merc. metall.;" and finally, when he says, "the more harm the larger the dose, and by the magnitude of the dose it does more harm the greater its homeopathicity and *the higher the potency selected*;" there is no use in arguing the case, he meant *the number of globules administered at one time*. Bonninghausen so understood him, for he directs us to give "*one*, at the most, two of the tiniest pellets," of the "decillionth potency." And he says "the better homeopaths" of his day used only such doses.

We had just as well come to it and throw away our scales and our chemical apparatus and our microscope and all our standards of *materiality*, and remember that the medicines we are using are *dynamic*—"spirit-like."

The power is in the *aura*; and this emanates as well from *one globule* as from a hundred, only not in the same degree. The magnitude of the dose is cut down when the number of pellets or the number of inhalations in olfaction, is diminished.

I tell you, doctor, but few physicians in this day, *if any*, appreciate *all* of Hahnemann's doctrine. They do not realize

the medicinal power of dynamic medicines. And what would you expect from that great army of so-called homeopaths who make no study of the Organon and chronic diseases?

As I have already intimated in my communications to you, hundreds of these pseudo-homeopaths never even read either of these books and some never saw them. Still, they are homeopathic physicians.

And the echo said, "*There is but one law of cure. All real cures are brought about by this law, either by skill or by accident. If you would not have your professional ambition smothered by failures to cure, study that law.*"

My next letter will be a continuation of this subject.

Yours for Hahnemannian Homeopathy,

J. C. HOLLOWAY, M. D., Galesburg, Ill.



THE CONSTITUTIONAL ACTION AND APPLICATION OF IODINE AND THE IODIDES.

BY W. V. NEILL, M. D.

AS A RESULT of the chemical affinity with which iodine has for certain elements, we have the following chemicals, given in order of their importance, viz: kali iodide, mercurius iodide, aurum iodide, arsenicum iodide, ferrum iodide, calcium iodide, barium iodide and zincum iodide.

I will not attempt to enumerate the symptomatic indications of these various iodides, but point out, briefly, their constitutional action and application.

Under iodide, which is the basic element for all the iodides, I will include the physiological action and effect of the iodide salts.

We find that iodide has a wide range of action, affecting almost every organ and tissue of the body. It operates as a general excitant of the glandular system, and under different circumstances may prove corrosive and irritating. In physiological doses it sometimes causes alarming symptoms, such as fever, restlessness, disturbed sleep, excessive thirst, palpitation, acute pain in the stomach and bowels, vomiting and purging, violent cramps, frequent pulse, and finally after continued use, a condition of systemic infection is produced, known as iodism.

Upon the mucous membrane, iodine produces a catarrhal condition, especially of the eyes and nose, which may in-

volve the entire respiratory tract, causing a catarrhal bronchitis, with muco-purulent expectoration. The skin may also become affected, producing an eruption, sometimes simply of macula, but usually of acne, which may go on to ulceration.

The lymphatic glandular system is also affected by iodine which produces primarily a condition of hypertrophy and loss of function, but after continued use, emaciation and atrophy results.

The therapeutic indication calling for iodine and the iodides, centers chiefly in diseases of the absorbent and glandular system, consequently we find them indicated in enlargements and indurations of lymphatic glands, the mammae, spleen, liver, testes and uterus.

In scrofula, syphilis, specific rheumatism, and respiratory diseases, the most striking results have been obtained by the use of the iodides, hence we find them useful in glandular tubercles, ophthalmia, ozaena, lupus, fistulous and carious ulcers, rhinitis, bronchitis, pleuresy and pneumonia.

Iodine and its salts are applicable for the softening of inflammatory deposits and for the removal of exudations; so we find them valuable in chronic diseases of the pulmonic parenchyma, also chronic inflammation of the laryngeal passage.

In the form of iodide of lime (dark), iodine is almost a specific for croup, catarrhal or membranous. I have found it curative in enlarged glands, epididymitis, orchitis and adenitis. Iodide of lime is also a valuable remedy in pneumonia, after exudation has occurred, with delayed resolution, pleuresy, before or after effusion.

In scrofula, iodide of arsenic and iodide of lime are of pre-eminent value. We have enlarged lymphatic glands, catarrhal conditions of the respiratory tract, abscess in lungs, fibroid degeneration of lungs, with inflammation and hemorrhage; phthisis pulmonalis, the especial indication being night sweat, with great debility and progressive emaciation.

In syphilis, kali iodide, aurum iodide and mercurius iodide, are the sheet anchors. Of the three, kali iodide is, perhaps, the most valuable. Given in material doses, the most usual indication of its constitutional effect, is, pain over the brow, with coryza, and in some cases, a mild ptyalism, with fetor of breath and slight swelling of the gums.

Combined with mercurius cor, kali iodide is, in all probability, a specific against the syphilitic poison. We find, upon giving it in doses of from one to five grains, three times daily,

a rapid decline of syphilitic symptoms; and right here is where I would remind you of the mode of administering kali iodide. We find the amount of kali iodide that the patient will bear, varies, but in those who have not been gradually accustomed to its use, the power of resisting very large doses is strong evidence of syphilitic infection.

Perhaps the most useful indication for aurum iodide is in syphilitico-mercurial affections and scrofulous diseases, especially caries of the nasal, mastoid and palatine bones, otorrhoea, strumous ophthalmia, syphilitic catarrh, with offensive discharge, exostosis of the skull bones, induration of glands, dropsy in cavities and limbs, inflammation of bones, glands, and serous membranes. Especially useful in the third stage of syphilis, have bone pains, with nightly aggravations, bones sensitive to touch.

The usual indications, calling for mercury, with the combined effect of iodine, are found, especially upon the glands and mucous membranes of the throat, consequently, we find it useful in syphilitic sore throat, follicular tonsillitis, malignant scarlatina, scrofulous ophthalmia, old neglected cases of syphilis, with ulceration of the mucous membranes of the nose and throat.

Ferrum iodide and arsenicum iodide are, undoubtedly the remedies in anaemia, where the symptoms, indicating their use, are present. Associated with the anaemia, we have progressive emaciation and enlarged lymphatic glands.

Barium iodide and zincum iodide are beyond my range of application, inasmuch as I have had no experience with them clinically.

Presented at meeting of Kentucky State Homeopathic Society, Mammoth Cave, May 25th, 1910.



SOME CHINESE CLINICAL CASES.

BY EMMA J. BETOW, M. D., OF SIENG IN, CHINA.

OBSTETRICS is one of the branches of medicine not practiced by the Chinese doctor, not even those who have graduated from our missionary hospitals; the custom of the country relegates this to old women who know nothing about anatomy and much less of obstetrics. The people were surprised that I, as a physician, should do this kind of work. Normal cases usually take care of themselves or in spite of so-called midwives. Women whom we are called in to see have usually been in labor several days. About

ninety-five per cent are forcep cases. The midwives have no instruments and wouldn't know how to use them if they had. It is surprising how much suffering and mal-treatment the Chinese women can endure and still live. Of course the mortality is great, but why they don't all die is a constant wonder to me. Those women make examinations without ever washing their hands, perhaps take any old dirty rag from the floor and only wipe them—and continue their work. Their hands have long dirty finger nails with which they do much damage. The people have not yet learned to call us early; a great many children and mothers might be saved by the timely application of forceps. Many poor women are ruined for life through neglect.

Case 1 is a good illustration: She was a woman of thirty-six years of age; had gave birth to seven children; she had been in labor four days when I saw her; her pulse was hardly perceptible—labor had ceased; the soft parts were oedematous; the head was packed down low in the canal; the child was unusually large, but if forceps had been applied in time it could have been delivered without much difficulty. The only thing I could do was craniotomy. I thought she would not live through the operation but she did, and the next day she had rallied and was holding her own. I did not see her for two days. Prolonged pressure of the head had caused gangrene of the vagina. Great masses were sloughing off. We brought her to the hospital and gave antiseptic douches every three hours, prescribed the indicated homeopathic remedy. She improved rapidly. I tried to keep the canal well packed to prevent atresia, but she left the hospital and I did not see her for several months. When I examined her then I could only pass a small sound. The tissues had contracted causing vaginal atresia. The Chinese are very superstitious and consider it a terrible thing to have a woman die before she is delivered; this may account for the way the midwives mutilate their patients.

Case 2—The woman had been in labor several days, transverse presentation. They had engaged several midwives; some held the patient while others pulled on the arm of the child, trying to deliver in this fashion; they finally gave up and sent for me. I found the poor woman in a very critical condition. On examination I found a complete rupture of the uterus and after disarticulating the arm of the foetus at the shoulder I pushed the chest up and applied forceps to the head and delivered without much difficulty. I did not ex-

pect her to live, as so many had meddled with her and carried infection; I thought it was useless to try to stitch up the uterus which had a longitudinal tear from the cervix to the fundus. I gave her ergotin hypodermically and applied bi-manual compression to the uterus. There was not much hemorrhage. I was not asked to see the patient again, but sent her medicine from time to time. She seemed to get along very well, made a good recovery and was able to be up and do her own work in about a month.

Another case similar to this one, only the uterus was not ruptured. They had wedged the shoulder down into the pelvis, the head had not passed the superior strait; I could not push the shoulder up to apply the forceps so I decapitated. The only instrument I had with me was a pair of scissors. After delivering the trunk I applied the forceps to the head. The patient had been in labor four days and died two days after delivery. Possibly if she had had proper care and after treatment she might have recovered. Often a native doctor is called in even though it is our case.

Case 4—I was called to the patient a few hours after labor had set in but found the midwife had already ruptured the membranes, incised the cervix with her sharp finger nails and torn the pareneum through almost to the rectum. This was during the first stage of labor. I gave her douches and later applied forceps and delivered a living child. The patient developed septicemia and peritonitis. They called in a native "doctor" who punctured the abdomen to "let out the wind." Three times during the night the patient thought she would die and lay down on the cold brick floor. When I saw her next day her temperature was 105.6, pulse 140. I was asked not to come again. The native doctor again punctured the abdomen and the patient recovered in spite of his treatment.

Read before the Kentucky State Homeopathic Society at Mammoth Cave, May 25th, 1910.





EDITORIAL SECTION



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AMERICAN INSTITUTE TOPICS IN TAB-
LOID.—Notwithstanding the unfortunate cir-
cumstance which deprived American Institute
members of forming some idea as to the extent
of the reception awaiting them on their arrival
in Denver, the entertainment accorded our visitors *en route*
the Pasadena meeting, July 6th, was of a high class and will
be remembered by those participating therein as one of the
really pleasant features of their trip across country. Owing
to oversight on the part of *some* one (name, size, complexion
and previous condition unknown) the circulars issued by the
Denver Homeopathic Club, with the title: "A Day in Den-
ver with the Doctors of Colorado," and which set forth the
intentions of the profession hereabouts, were not delivered
to the Transportation committee in Chicago, so that all ar-
rangements made by the local profession had to be called off
and new plans perfected, after the arrival of our guests, in a
very brief space of period. The reception at the Brown Pal-
ace was not held, and a great majority of the profession in
Denver were deprived the pleasure of meeting their eastern
confreres owing to arrangements made and perfected prior
the arrival of the train in Denver; had the plans proposed in

the pamphlet before mentioned been adhered to, the entire profession of the city would have participated in the early morning enthusiasm which pervaded, instead of the inconsequential few who left their downey couches at an unusually early hour that they might be present at the station when the "official" train pulled in.

With the energetic and efficient assistance of the "Seeing Denver" people, who were expecting to serve the visitors between the hours of 10 and 12 o'clock in the forenoon, the equipment of this company was brought into emergency service with such promptness that by seven o'clock the first carload of tourists were started on a joy-ride covering the most picturesque portions of the city. Between that time and before the departure of the first section of the train for Colorado Springs at 10:10 a. m., two hundred and twelve of our guests had been given the scheduled "Seeing Denver" trip, and one and all were profuse in proclaiming the ride one of the most enjoyable of any of the entertainments afforded them since leaving their homes. It was the unanimous opinion that Denver is one of the finest cities in the country, and unstinted praise was bestowed upon the "Seeing Denver" management, their equipment and employes. The Denver Homeopathic Club owe this company an abundance of thanks for the delightful way it handled an apparently forlorn situation as it appeared to the local committee on learning of the prearranged plans of the Transportation committee. Many of the truly great of the profession failed to show themselves while in the city, so if they were not accorded the attention to which they considered themselves entitled, no blame can attach to anyone but themselves.

The Brown Palace Hotel company is entitled to a large lot of thankfulness for the liberal and courteous offers made the local committee; as matters materialized but few were aware this elegant hotel had been selected as official headquarters. Had this been more generally known we are sure many more would have taken advantage of the hospitality awaiting them there. The first section of the official train, bearing a majority of the delegates and their friends, pulled out of the Union Depot at 10:10 in the forenoon for Colorado Springs. At this point the "Seeing Denver" people once more demonstrated their ability to serve in an acceptable manner and over 150 took advantage of their equipment in that city, which is pretty good evidence that the "Seeing Denver" and "Seeing Colorado Springs" people made a hit with

our eastern friends which will redound greatly to their credit.

The second section of the official train pulled out of Denver at 4 o'clock, p. m., and after laying out on the prairie near Petersburg for about five hours, arrived in Colorado Springs too late to enjoy much of the delightful scenery that Pike's Peak metropolis provides.

Taking everything into consideration we believe the delegates and their friends on the A. I. H. "official" train, enjoyed their sojourn in Colorado Springs and Denver to the limit.

But we are sore about that non-delivery of our pet circulars.

THE TRIP OVER THE MIDLAND from Manitou was a revelation to those members of the American Institute who had never been nearer real mountains and real mountain railroading excepting experiences received elsewhere than Colorado. On every hand arose praises and expressions of surprise and pleasure that the Transportation committee were farsighted enough to have selected the Midland for mountain scenery and such.

IN GLENWOOD SPRINGS several suspicious characters were observed taking a bath at the "pool" when it was apparent to everyone the act was wholly unnecessary; some of them having indulged in this luxury within a period of less than a week.

WE UNDERSTAND the glad hand feature of the journey that marked the short sojourn in Denver and Colorado Springs with red letters, was repeated at Salt Lake and that it was with considerable effort that such staid members as Drs. C. E. Fisher, Lewis Pinkerton Crutcher and a few others were restrained from leaving happy homes and congenial traveling companions and joining the "Mormons." Say, that was just another evidence of Western hospitality.

THE TWO SPECIAL TRAINS over the Pedro line pulled into Los Angeles on schedule time, so that the Memorial services which were arranged for Sunday evening, July 10th, were held according to prior plans. In the absence of Dr. J. W. Mastin, Dr. Lewis Pinkerton Crutcher of Kansas City, Mo., presided and a very appropriate program was presented.

ONE PERENNIAL PROTEST which THE CRITIQUE has persistently presented was completely wiped out. We refer to the Press committee part of the program. Pasadena and Los Angeles papers vied with each other in giving this event ample publicity, and if there is any one thing more than another for which the Institute is obligated it is to the generous manner in which the proceedings were given space by the press of the two cities previously mentioned. It is to be hoped the Press committee of forthcoming sessions will be equally fortunate in securing so much. Right here we want to whisper: had the program proposed by the Denver doctors been carried out as originally outlined, Denver papers, especially the *Post*, would have pictured things and printed things (we do not want to be understood as calling the delegates and their friends "things") which would have pleased our eastern friends amazingly.

THE SCIENTIFIC SIDE OF THE PROGRAM from start to finish was a surprise to many of our old school side lights. From the commencement of the *Materia Medica* section, of which Dr. J. B. Brown, of Denver, was secretary, to the close of this side of the society's scientific program, there was an unusual interest felt and benefit derived.

ELECTION OF OFFICERS for 1910-1911 resulted as follows:
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Second Vice-President, MARGARET HASSLER SCHANTZ, M. D., Reading, Pa.

Trustees, E. L. MANN, M. D., Minneapolis, Minn.; J. P. SUTHERLAND, M. D., Boston, Mass.; JAMES W. WARD, M. D., San Francisco, Cal.

AMONG THE MANY PLEASANT FEATURES OF THE SESSION was the presentation of a purse to T. Franklin Smith, M. D., of New York, who has been Treasurer of the Institute for 10! these many years, containing 600 gold dollars. Then to make the matter that much more like real money, there was added a silver Institute badge, which must have made the much-loved Treasurer feel

that his services had been appreciated. May he live a million years and have a million dollars and a million friends.

PASADENA STAR of July 12th, printed on page 5 of its edition for that date, a picture of Dr. C. E. Fisher, "Who led comment of President's Address." It is very evident the make-up man on the *Star* got the tintypes of Dr. Fisher and Dr. Henry E. Beebe mixed. There is every reason to believe an apology due *someone*.

IN LESS THAN ONE HOUR over five thousand dollars were pledged in support of the proposed propagandistic movement. This move is in the right direction, and with such an advocate of the cause as Dr. Arndt has ever proved himself, there is no doubt in our mind but what homeopathy will be greatly benefited and boosted by this new Institute representative. Let's see: it was THE CRITIQUE, we believe, which first publicly suggested Dr. Arndt's name for this position?

ACTION OF THE INSTITUTE regarding the Owen's Medical bill, which is a product of the devil and the American Medical Association, should meet the hearty approval of every fair minded American citizen whether affiliated with medical practice or not. The organized opposition with which this bill is meeting, is sufficient evidence that the American people feel quite well qualified to attend to their own private affairs without assistance from political and literary members of the medical monopoly.

NARAGANSETT PIER, R. I., has been selected as the next meeting place of the A. I. H. and it is hoped this selection will prove as pleasant and profitable to the oldest medical organization in the United States, as the one which has but recently passed into past history. The attendance at Pasadena was large; over two hundred new members were added to the list; the utmost harmony prevailed throughout, and, taking everything into consideration the meeting of the American Institute of Homeopathy, held at Pasadena, California, July 11th to 16th, 1910, will be numbered among the most progressive, profitable and pleasant in the history of the organization.

DENVER'S PURE FOOD PRODUCT. Uninvited, unannounced and unexpected, a representative of THE CRITIQUE paid an unofficial visit to the Lindquist Cracker Company's establishment in Denver, the fore part of last month, the purpose being to make a personal inspection of the practical workings of the plant, which, by the way, produces a large percentage of one of the most generally used pure food products.

In a majority of instances, where publicity is desired, prearranged plans make it possible that everything connected with the practical workings of a place be in such ship-shape condition as to preclude the possibility of anything but favorable comment; in this case, however, our "call" was so timed as to fall at an unusually busy part in the day's doings, and notwithstanding this fact ample opportunity was given us to inspect every part of the premises and plant from "cellar to garret."

The Lindquist establishment employs nearly one hundred and fifty persons all told, and one of the pleasing peculiarities of the people employed there, one that should, more than any other one feature, make patrons of this product feel more kindly toward its output and give it additional distinction in the pure food class, is the uniform cleanliness and healthfulness in the appearance of every one in and about the factory. The purity of any product does not depend any more upon the ingredients entering into its composition than does the sanitary surroundings of the place of preparation, the cleanliness and healthfulness of the people preparing it and the manner of packing for public distribution.

It is not our purpose to discuss ingredients, that subject is not in our line, but we do know that insofar as sanitary conditions surrounding this plant is concerned, the ventilation, absence of odors, absolute freedom from flies and other insect life, cleanliness of employes, disposal of refuse matter and other important features, it is as near perfection as anything in its line in the country.

Taking everything connected with this concern into consideration it is no wonder its business has outgrown the present limitations and that a large addition will soon be built to accommodate the constantly increasing demands made upon its output, or that the purity and palatability of the product is being praised by a constantly increasing list of patrons.

ANNOUNCEMENT' EXTRAORDINARY. We are pleased to announce that Dr. J. C. Holloway, whose capable contributions to *THE CRITIQUE* have called forth so many complimentary expressions from so many different sources, has consented to extend the series, "Key to Successful Prescribing," to cover a period of one year.

The subject of his September letter will be "The Proper Dose and the Proper Period for Repeating the Dose;" the October contribution will give the "Obstacles to Recovery and How to Remove Them."

These two letters will conclude a series of brilliant communications which have done much to strengthen the confidence of many whose confidence in homeopathy needed fortifying, besides giving doubting Thomases of other schools an insight into a brand of homeopathy, the genuineness of which they have failed to recognize.

THE CRITIQUE hopes Dr. Holloway will continue his propagandistic work; it is along practical and beneficial lines and should be encouraged by those in charge of propagandistic work for the furtherance of homeopathy. Homeopaths desiring propagandistic literature of the highest order should send to Dr. Holloway for sample copies of his Homeopathic Card Series, which is issued monthly and will make most excellent reading for their patrons.



HOMEOPATHS AND THE OWEN BILL.

THERE IS A FAMILIAR AXIOM which carries the thought if not the language that "Those who would deny liberty to others deserve it not for themselves, and, under a just God, cannot long retain it." And this axiom the disciples of Hahnemann may well ponder on at the present time in connection with the so-called health legislation now threatening at Washington and the past indifference to, if not actual sanction, by many individual homeopaths, of other schemes of medical restriction sought by the American Medical Association—an attitude grounded in the belief that homeopathy was so well established as to be safe from assault and that it might actually benefit in projects calculated to discredit or exterminate curative systems less firmly established.

It may well be argued that homeopathy has been but slightly guilty in this regard, and this argument cannot be gainsaid,

but the history of retributive justice shows that it has ever been so clumsily adjusted that more often than not the heaviest penalty is visited upon the least blameless, if they be blameful at all. And history has an irritating way of repeating itself over and over again.

In this conclusion it should be a source of genuine congratulation to all loyal Homeopaths that our late national convention took such a pronounced position against the Owen bill and proposed measures of like character, for it is not merely in keeping with the traditional policy of our school, not merely in vindication of our fathers who suffered martyrdom in the case of medical freedom and enlightenment, not merely a voicing of the call of ethical decency and professional self interest, but aside from every professional consideration and more important than all, a stand for the freedom of thought and conscience for which patriots have struggled for centuries bearing the torch that has lighted every foot of the way along the path of human progress.

That the public health should be made just as good as human endeavor can make it no one will gainsay. Much has been accomplished along this line and much more is in the way of accomplishment. Disease is being arrested and controlled, but through the agency of enlightenment rather than through the agency of coercive medical treatment or compelled immunization from contagion. Perfect health is something everybody desires and for which everybody is willing to make sacrifices to obtain and conserve. Youth hopes for it, old age clamors for it, babies cry for it. That society ought to bend every effort to bring about as perfect health conditions as the range of human wisdom can conceive, admits of no argument.

But while a governmental department devoted to the public health is one thing, and something which, under ideal conditions, would be a good thing, a department devoted mainly to medicine is quite another thing, and a most vicious thing.

That the Owen bill would create a department devoted principally to the subject of medicine is proven by three things, viz.: The fact that the measure is the culmination of ten years of political intrigue on the part of the American Medical Association, the text of the bill itself, and the pitifully weak arguments and fatal admissions of those who appeared

before the Senate and House committees to explain how the public health would benefit by the bill's adoption.

Earliest among the proponents came Professor Irving Fisher, with an elaborate record showing with interesting and startling aplombness how many people have died each minute of the year of preventable diseases.

Close on his heels came an eminent doctor urging the acceptance of the bill in order that it might be possible to obtain reliable vital statistics. He produced a chart, as carefully made as Professor Fisher's record, showing that only a very few of the states compile such statistics worthy of the name.

Then came an eminent member of the American Medical Association with more statistics by which he proved to his *own* satisfaction that if the doctors could have their way they could prolong the average span of human life full fourteen years.

Soon thereafter, by way of variety, there was introduced a physician who formerly was director of physical training in the schools of the largest city in the country, and his whole argument in favor of the bill was that the medical fraternity knew nothing about the things contributing to the well being of human kind or to the cause of sickness and death, because, as he shouted repeatedly, "it is nobody's business to find out." And his whole contention for a Department of Public Health was in the assurance that the government in some mysterious manner could help physicians gain the knowledge which they are unable to obtain by their own efforts.

Also there came before the committee an insurance actuary and a member of the Committee of One Hundred through the grace of the American Medical Association, as he himself admitted, with statistics showing a wonderful improvement in the public health in recent years, due, as he claimed, to improved tenement house conditions, better milk, and the activities of state boards of health.

"But do you assume," he was asked, "that the federal government could go into the states and still further regulate these things?" He didn't know. "He wasn't a lawyer," he said.

On other occasions it was very convenient, under cross-examination, for the proponents of the measure to dodge questions on the ground that they were neither lawyers, doctors nor insurance actuaries, but in the last analysis it seemed to be

conceded on all hands that the activities of a federal health department would be mainly restricted to co-operation with state boards and the handing out of advice save as to the meager territory not organized into states. However, the president of the American Medical Association, in his testimony, expressed the thought that the constitution would not limit the activities of a federal health department as much as was generally supposed and to this the ringsters of organized medicine present at the hearing murmured an audible amen.

To fail to allude to the evidence of Dr. Woods Hutchinson, the country's most eminent magazine doctor, would do an injustice to one of the most interesting literary characters of the United States. Others had previously argued that the proposed department might be properly enlarged to include affairs of education, but he outstripped them all by arguing that it should also have dominion over the subject of crime. "We are firmly convinced," he declared, with smug complacency, "that if you would turn over to the medical profession the question of crime, we would reduce it one half in twenty-five years." But let us draw a veil upon this phase of medical assumption. Considering that nothing now stands in the way of physicians eradicating crime as to their own selves it is calculated to excite the public to ghastly merriment.

It was with such twaddle, arrogant assumption and contradictory statements that the proponents of the Owen bill assailed the Congressional committees through many weary hours.

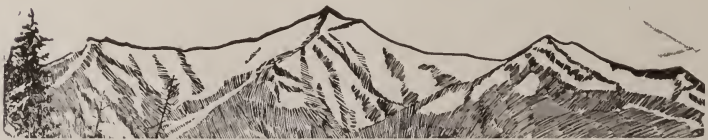
It hardly seems necessary to allude with any detail to what the opponents of the bill offered against it, but when their claim went forth that the chief purpose of the bill was to establish a state system of medicine and flout those who were not adherents thereof, immediately the cry went up from "regular" physicians all over the land that such a contention was nonsense; that reputable physicians had nothing to fear and that only the quacks had occasion for alarm.

The quacks! Who are the quacks? If priority of appellation could accurately designate them, who but the homeopaths? For over a hundred years the terms quack and homeopath have been synonymous in "regular" medical parlance and no devotee of Hahnemann should permit himself to be chloroformed by the suggestion the lexicon of allopathy has recently been revised. It hasn't been and never will be.

Stripped of all its verbiage and humanitarian glamor, the Owen bill, no less than the several other health bills before

Congress, has but one paramount object, to enthrone a medical dictator in this country and vest in him the power to "established medical and biological standards," which means, in plain terms, that a ringster of the American Medical Association shall be established as a medical censor and have placed in his hands the wand of governmental authority with which he may exalt those whose creature he would admittedly be, while scourging and harassing all classes of physicians outside of the pale of that great organization. And as the ancient enemy of the allopathic school, which the A. M. A. represents, as the cult that seized the banner of medicine from its mis-shapen hand and bore it from the midst of superstition and fakery out to the broad road of scientific endeavor, it is not difficult to believe that the homeopaths would be among the first to suffer from such persecutions and censorship.

It is fortunate that homeopaths are awakening to the portents of the present situation and more fortunate still that in the battle which it has been waging practically alone through a whole century it has now so powerful an ally as the National League for Medical Freedom, an organization that has lately sprung into existence, not to serve any particular school of medicine or healing, but to combat the tyranny, the assault upon human rights, that the legislative schemes of the American Medical Association so plainly contemplate. Composed of men and women of the highest social, business and political prominence, men and women whose national reputation precludes the possibility of their motives being questioned, homeopaths should not merely welcome this powerful ally, but place themselves in its vanguard, the position where they belong, the position to which the eternal fitness of things entitles them and demands that they should occupy.

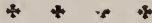


MISCELLANEOUS

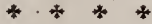
Remember the Colorado State Homeopathic Society meets next month.



Dr. James B. Brown's picture adorned the pages of the Pasadena *Star* of July 9th.



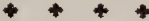
Dr. John D. Crisp was one of the sporty Denver doctors to take in the Jeffries-Johnson ju-jitsu at Reno, the 4th of July.



Everybody had a good time, so they declared, while in Denver. Of course this refers to A. I. H. delegates who visited us July 6th.



It is rumored that the Pulte Medical College of Cincinnati, Ohio, has joined forces with the Cleveland Homeopathic. One by one the roses fall.



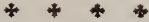
Dr. Clara Hyde Gillard, Port Clinton, Ohio, was one of the interesting and interested A. I. H. members to pay Denver a visit last month.



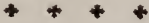
Dr. S. S. Smythe sojourned at Sulphur Springs several days during the fore part of July. He reports a most enjoyable and beneficial vacation.



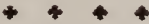
If you have not paid your assessment to the A. I. H. entertainment, do so as soon as possible, as there is a little outstanding in the way of unpaid printers' bills.



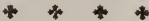
Drs. Kent, Grimmer, Dienst and Vaughan have resigned from the faculty of Hahnemann Medical College, Chicago, Ill., and reunited with Hering's teaching forces.



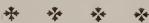
Dr. Wm. M. Robertson has been acting-mayor in the absence of the real thing, during the past month. The doctor would make good material for the genuine article in the future.



Dr. George Royal, Des Moines, Iowa, was an agreeable visitor to these quarters the 5th of July. He journeyed to Pasadena via the Santa Fe, and was accompanied by Vice-President Schenck, of Brooklyn, N. Y.



Did any one see Hensley We mean Dr. Hensley, of Oklahoma City. He promised to be on hand to take the "official" train out of Denver, but never showed up at these headquarters. Since foregoing was written and put in type, Dr. Hensley has paid his respects to *THE CRITIQUE*. He sojourned in Denver a short time the latter part of last month.

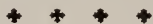


Many of the old guard at the Denver Homeopathic Medical College, when that institution fairly swarmed with enthusiastic students and energetic professionals, were more or less surprised to learn of the wedding of Dr. Pearl B. Wheeler to Mr. O. S. Dorr, which event took place the 25th of June. Dr. Wheeler has served successfully and satisfactorily as

medical inspector of the public schools for the past year or two, while Mr. Dorr is a prominent business man of this city, connected with the surgical instrument firm of Lauth & Co. THE CRITIQUE takes great pleasure in extending well wishes to the bride and an abundance of congratulations for the lucky groom.



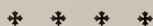
Dr. Hills Cole, of *North American Journal of Homoeopathy* fame, was one of the notables who was not afraid to show himself in Denver. He was accompanied by his father and mother, who, no doubt, came along to see that Cole, Jr., did not get into serious trouble.



Dr. C. B. Richmond, one of the most prominent members of the "regular" medical profession in Denver, died July 1st, of cancer of the stomach. He had the largest following of any individual physician in the city, and will be mourned by many both in and outside the profession.



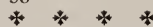
Dr. E. Stillman Bailey was a guest of Denver friends several days last month and was one of the unfortunate ones to be caught by a freight wreck which delayed the second section of the "official" train, just north of Littleton, causing a delay of several hours *en route* Colorado Springs.



Miss Woodie Elizabeth Dake, charming and accomplished daughter of Dr. and Mrs. Walter N. Dake of this city, was married at St. Mark's Episcopal church, Thursday evening, June 30th, to Mr. Valdo Frank Wilson; Rev. H. S. Foster officiating. THE CRITIQUE extends heartiest well wishes and congratulations.



Dr. F. E. McCurtain, one of the Denver Homeopathic '07 class, has resumed practice in Denver, with offices in the Commonwealth building, 202-3 are the numbers on his office doors and his telephone number is Main 8335; his home address is 15 E. 12th Avenue, at which place he may be called by phone, Champa 153.



The Denver Convention League is not of the procrastinating sort. In a little over twelve hours after receiving advices as to their proportion of the expenses connected with the entertainment of A. I. H. members the 6th of last month, the money was in hands of the treasurer of the entertainment committee. Thanks, and then some.



Mrs. Robert Dawson Evans of Boston has recently made a donation of \$200,000 for the purpose of erecting an Institute of Clinical Research and Preventive Medicine in memory of her late husband. That institute will be under the direction of the Massachusetts Homeopathic Hospital, and will be for the mutual benefit of that institution and the Boston University School of Medicine. It will be built upon a lot of land immediately adjoining the medical school, with which it will be connected by a passageway, and will also be connected with the hospital by a subway. The object of the Institute will be in investigation of all phases of clinical medicine as they are allied to methods of laboratory study, including particularly work upon the question of cancer, its prophylaxis, and its curative treatment. As planned, the building will consist of a large structure four stores high, with a roof sun-parlor. The first floor will be devoted to auditoriums in which public lectures will be given, and to the various administrative offices. On the next floor will be wards for neurological patients, forming a psychopathic department. The third story will also be devoted to wards for patients who are being studied and

treated by the various members of the staff of the Institute, including patients with inoperable cancer, sarcoma, and various other forms of disease at present considered to be incurable. The uppermost floor will be devoted exclusively to laboratories of pathology, bacteriology, physiology, chemistry, and drug pathogenesis. The idea is to provide a place in which the various forms of diseases may be carefully and scientifically studied, and in which the value of the various forms of treatment may be investigated in the laboratories. Detailed plans are now being made, and it is expected that the active work upon the structure will be shortly begun.



The 1910 edition of the Denver and Rio Grande folder, "Natural Resources of Colorado, Utah and New Mexico," is especially valuable because the large map, which takes in the territory from the Rocky Mountains west to the Pacific Coast, is not only brought right up to date but shows also the route and stations of the new Western Pacific Railway, the Pacific Coast extensions of the Denver and Rio Grande Railroad from Salt Lake City to San Francisco. This new line was opened for freight traffic some time ago, and it is anticipated that passenger business will be inaugurated early in August. It is said that the route through the Sierras and down the Feather River rivals in scenic attractions the world-famous Denver and Rio Grande. Another interesting feature in connection with this new Pacific Coast line is the fact that there is no grade of more than fifty-two feet to the mile, which makes it possible to conduct transportation across the mountains at a lower cost over that line than over any other now operating on the American continent. The map is being distributed by the passenger department of the Denver and Rio Grande railroad.



The tenth annual meeting of the American Society of Orthodontists was held July 13th, 14th and 15th in the ladies' ordinary at the Brown Palace Hotel, Denver. Below is a synopsis of the program:

Wednesday, July 13th—10:00 a. m.—President's address. Dr. B. Frank Gray, Los Angeles. Discussion by Dr. A. C. Hawley, Washington; Dr. Robert Dunn, San Francisco.

2:00 p. m.—A lantern demonstration of Bronchoscopy and Esophagoscopy. Dr. Chevalier Jackson, Pittsburg. Discussion by Dr. Thomas J. Gallagher, Denver; Dr. Robert Levy, Denver; Dr. Willard Flint, Pittsburg.

4:00 p. m.—Retention of Class II. Dr. Herbert A. Pullen, Buffalo. Discussion by Dr. Lloyd S. Lourie, Chicago; Dr. Robert Dunn, San Francisco.

Thursday, July 14th—9:00 a. m.—Mal-formed Bones of the Face as a Cause of Brain Inactivity, Dr. G. M. Wright, Denver. Discussion by Dr. A. E. Bogue, New York; Dr. Richard Summa, St. Louis.

11:00 a. m.—Death of Pulps Due to Tooth Movement, Dr. P. Buckley, Chicago. Discussion by Dr. O. Ottolengui, New York City; Dr. C. B. Case, Milwaukee.

Friday, July 15th—9:00 a. m.—The Use of the Incline Plane, Dr. Alfred P. Rogers, Boston. Discussion by Dr. Frank M. Casto, Cleveland; Dr. Guy G. Hume, Toronto.

10:30 a. m.—Radiography. Dr. A. H. Ketcham, Denver. Discussion by Dr. Walter P. Ellis, Buffalo; Dr. N. S. Hoff, Ann Arbor.

11:30 a. m.—Facial Expression from the Point of View of the Artist. Henry Read, Denver.

2:00 p. m.—Report of Cases and Clinics Shown with Slides. Cleft Palate. Class III, Dr. Robert Dunn; Report of Cases, Dr. B. Frank Gray;

The Mesial and Distal Movements of Bicuspid, Dr. B. E. Lischer; Root Movements of Six Anterior Teeth, Dr. S. M. Weeks.

3:00 p. m.—Clinics: Table and chair. 1. X-ray in Orthodontia, Dr. A. H. Ketcham, Denver. 2. The Prophylactic Care of Orthodontia Patients, Dr. A. C. Hamm, Denver. 3. Methods of Diagnosing Adenoids and Tonsils—Removal of Adenoids, Dr. T. E. Carmody, Denver. 4. Induced Fibrous Tissue: A Cosmetic Adjunct to Orthodontia, Dr. Mary E. Bates, Denver. 5. Preparations of Models, Dr. Frederick S. McKay, Colorado Springs. 6. Tooth Powder Ingredients and Their Effect on Bacteria, Dr. Daniel Neuman, Denver. 7. Oral Deformities Corrected by Orthodontic and Surgical Methods, Appliances, Dr. M. N. Federspiel, Milwaukee. 8. Platinum Plating of Nickel Silver Appliances, Dr. H. L. Morehouse, Spokane. 9. Some Helpful Appliances in Orthodontia, Dr. E. A. Bogue, New York. 10. Some Helpful "Little Things," Dr. Willard Flint, Pittsburg. 11. Conservation of Resistance Values in Anchorage, Dr. H. A. Pullen, Buffalo.



INTERESTING LETTER FROM DR. BURR.

S. S. SMYTHE, M. D. Denver, Colorado.

MY DEAR DOCTOR: I have been attending several sessions of the American Institute of Homeopathy, now in session here, and it brings back the fire of earlier years, as the old wheel horses tell of their enlarged faith in the Law of Similars; the longer they test it how one is inspired to again be in the harness.

The opening meeting was a veritable inspiration. The President, Doctor Ward of San Francisco, in his annual address, rose to heights of eloquence seldom attained on such occasions; he made the philosophy of Homeopathy so plain and inviting that it seemed as if every one hearing it must have a new faith in it. Quite a number of the old school physicians were present; to them the address must have been a genuine revelation. Will they lay aside all prejudice and give Homeopathy a fair investigation? While the number in attendance is not so large as at some former sessions, yet, on the third day, one hundred and sixty new members have been added. I do not know that any of these are from the dominant school, but on this coast physicians of the different schools of practice affiliate more than they do in some places.

Pursuant to the earnest recommendation of President Ward the Institute voted to elect a Field Secretary, who should devote his whole time and attention to the work, and Doctor Arndt, of San Francisco, was elected to do this work, and in an incredible short space of time, while only forty-five hundred dollars was asked for, five thousand one hundred dollars was subscribed, to pay his expenses for the first year.

Dr. Gaius Jones is elected president for the coming year, and Dr. Nichols of Pasadena, vice president. Drs. J. B. Brown and Swerdfeger are here from Denver, from whom I learn much of interest about the physicians of Denver, and their work. Sorry you could not be here also.

Let me congratulate you, yes, and the State Society too, that you permitted yourself to be elected president of the Colorado Homeopathic Society. Hope your coming meeting will be a most successful one. I only wish I could be there and help you in the good work.

I remember with much pleasure, our labors together in former years. Kindly greet for me those with whom I was associated in the work. Doctor Owens, formerly of Pueblo, Colorado, is here and seems well and hearty.

Fraternally yours,

(Signed)

W. A. BURR.

Pasadena, California, July 14th, 1910.

COLORADO HOMEOPATHIC SOCIETY.

Officers, Committees and Chairmen of Bureaus for 1910.

PRESIDENT—S. S. Smythe, M. D.

FIRST VICE PRESIDENT—L. E. Bartz, M. D.

SECOND VICE PRESIDENT—George C. Lamb, M. D.

SECRETARY—C. M. Worth, M. D. 620 Fourteenth St., Denver, Colo.

TREASURER—James B. Brown, M. D.

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James W. Craig, Chairman, Ault, Colo.; P. D. Russell, Walter M. Dake, N. A. Cramer, Jeanette Osborn, S. B. McFarland, R. D. P. Brown.

Board of Censors.

Walter J. King, Golden, Colo., Chairman; O. S. Vinland, E. B. Swerdfeger, Clinton Enos, George E. Osborn, Margaret H. Beeler.

Legislative Committee.

David A. Strickler, Chairman; C. D. Fisher, Frederick A. Faust.

Publication Committee.

J. G. Locke, Chairman; J. P. Willard, George E. Brown.

Finance Committee.

Frederick A. Faust, Chairman; E. P. Green, E. B. Swerdfeger.

Arrangements Committee.

Grant S. Peck, Chairman; Walter M. Dake, P. D. Russell, W. R. Welch, C. M. Worth.

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James W. Mastin, Denver.

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MATERIA MEDICA: James W. Craig, M. D., Chairman, Ault, Colo.

DERMATOLOGY: Margaret H. Beeler, M. D., Chairman, Denver.

GYNECOLOGY: L. E. Bartz, M. D., Chairman, New Windsor, Colo.

SANITARY SCIENCE: George C. Lamb, M. D., Chairman, Canon City, Colo.

MENTAL AND NERVOUS DISEASES: Carl D. Fisher, M. D., Chairman, Denver.

OPHTHALMOLOGY AND OTOTOLOGY: David A. Strickler, M. D., Chairman, Denver.

SURGERY: William R. Welch, M. D., Chairman, Denver.

TUBERCULOSIS: Walter J. King, M. D., Chairman, Golden, Colo.

PATHOLOGY AND BACTERIOLOGY: James B. Brown, M. D., Chairman, Denver.

OBSTETRICS: James W. Mastin, M. D., Chairman, Denver.

CHICAGO LETTER.

CHICAGO, ILL., July 18, 1910.

Dr. Julia C. Loos was a recent Chicago visitor.

Dr. H. F. Kaack, Hahn. '10, has located in DeWitt, Iowa.

Dr. Mary Parker, Hahn. '10, is spending the summer in Europe.

Dr. J. K. Stewart, Hahn. '10, was married on Tuesday, June 21st.

Dr. C. G. Kahlke is the new president of the Illinois State Homeopathic Society.

Dr. Gurnsey P. Waring was a recent Chicago visitor, renewing old acquaintances.

Dr. Forest O. Phillips, Hahn. '10, has located in New Sharon, Iowa, with her father.

Dr. John E. Gable, Hahn. '09, has changed his location from Evanston, Ill., to Ohio.

Dr. John B. Matheson, Hahn. '12, has been called to Buffalo, N. Y., on account of the illness of his father.

Dr. R. L. Blair, Hahn. '08, now located in Dixon, Ill., was recently married to Miss Grace Over, Sterling, Ill.

Dr. E. G. Ogden, a graduate of the New York Homeopathic College, has located in Chicago. The Doctor has recently been in Europe attending clinics there.

Dr. Kenneth A. McLaren, a former student in Hahnemann Medical College, Chicago, but who graduated from McGill University, Ottawa, Canada, is now an interne in Metropolitan Hospital, New York City.

The faculty of Hering Medical College wish to announce the following additions to their school: Drs. J. T. Kent, G. E. Dienst, A. H. Grimmer, E. E. Vaughn, A. E. Moulton, G. G. Starkey and H. S. Llellyn.

The 1910 meeting of the American Homeopathic Ophthalmological, Otological and Laryngological Society was held in Chicago, June 30th, July 1st and 2nd, at the Blackstone Hotel. The attendance was good and many papers of interest were presented.

Doctors W. H. Diffenbach, W. G. Crump, and J. F. Ranken, all of New York City, were recent visitors in Chicago on their way to the A. I. H. meeting in Los Angeles, Cal. While here they looked over both of the Chicago Colleges and Homeopathic Hospitals.

Chicago, Illinois, July 18, 1910.

PATRIOTISM PERSONIFIED.

The following was dashed off by Dr. C. E. Fisher as an outlet to his enthusiasm and patriotism and presented members and others on the "official" train out of Chicago. The card bore a beautifully embossed flag at the top and on the whole, was "just like Fisher."

FAIR HOMEOPATHY

"America"

Fair Homeopathy,
High praise we owe to thee,
Of thee we sing.

A system sure, though new,
A doctrine right and true,
A faith that carries through,
Just praise we bring!

To Father Hahnemann,
A saintly, worthy man,
We homage pay.
He wrought with tireless might,
He darkness changed to light,
He taught the truth aright,
Hail him this day!

As on our Westward way,
We speed fast day by day,
Of him we sing.
To Hahnemann's good name—
His law deserves its fame,
Its truth is e'er the same—
Our praise we sing!

We'll always bravely fight
For Justice, Truth and Right
As Yeomen bold!
Uphold our banner strong,
Nor compromise with wrong,
But ever sing the song,
Of Hahnemann!

Then let us e'er be true,
In what we each may do,
In S'milia's name.
Upwards our voices raise,
Throughout life's earnest days,
Sounding a worthy praise
With might and main.

READING NOTICES

EXTRACTING THE PRINCIPLES OF COD LIVER OIL. In Hagee's Cordial of the Extract of Cod Liver Oil Compound, the active principles of cod liver oil are extracted from the whole product, thus saving the stomach the task of digesting the oil for the sake of the medicinal properties it contains. When it is remembered that the whole oil will frequently upset a normal stomach, this feature of Hagee's Cordial of the Extract of Cod Liver Oil Compound, at once stamps it as the most reliable and palatable cod liver oil preparation to prescribe.

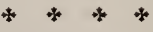
In extracting the active principles of the oil, no change whatever is made in their therapeutic integrity. Even the complex specific lecithine of cod liver oil is transferred in an unchanged and stable state to the Cordial.



THE DOSE OF CODEINE. Fraenkel (*Munch. Med. Woch.*) claims that codeine must be given in larger doses than is generally used in order that the full effect may be obtained, as codeine is from ten to twenty times less powerful than morphine. The proper dose should be two-thirds or three-fourths grain, and this amount may be given three or four times a day without any evidence of habit formation. The single maximum dose permissible is one and one-half grains and maximum daily dose is four and one-half grains. For children, the daily dose may be as follows:

4 years of age	one-sixth grain
6 years of age	one-third grain
8 years of age	two-thirds grain
12 years of age	one and one-fourth grains

Meyer Brothers Druggist, July, 1910.



A CONSERVATIVE HOUSE. Some of the members of the medical profession would open their eyes could they look over the files of the Denver Chemical Mfg. Co., manufacturers of Antiphlogistine, and see the many, many requests for window hangers, store advertising, etc., which they are constantly refusing. This company could get an almost unlimited amount of advertising, good advertising too, at no expense, except for the printing of the cards or booklets, if they did not have too

great a pride in the honorable position which they occupy as purveyors to the medical profession. Perhaps they feel the ethical requirements of their position more keenly on account of the personnel of the company. Half the members of the board of directors are physicians who have spent each of them many years in active practice, the president of the company being an ex-president of his State society, and the head of the advertising department is himself a physician, and was for many years the secretary of his County society.

With such a personnel, it is not surprising that the advertising is not only strictly ethical, but even ultra-conservative in spirit.



PHYSICAL CULTURE FOR JULY Especially pertinent to the somewhat deferred summer season which seems to have at last descended upon us, is the general tone of the July issue of *Physical Culture*. The current number of this well-known magazine is devoted chiefly to water sports, and in addition to a contribution on "How to Master Swimming," by Annette Kellerman, contains discussions on "Bathing in Many Climes and Times," "The Houseboat as a Summer Home," and many similar topics.

Among the more instructive features of this issue are Upton Sinclair's opinions on "Mothers, The Old and the New," and the original and common-sense recommendations of *Physical Culture's* editor, Bernard Macfadden, on "Acute Stomach Disorders," and "The Treatment of Scarlet Fever," together with a complete series of exercises for "Developing the Hips," illustrated by a supplement in colors. Numerous other timely contributions are included in this particularly readable number of an always interesting publication.



THE HARBOR OF CONVALESCENCE. While the physician is always on the alert to meet and overcome any of the various complications or serious symptoms that threaten the patient during the acute stages of a severe constitutional illness, it is not infrequently the case that insufficient attention is given to the effort to hasten a return to normal health after the subsidence of the acute symptoms. The rocks and shoals of active disease have been successfully evaded and the medical pilot has brought his more or less damaged human craft into the peaceful harbor or convalescence. At this point both patient and attendant are apt to "rest on their oars" with the idea that the "*vīs medicatrix naturæ*" is all-sufficient to bring back the normal vitality, without the special help of medication. It can scarcely be said that such a "laissez faire" policy is to the best interest of the patient. Unless the reparative and restorative forces of the organism are encouraged and fortified a slow and retarded convalescence is apt to supervene. The essentially devitaliz-

ing influence of the morbid agent in typhoid, grippe, pneumonia, etc., is exerted primarily and principally upon the blood itself and a readily desirable, promptly assimilable and thoroughly efficient hematinic, such as Pepto Mangan (Gude), is always serviceable and valuable. As Pepto Mangan (Gude) is palatable and non-irritant, it exercises no disturbing effect upon appetite or digestion—in fact, it increases the desire for food and, by its general tonic action, assists in its absorption and assimilation. Its freedom from constipating effect also renders it especially suitable in the restorative treatment of the convalescent invalid.



THE HAY FEVER PROBLEM. Again the physician is called upon to grapple with hay-fever, and a veritable army of sneezing, watery-eyed "miserables" come to him for relief. For a long time the idea was prevalent that little or nothing could be done for these people. The patient dreaded the coming of the disease, and the physician dreaded the coming of the patient. The situation was one of ample misgivings and scanty faith. Now it is pretty well recognized that medication, while still empiric to a certain extent, is nevertheless effective. The symptoms can be controlled or greatly minimized, and the patient may have the relief he seeks. And for this much he will be truly thankful, and the physician, in turn, duly thanked.

Adrenalin is perhaps the most effective agent. It antagonizes the symptoms and secures to the patient a marked degree of comfort. It allays the congestion of the mucuous membrane, reduces the swelling of the turbinal tissues, controls the nasal discharge, cuts short the violent paroxysms of sneezing and the abundant lacrimation, and prevents depression by stimulating the heart.

The practitioner who desires to employ Adrenalin in the treatment of hay-fever has recourse to the product in a number of forms. Adrenalin Chloride Solution (1:1000) is doubtless the most widely used. It is first diluted with four to five times its volume of physiological salt solution, then sprayed into the nares and pharynx. Adrenalin Inhalant has many adherents. This is an oil solution, and is administered by spray. It may be diluted with olive oil—the inhalant one part, olive oil three to four parts. A third preparation is Adrenalin Ointment (1:1000), which is effective either alone or in supplementing Solution Adrenalin Chloride. Another is Adrenalin and Chloretone Ointment—at once an astringent, antiseptic and mild anesthetic. The latest is Anesthone Cream (Adrenalin Chloride 1:20,000, para-amido-ethyl-benzoate 10 per cent., in a bland oil base), an astringent, anesthetic ointment. The ointments and cream are supplied in collapsible tubes with elongated nozzle, which facilitates their application to the nasal mucosa.

Literature on any or all of the products above mentioned may be had upon application to the manufacturers, Messrs. Parke, Davis & Co., at their general offices in Detroit, or any of their numerous branch houses. The company, by the way, issues an attractive brochure on the subject of hay-fever.



THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath.—Letter No. 11.

THE PROPER DOSE, AND THE PROPER PERIOD FOR REPEATING
THE DOSE.

(Copyrighted September, 1910. All rights reserved.)

MY DEAR DOCTOR: How far, think you, must we follow Hahnemann in order to succeed? Listen:

"Nevertheless this true theorem is not to be recognized among those which should be comprehended, nor among those for which I ask a blind faith. I demand no faith at all, and do not demand that anybody should comprehend it. Neither do I comprehend it! it is enough, *that it is a fact and nothing else*. Experience alone declares it, and I believe more in experience than in my own intelligence. But who will arrogate to himself the power of weighing the invisible forces that have hitherto been concealed in the inner bosom of nature, when they are brought out of the crude state of apparently dead matter through a new, hitherto undiscovered agency, such as is potentizing by long continued trituration and succussion?"

But he who will not allow himself to be convinced of this and who will not, therefore, imitate what I now teach after many years trial and experience (and what does the physician risk, if he imitates it exactly?), *he who is not willing to imitate it exactly*, can leave this greatest problem of our art unsolved, *he can also leave the most important chronic diseases uncured*, as they have remained unhealed; indeed up to the time of my teaching. I have no more to say about this. It seems to me my duty to publish the great truths to the world that needs them, untroubled as to whether people can compel themselves to follow them exactly or not. If it is not done with *exactness*, let no one boast to have imitated me, nor expect a good result." (*Chronic Diseases*, page 124.)

The dose has long been, and still is the impassable gulf between the two schools. Here let me quote to you what Bonninghausen has to say: "Especially noteworthy are the conclusions of this short brochure, wherein we are taught the effectiveness and great advantage of the mere inhalation of the highly potentized remedy, the result of a careful and continued observation: indeed, were it necessary to adduce further evidence of the correctness of this teaching of the great man I could, aside from my own, cite the testimony of numerous unbiased homeopaths, who, following the example of the master, have lately had similar experiences in many instances." Again: "Concerning the proper strength of the

dose, I thought it best to be silent, since in the last few years the homeopaths have made experiments in this field which speak decidedly for *the highest potency in the smallest dose*. Therefore, the better homeopaths of today make use only of the smallest part of a drop of the highest (decillionth) potency (one, at the most two, of the tiniest pellets moistened therewith), and *not one has had occasion to return to the use of larger doses*. There are, however, cases in which it is impossible with such a single dose to penetrate through the presenting disease diathesis, especially when complicated with medicinal disease, and effect the vital force sufficiently to lastingly excite it to the necessary reaction." Now, when a physician like Bonninghausen gives utterance on the *dose* and the *potency* as in the foregoing, what are we that we should dispute his word or hold in doubt these great truths first announced by Hahnemann?

The indicated medicine, the potency, the size of the dose, and the proper period for repeating the dose, constitute *the important chapter of homeopathy; the cornerstone; a sine qua non*. Still, there is one more condition to successful prescribing which must be added to this in certain cases, viz., a scientific recognition of the *miasms*. This we will notice presently. "The smallest dose of homeopathic medicine, capable of producing only the very slightest homeopathic aggravation, will, because it has the power of exciting symptoms bearing the greatest possible resemblance to the original disease (but yet stronger even in the minute dose), attack principally and almost solely the parts in the organism that are already affected, highly irritated, and rendered excessively susceptible to such a similar stimulus." Again: "Now, in order to act really in conformity with nature, the true physician will prescribe his well selected homeopathic medicine only in exactly as small a dose as will just suffice to overpower and annihilate the disease before him—in a dose of such minuteness, that if human fallibility should betray him into administering an inappropriate medicine, the injury accruing from its nature being unsuited to the disease will be diminished to a mere trifle; moreover the harm done by the smallest possible dose is so slight, that it may be immediately extinguished and repaired by the natural vital powers, and by the speedy administration of a remedy more suitably selected according to similarity of action, and given also in the smallest dose." (Par. 283.)

Every competent observer, that is, one who knows what pure homeopathy is, must look upon the performances of the

great majority of professed homeopaths of today with mingled amusement and pity. For their patients it is a sad spectacle. By force of habit and early training the masses are still disposed to support traditional doctors and patent medicine houses. But for the more intelligent, thinking, reflecting people who will not knowingly permit their systems to be drugged and poisoned, and who are too intelligent to embrace no-medicine fads, to rest in the innocent delusion that they are enjoying the beneficent blessings of Hahnemann's teaching—reaping the benefits of homeopathy, when patronizing a physician who, though calling himself a homeopath, in practice disgraces homeopathy and its founder, is a picture both sad and ridiculous. Such physicians, deficient in both knowledge and honor, make themselves the laughing stock of the medical world and bring reproach upon the only scientific medical system the world has ever known.

These illegitimate homeopaths, laboring under a misconception of the true homeopathic doctrine, talk learnedly of "pathology" and material germs as disease "cause;" employ all the "helps" and adjuvants invented by the school which has no therapeutic law; become the champions of polypharmacy and *material* medicines, and confirm their patrons in the old heresy that scientific treatment must be based on correct diagnosis; become noted for their liberality and even extravagance while bartering away sacred and invaluable principles which never belonged to them, and thus mislead and deceive the uninformed while posing as homeopaths. Of this class of physicians Hahnemann says: "Every physician who treats disease according to such general character, however, he may affect to claim the name of homeopathist, is and ever will remain in fact a generalizing allopath, for without the most minute individualization, homeopathy is not conceivable."

Again he says: "But this laborious search for and selection of the homeopathic remedy most suitable in every respect to each morbid state, is an operation which, notwithstanding all the admirable books for facilitating it, still demands the study of the original sources themselves, and at the same time a great amount of circumspection and serious deliberation, which have their best reward in the consciousness of having faithfully discharged our duty. How could this laborious, care-demanding task, by which alone the best way of curing diseases is rendered possible, please the gentlemen of the new mongrel sect, who assume the honorable

name of homeopaths, and even seem to employ medicines in form and appearance homeopathic, but determined upon by them anyhow (*quidquid in buccam venit*), and who, when the unsuitable remedy 'does not immediately give relief, in place of laying the blame on their unpardonable ignorance and laxity in performing the most important and serious of all human affairs, ascribe it to homeopathy, which they accuse of great imperfection (if the truth be told, its imperfections consist in this, that the most suitable homeopathic remedy for each morbid condition does not spontaneously fly into their mouths like roasted pigeons, without any trouble on their own part). They know, however, from frequent practice, how to make up for the inefficiency of the scarcely half homeopathic remedy by the employment of allopathic means."

Again: "But if the patient die under the treatment, as not unfrequently happens, they seek to console the friends by saying that 'they themselves were witnesses that everything conceivable had been done for the lamented deceased.' Who would do this frivolous and pernicious tribe the honor to call them, after the name of the very laborious but salutary art, *homeopathic physicians*? May the just recompense await them, that, when taken ill, they may be treated in the same way!"

What difference does it make to them about the "proper dose," and the "proper period for repeating the dose?" What does the "preparation" of the indicated remedy concern them? And what do they care, anyhow, about the *single* "indicated remedy?" They console themselves with the thought that their patients cannot distinguish the genuine from spurious homeopathy, which is true if they have not been taught, and argue that it is suicidal to study and search and sweat in an effort to follow the homeopathic rules when they can succeed as well as their old school fellows without this.

It is very cheap for such physicians to sneer at true homeopathic practitioners, but when it comes to a practical test in chronic and complicated diseases, or in serious acute illness, then *principles*, knowledge and fidelity tell.

The very sick man is not longing for the physician who knows his remedy (frequently without asking a question), but for one who *knows how to find it*. He alone is the physician of power in the sick room. The true physician does not try to surround everything medicinal with clouds of mysteriousness; but with great patience and simplicity he *teaches* his

patrons the fundamental principles of the true healing art, that they may, when sick, co-operate with him intelligently.

In comparison to that which doctors ought to know, the knowledge of all physicians in the world is certainly meager; but all can be honest, at least. If a physician is employed as a *homeopath*, that fact in itself ought to be a guarantee that he will follow Hahnemann, the founder of homeopathy, in his efforts to cure. And, doctor, if you will make such loyalty and integrity a rule in your medical career, as you grow older in the good work you will be recognized and sought after because of the *system* you represent. And this will be true in a large degree even now; but the reliability of *experience* in the medical art is acknowledged by all. This will be your greatest ally and truest passport to *confidence* on the part of the general public; and next to this is loyalty and allegiance to the founder and director of the system you profess to practice. *The people want to know what to expect.* Besides, it is an honor to any professed homeopath to *bend the knee* to Hahnemann.

Another point about repeating: When the indicated medicine has been administered and it ceases to improve a case, one of the best signals to repeat is the *re-appearing* of symptoms; but if *new symptoms appear*, or some new symptoms appear and some old ones re-appear, then a new selection must be made. Thus a case is carried on by one remedy following another until a cure is accomplished. *This is homeopathy.* Thus the doctrine of *successive remedies* sprung up, that is, Hahnemann and his true followers soon learned that some medicines may often be given with peculiarly good results after each other. For instance, calcarea following belladonna; and lycopodium following calcarea; but *never without consulting the changed state.* No living man now knows, and no man can ever know, how a given medicine shall alter a case, and hence we can never know *a priori* what will be the next medicine suitable in a given case.

Now I will mention a matter that will touch at many points along the line of so-called homeopathic practice, namely, *alternate medicines.* To the young and inexperienced physician it seems feasible and excusable in some cases where two medicines appear to correspond to a case, one of them to one group, the other to another group, to meet the totality of the symptoms by giving, first one, then the other in rapid alternation. Or, as some have solved the problem, administer one and by its power remove one group of symptoms, then

administer the other and finish up the case! Or as some so-called homeopathic pharmacists have unraveled the problem, combine the two medicines in one tablet, called "combination tablet," and thus administer the two medicines to the patient; and as a hen with the largest wings can cover the most chickens, make the number of distinct individual medicines represented in the "combination tablet" three, four, five, six, seven or more; and these, too, of the *material stuff*, or not higher than the 1-x, 2-x or 3-x. Shades of Hahnemann! Talk about "proper preparation" of the indicated "remedy!" And think of such a pharmacy sending out broadcast through the homeopathic ranks a book, elegantly executed and to some alluring and fascinating, in which it is stated by way of introduction: "The physician frequently comes in contact with cases in which it is an impossibility to differentiate between two or more remedies" (generally more), "each one of which, while partially indicated, does not cover the totality of symptoms. No matter how thoroughly he may be versed in symptomatology and materia medica, he finds the judicious" (always *judicious*, of course!) "alternation or combination of these remedies necessary to a rapid cure of the case."

Homeopathic pharmacy, indeed! And to evince their intense interest in homeopathy the head of this institution recently sent letters of inquiry over several states soliciting young men and women to attend "some" homeopathic college, and bewailing the fact that the new recruits in the old school are far outnumbering the ratio of new homeopaths. If one were allowed to read between the lines, it would be clear enough, when transposed, that the apparent interest in homeopathy is really of a *commercial* character. Think of it! "No matter how thoroughly he may be versed in symptomatology and materia medica, he finds the judicious alternation or combination of these remedies *necessary* to a rapid cure of the case." If that writer should ever attempt to bore for oil, he would be sure to strike *gall*! What an inexcusable insult to Hahnemann and all his true followers! What impudence, impertinence and effrontery on the part of a pharmacy soliciting the patronage of true homeopaths all over this country!

Now, my dear young doctor, you do not wonder that the country is being filled up with *mongrels* and that Hahnemann's true adherents are comparatively few and far between. When the pharmacy before quoted calls the roll, there are so many who have been influenced by its spurious teaching and

who have decided to be known "just as doctors." that those who respond as homeopaths seem few.

Now let us review a little and note the lawful objections to the devices spoken of. *Alternating.* When one dose of a medicine is administered, one of two events follow with certainty: (1) The state of the illness is changed, or (2) It remains the same. If changed, one of three results may be noted: (1) The condition is ameliorated. (2) It is aggravated. (3) The picture alters its symptom complex. In the first instance, *amelioration*, instead of disturbing its beneficial action by ordering another medicine given an hour or two hours after the first, its action should be allowed to penetrate deeply and exhaust itself. Here, haste is useless and admitted by the best homeopaths to be harmful. Even the same medicine should not be repeated until the improvement comes to a visible standstill; and even then only on the condition that the symptom complex is lessened, but not *changed*. So you can see how awkward and blundering it would appear to say, "Give this medicine now, then two hours later give this other medicine"—without knowing, and without it being possible to know, what the condition of the patient will be at that time.

Aggravation. If, after the administration of a given medicine, the characteristic symptoms heighten in intensity without changing in character—the so-called homeopathic aggravation, this is evidence enough to every trained homeopath that the remedy has overcome the disease in its essence, and nothing further is to be done at present, unless the complaints become too loud, and in that event the application of a proper antidote may be necessary, which, in most instances, is found in a second dose of the same medicine, only *in a smaller dose and lower potency*.

Alteration of the symptom complex. This is the third instance, and is evidence, when it happens, that the remedy was not homeopathic to the case, new symptoms having developed which changed the complex, and a suitable medicine must be chosen as soon as possible. If the remedy has been carefully chosen, and if the diet is faultless, and still the sick condition is not at all changed, the cause is usually found to be a want of *receptivity*. This must be removed as explained in a former letter, by a medicine suited to a deficient reaction; or, as Bonninghausen recommends, by *repeated small doses* of the indicated remedy. So you see, doctor, we find no place for preparing and ordering given the *second* medicine at the

time of giving the first. Such a custom is wholly unauthorized in the practice of homeopathy.

As to giving one medicine until one group is removed, then giving the second medicine to remove the other group, the same objection must be apparent, viz., that no man can tell *a priori* what the symptom complex will be after the first group is removed. As to combining two, five, seven or more individual medicines in one tablet, under the pretense that it takes them all to cover the case, as though *all* could correspond to the *odd, unusual, peculiar and distinguishing* symptoms of a given case, which the founder says are almost wholly to be considered, betrays *wilfulness* on the part of competent pharmacists who prepare such tablets, and *woeful ignorance* of those who prescribe them. Even pseudo-homeopaths are supposed to concede that the medicinal powers of drugs are revealed *only by testing them on healthy human subjects*. The drugs composing the popular combination tablet have never been so tested in that form; and, hence, should never be prescribed in that form. How one drug may alter the action of another drug when given together, the world's treasury of wisdom can never reveal only by *proving them together*. When this has not been done, homeopathic dignity, self-respect and a knowledge of the essential pathogeneses of drugs, ought to cause those who wear the honorable name of homopathist to refrain from such a practice.

I must not fail to note one important observation, namely, the same unaltered dose of medicine should not be given to the patient even twice, much less repeated over and over in succession. The patient's vital force does not admit of such a course quietly and without resentment. New symptoms and sufferings dependent on the medicine are sure to appear. These symptoms which were not formally present in the disease, *obstruct the cure*.

The contradictions among homeopaths respecting the repetition of the dose, are due chiefly to this one lame place. The repeated administration of the indicated remedy in order to cure an acute or chronic disease, is often *indispensable*; but the dynamization should be slightly changed at each repetition, so that the dose will be each time changed or modified and the same medicine can thus be made to do its best work, with the best result, though repeated an incredible number of times.

In order to this end, when the medicine is prepared in a half tumbler of water, order the attendant stir the contents

briskly a few times each time before administering; and if powders are given, dissolve and shake or stir—at each repetition a few more times, thus raising the potency. As long as the remedy continues to effect improvement and no new symptoms of the *medicine* appear—symptoms never experienced by other patients, the medicine may be continued. When the action produced is too powerful, then the medicine must be discontinued for a day or longer; and when again taken up used in smaller doses and a lower potency. On the other hand if improvement ceases and the symptom image remains the same, then give a higher potency of the same medicine.

How You May Know the Medicine Is Working.

After a specific remedy has been administered we look for a change of symptoms. They disappear, they increase, they are ameliorated, their order changes, their direction changes, and those changes must be studied and interpreted. We must learn to see the workings of the invisible interior by the signs we observe and the symptoms which the patient reports. People get well under the action of the specific remedy *from within out, from above down and in the reverse order in which the symptoms appeared.*

Take a rheumatic case; especially one which has been maltreated by “regular” methods. After you prescribe you notice in a few days the feet are not so badly swollen, but the patient’s breathing is more labored and the heart action is irregular. The patient says, “Doctor, I am ever so much better—see my feet. I only wish I had called you sooner.” Now if you do not know homeopathic law, you are liable to swell up on such occasions and flatter yourself that you are a doctor. Under such circumstances *that patient is worse*, but she does not know it and often the doctor does not know it. What is wrong? Two things at least: (1) The improvement is in the wrong direction—from below up. (2) The disease is leaving the exterior and becoming fastened on the interior, affecting vital organs, working structural changes.

Suppose you prescribe the specific remedy for a patient suffering from tonsilitis which began on the right side and went to the left. Improvement will begin on the left side and the right tonsil will get well *last*—the reverse order of appearing. If the case gets well in spite of the treatment, the right tonsil will get better first—the same order in which it appeared.

Now, no difference what the patient says, the intelligent homeopath *knows by law* when the remedy is or is not acting favorably.

Again: All cases of sickness, acute or chronic, have an altered state of the disposition and mind; and there is no effective medicine in the world which does not alter the state of the disposition and mind in a very notable manner in the healthy subject who tests it. We shall, therefore, never be able to cure homeopathically if we do not in every case of disease, acute or chronic, observe the altered state of the disposition and mind as a part of the totality of the symptoms; and when the remedy is working curatively, these *improve first*—from above down. So the Hahnemannian does not have to guess, he *knows* when his selection has been a good one, regardless of what the patient thinks about it.

And here is another one of the greatest lessons you will have to learn: As long as improvement continues, let the case *absolutely alone*; even if the image has changed by the re-appearance of old symptoms—symptoms, perhaps, of years ago, and the patient continues to grow better, *let well enough alone*. Don't change the remedy and don't repeat the old one.

Again: There are two kinds of aggravation. One in which the symptoms of the disease are growing stronger, more intense, and the patient weaker and worse; and the other known as the "homeopathic aggravation." The latter consists in a preponderance of the action of the remedy which is perfectly homeopathic to the individual case of disease which, being so similar to the natural disease, that it seems to the patient and often to the physician to be an aggravation of the original disease. This is caused by the dose being somewhat too large and lasts but an hour or a few hours after its ingestion.

On the other hand, if new symptoms appear, a sure sign that the remedy chosen is not homeopathic to the case, though the patient assures you that he is better, *do not believe a word of it*. His state is worse as will soon be perfectly apparent. Of course, the homeopathic aggravation in chronic cases may be prolonged, then a cure follow; but in acute sickness such is not the case. You may sometimes wait weeks or months before the good prescription manifests itself, then the patient goes on to a rapid recovery.

True, if you strike at the deranged vital force and a cutaneous eruption, swollen feet, restored gonorrhoeal discharge, a renewed chancre or some other external evidence

manifests itself as a proof that the disease is passing from within out, the uneducated patient thinks he is worse and you are liable to be discharged because of your wisdom. A word of warning beforehand will often save you this humiliation.

The only regret I ever had in such cases, where in their ignorance they are determined to have palliation or suppression and to this end send for a mongrel or a "regular," is that they generally die before I get a chance to say, "I told you so." But when we reflect that about one homeopathic practitioner in five hundred—if that—understands homeopathic principles, we should not expect too much of the laity, even after we have tried to teach them.

One of the finest demonstrations of the law of cure is seen in a new, suppurating, alarming chancre, which *never* gets well when nature is left wholly to her own resources; but when the indicated remedy in the proper potency is put on the tongue and presently you see the chancre begin to subside, you *know* the disease is being extinguished within; that the case is getting well *from within out* and when the chancre fades away the patient is free.

Now you will be told that you will starve to death if you follow strictly Hahnemannian lines; that the reason the great majority of so-called homeopaths resort to old school methods so largely is because there is more money in it; and they say, "I am after the *mon.*" But the truth is the majority of these professed homeopaths do the best they can according to their knowledge. The chief trouble is *they do not know how to make these homeopathic cures.* The greater skill the larger the fees; and the more a doctor knows about what Hahnemann taught the greater cures he can make and the more money he can make. Most any man can shovel dirt, just as most any doctor can give traditional dope; but it takes *gray matter* to practice homeopathy.

Now, in conclusion, I observe in your last letter to me that you think I am either prejudiced against motor cars or jealous of those fellow physicians who own them. Not at all. If I were able, and not afraid of them, I would own one of the best. But my sole purpose in the reference was to impress upon your mind the fact that a motor car *does not make the physician.* Better walk and know how to prescribe when you get there, rather than ride in the finest car at break-neck speed only to realize in your heart on arriving that *you do not know what to do!* If I should get desperately sick, doctor,

I speak now for a true, Hahnemannian homeopath, *if he has to walk!*

And the echo said, "*Most any man can shovel dirt, just as most any doctor can give traditional dope; but it takes gray matter to practice homeopathy.*"

In my next and last letter I shall speak of the *obstacles to recovery and how to remove them.*

Yours for pure homeopathy,

J. C. HOLLOWAY, M. D., *Galesburg, Ill.*



CASES CURED BY HOMOEOPATHIC TREATMENT.

BY JAMES TYLER KENT, M. D.

CASE I—Miss H., age 29. While attending school broke down in health from overwork. This state of nervous prostration and brainfag had lasted four years.

Study was impossible, as it produced trembling and congestive headaches. She became violently excited from even short conversation with friends.

The only thing possible for her to do was light housework.

There was aversion to all food, but especially to meat, potatoes and bread; no thirst; light colored stool; likes cool better than warm air; sleepless; suffered occasional from occipital headaches; rheumatic pains in left shoulder; she suffered much from sciatica.

Lecithin, 1-M, two doses, five weeks apart, and then two doses, 10-M, far apart, cured her entirely.

She has since finished her university course and taken her degree.

* * *

Case II—Miss B., age 27. Had suffered great tortures with sciatica. Pain low down in back and sciatic on right side; severe in hollow of knee; constantly taking cold.

Lumbar region feels so weak.

Pain in hypogastrium first day of menses; menstrual flow only three days and clotted.

Tired all the time, wants to rest but cannot

Has been operated on for appendicitis

When walking, feels that she must pull the right leg forward to make it go.

Cannot lie on the back as it increases the sacral pain; numbness when lying on this painful right leg; distress in the right sciatic when lying on it.

Exertion brings on pain in the sciatic; pain in the right sciatic during menses; pains all worse during rest.

She got *rhus tox.*, 12-M, April 10th; also May 1st and 16th. The first powder relieved the pain in three days and when it returned the remedy was repeatd. No pain and good health after the third dose. She had taken old school treatment and osteopathy for two years, during which time she had steadily grown worse.

* * *

Case III—Mr. C., age 54. Passes blood with nearly every stool; has no hemorrhoids nor any other trouble with anus; what he calls a "twisting" pain in abdomen followed by stool; many loose stools. Has had several similar attacks which he now consults me for. He is a carpenter and while at work may be taken with a hasty call for stool and manages to reach the closet, but fails to remove or lower his garments and the first thing he knows returns to consciousness to find has passed stool and urine in clothing.

Says he is generally unconscious about thirty minutes; has no knowledge beyond moment of reaching the closet.

Seizure begins with the "twisting pain" in the abdomen; the stool is copious and partly formed; next stool is generally normal.

Sulphur, 10-M, and he reports that he is in better general health than for twelve years; has never had recurrence. The prescription was made June 29th, 1907.

Chicago, Illinois, July 20th, 1910.





SPECIAL ARTICLES



CINA.*

JULIA C. LOOS, M. D., H. M.

NO TRUE MEMBER of the Cina family is agreeable company, either to himself or to others. They are dissatisfied, complaining, obstinate, sensitive, to extreme touchiness, mental and physical, demanding constant attention, yet cannot tolerate people to approach them near enough to touch or caress. The children, even infants, scream and strike at every one who attempts to touch them or sometimes even look at them. The little ones are so unhappy and uncomfortable, they want to be carried and coax to be carried, but as soon as you attempt to pick them up, there is a scream and a protest. The handling is intolerable until the motion of being carried is realized, then they are quiet. Speaking to them or offering consolation or amusement in any form will renew the screaming and the cross protests. There is the desire for attention and entertainment combined with the intolerance of being touched or looked at.

The mental condition will suggest chamomilla to one familiar with that remedy, but the facial appearance will suggest carbolic acid and stramonium. The cheeks are frequently flushed and this accentuates the paleness about the mouth. This may be accompanied also by bluish rings below the eyes, which appear dull, listless and the tissues about the eyes hollow. The suggestion of chamomilla may also be present in one red cheek and one pale. The aspect of the face is drawn and sickly. These people have a habit of rubbing the nose to relieve the itching. You may often see the infant rubbing its face against the shoulder of the nurse and older ones, picking at the nostril and rubbing the nose as hard as they can endure. Observe the habits of the infant further and you will think it never has enough to feed it. The usual amount of milk considered suitable for the age of the child is consumed quickly or slowly and the child holds fast to the bottle in the effort to take more or cries for more and takes it greedily when offered. If the appetite is indulged, the milk may be vomited but the craving is not satisfied; hunger after eating a reasonable quantity. As the milk or other fluid is taken, the

*Presented to I. H. A. meeting, 1910.

gurgling in the oesophagus may be heard all the length of the tube (ars. alb., cupr., helleborus). Sour odor to the breath, sour eructations and sour vomiting are also present, in children or adults, with the gnawing sensation or hunger after eating. This hunger leads to demands for many and different things; nothing appears to satisfy. These and many intestinal disorders lead some to think of cina as a worm medicine. The symptoms are such as often accompany the presence of intestinal worms, but the appearance and the discomfort and the irritability are frequently observed where no worms are discovered. They are a secondary consideration. If the worms are present and the cina characteristics are absent, cina will not prove to be *the* worm medicine for that case.

There are many symptoms that appear to be reflex from the organs controlled by the vagus nerve. Grinding motion of teeth in sleep, restless tossing in sleep, waking frightened at night, staring about as if seeing strange sights, twitchings, spasms, often called worm sapsms. These conditions may all be present without the appearance of worms.

Throughout the remedy are symptoms of brain and nervous disorder; hydrocephaloid groups of symptoms; emaciation from impaired nutrition; excessive sensitiveness of nerve filaments as seen in the aversion to being touched; in sensitiveness of the larynx, the reflex spasms from intestinal irritation and tendency to spasms from emotional disturbance. The cina child is difficult to manage because punishment or any violence induces spasms and most violent opposition and fighting. There are brain effects from heat and various functional disturbances from heat, warm weather or exposure to the sun. There is the general amelioration from motion and also relief from rolling the head in cases of headache. When cina has headache she wants her hair down, hanging loose and rolls it from side to side.

In chill there is thirst and nausea or even vomiting. The heat is accompanied by glowing red cheeks and no thirst. With these as with any of the complaints to which these people are subject, the foregoing general symptoms will be found associated. It has been perceived in conditions of chorea, hydrocephaloid, remittent and intermittent fever, amenorrhoea, aphomia, paraplegia, bronchitis, scarlatina, pertussis typhoid and effects from onanism beside the proverbial worm complaints.

One small boy, of three years, presented red cheeks with

pale face about the mouth, cold hands and feet, perspiration after waking and yawning after waking from afternoon nap. His mother reported that he vomited after eating slightly more than usual and he complained of nausea on waking and "pain in the mouth." Cina made him comfortable.

A girl of nearly three years was troubled with hard, dry cough, occurring day and night, waking her at 11 p. m. and preventing rest. Some times it was croupy in sound. This was accompanied by constipation; small, narrow, evacuations for a few days; urination during sleep, and watery coryza.

There appeared no determining symptoms for a prescription, though there was an attempt to check the trouble with spongia, then sulphur. She developed the peculiar feature of waking frightened at night, with violent paroxysms of screaming for no apparent cause, permitting no one to speak to her or approach her and declaring that she did not want to or could not be good. Cina cleared away, not only the nervousness and naughtiness, but also the tormenting cough.

A boy of fourteen months proved a very difficult child for his mother to manage because of his temper. At this age he developed a gradually increasing inco-ordination in walking. His steps, which had been firm and steady, became tottery and he stumbled, finally was unable to stand. When sitting he acted as if something pained and he preferred to recline. There was not only general languor but decided drooping of the eye-lids. At first the voice was whiny and high-pitched; then he screamed with impatience; squealing, striking, throwing head about; striking head against mother's shoulder; against the chairs or floor; striking aside anything offered to him; satisfied with nothing; continual crying with tears or merely high-pitched screaming; making opposition to every effort to pacify him; contented only when carried; interested in nothing.

Inco-ordination extended to arms; the eyes were sensitive to light and presented the appearance of strabismus between the slightly opened lids. When reclining, head rolled or jerked; prefers to recline on abdomen. Face white about the mouth, especially after crying, when the other parts of face and head are dull red. Sometimes one cheek red and other pale. For a few days this child occupied not only all his mother's time, but also all her strength and resource to manage him in his tantrums and weakness, but especially his demands to be carried and difficulty in holding him. In less than twenty-four hours after a dose of cina, his disposition

was so vastly improved, his mother thought it was a miracle. In spite of this prompt response, it was six weeks before the co-ordination of legs in walking was completely established so that he could walk independently and even then stumbling occurred more than normally in one of his age. With this there was also a disposition to have the head drooped forward. This revealed the nature of the disturbance, made the diagnosis possible, but *cina* made the diagnosis unnecessary on a death certificate. During the next three years occasions recurred at intervals when this same remedy was called for by restlessness at night; waking, in fright; seeing strange things; sitting up suddenly in bed; screaming; sometimes enuresis day and night and digestive disorders.

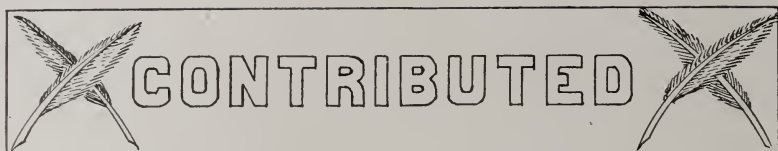
A child of eleven years, with a history of having had chicken pox, measles, pertussis, blood poison, following a cat scratch and a swollen gland in neck for three months, appeared in good health following three years of country life. On going to the city her health gradually declined; from a plump, rosy-cheeked, bright-eyed girl she emaciated to a pale, dull-eyed child with skin drawn over her bones. Usually of a happy disposition, she was peevish and irritable at trifles when nervous or disturbed about her school work. At such times and when suffering any physical disturbance, her face was pale about the mouth, cheeks red and a sunken appearance below the eyes. Development appeared slow. She was active; always in motion, but when resting reclined on abdomen. She was ameliorated in open air, nervous after studying in the evening, discouraged, unable to study after an hour or so of application; embarrassed in reciting.

She suffered from constipation, difficulty in retaining urine, but most troublesome of all was sick headaches. Pain over one eye or both, continuing twelve hours at a time. This wakened her at night, with fever, delusions, staring eyes, frightened, wild expression of countenance and pain in stomach.

This image of anaemia promptly changed with the use of *cina*. In four months' time her mother said she was so well she did not need any more treatment and she could scarcely be recognized as the child of a few months previous.

This remedy is the only one to accomplish such results in members of the *cina* tribe and deserves thorough acquaintance by all who desire to be prepared for the miracles of homeopathy.

Harrisburg, Pennsylvania.



SOME POINTS REGARDING THE NATIONAL LEAGUE FOR MEDICAL FREEDOM.

AN article has been published broadcast over the United States, signed by Professor Irving Fisher, Chairman of the so-called "Committee of One Hundred on National Health," advocating the Owen Bill for the establishment of a National Health Department.

Boiled down this article: 1. Asserts that this movement for the National Government to "benevolently assimilate" the powers heretofore held by each state over the health of its own people is in response to a spontaneous outburst of National sentiment.

2. That the National League for Medical Freedom, of which I have the honor to be president, does not oppose such a department because the members of the League believe it unconstitutional, an encroachment on states' rights and a menace to all schools of healing except the allopathic medical profession, but because the League represents "the quack medicine interests and others who have reason to fear the Pure Food and Drugs Act."

In the "bulletin" which Professor Fisher sent along with this letter to the *Times*, and other newspapers. Professor Fisher says that the statement of Hiram J. Messenger that the "Committee of One Hundred" was appointed by the American Medical Association (Senate Hearing, Owen Bill, Page 30) was obviously a slip of the tongue or of the pen."

Just to put things on a fair and honest basis with the Professor, we are perfectly willing to accept his statement and give him the benefit of it in our literature hereafter.

But the Committee of One Hundred is really not an issue.

Neither is the issue the conscientious physician laboring

patriotically day by day to alleviate suffering and who makes up by far the majority of the profession and even the majority of the membership of the American Medical Association.

The real issue is political medicine. The real issue is whether or not a clique of political doctors exploiting the American Medical Association in the face of the ignorance of or against the will of its majority, shall fool Congress into putting the powers of the Federal Government behind their schemes for aggrandizement.

The real issue is whether or not the Government will lend its aid to an already existing "medico-political trust," as one of its own members calls the American Medical Association; whether we are to have medical freedom or attempted medical compulsion in this country; whether people are going to be allowed to choose their own medical creeds along with their religious and moral creeds, without interference, or whether we are to have state medicine, as obnoxious as state religion would be.

If any reader of the *Times* will write me or send to his Senator or Representative for "Part IV. or V. of the Report of the House Hearings relating to the health activities of the General Government," he will get the proof of years of machination to this end and the entire plan from the published declarations of the political heads of the American Medical Association themselves.

Briefly the situation is this: There are now nearly seven thousand doctors in the employ of the United States Government.

All have had to submit to allopathic examination tests and are the "regular" doctors.

The allopaths now control nine-tenths of the health machinery of the states, but "don't dare enforce the laws" against other schools, as an Iowa doctor puts it.

The dozen bills introduced at this session of Congress were all more or less boldly designed to "co-ordinate the State and National Health Departments" into a power that no one clique of men would have a right to control on any

subject, much less a clique of politicians to control on a subject so vital as people's life or death.

Professor Fisher says: "Under our Constitution, the Federal Government could not, if it would, regulate the practice of medicine."

The President of the American Medical Association before the Senate hearing on the Owen Bill, said: "I would simply like to throw out the suggestion that it may be that the Federal Government can exercise larger powers in this matter than is generally supposed to be the case."

Dr. Henry O. Marcy, former president of the American Medical Association, in an interview in the Boston *Traveler* on May 16th, said of the opposition to the Owen Bill: "It is the old cry of the incompetents who practice under various designations against legislation that will tend to bar them from practice and keep the practice in the hands of those who will not be a menace to the public health."

A leading editorial in the Cincinnati, Ohio, *Lancet Clinic* of June 4th, 1910, signed by Ralph Reed, contains a confession that clearly points to the real purpose of the legislation which Dr. Reed, also of Cincinnati and Chairman of the Legislative Committee of the American Medical Association, is seeking to secure. It says:

"Of course a department of public health looks dangerous to the Christian Scientists and Osteopaths. What the states have not been able to do, the United States may succeed in doing; that is, putting a stop to these forms of medical graft."

The view of constitutional interpretation is so broad today at Washington, the authority under all the health bills proposed so vague, and the handling of Government bureaus has always been such as to make any citizen have a right to fear that any health bureau *could* do what it *would*.

The constant experiences of the advocates of other schools of healing with the allopaths in the various states of the Union give natural rise to the fear that such a bureau of probably 10,000 national allopathic physicians allied to 15,000 more state allopathic physicians, most of whom believe in the

infallibility of their own school and the rights of "medical compulsion," *would* do what it *could*.

It may be said that a health department is hardly an issue, now. That's principally because Congress didn't believe in it very strongly in the first place and the letter of the "Legislative Committee" of the American Medical Association, under date of May 10th, calling on doctors all over the country to work to defeat Congressmen who wouldn't promise to support it, probably finished the chances of a health department for years to come.

But the Interstate and Foreign Commerce Committee of the House, composed of careful and able men, have been made to believe that perhaps legislation should enlarge the scope of the present "Marine Hospital Service," so as to empower it to co-operate with states to stop epidemics and prevent the pollution of streams.

It is the wolf's nose. To guard the country against remote possible evils, this Committee would, if it favorably reported any such legislation, open the door to some imminent *certain* evils.

The Mann Bill, providing for this work, would authorize practically anything and everything obnoxious in administration that the Owen Bill would authorize.

The League, however, believes that no bill will be reported this session and by next session the country will have had sufficient chance to weigh the subject and at least know what it is authorizing, if it passes legislation

The Professor states that the president of the League is a Christian Science editor. This is untrue, as Professor Fisher would have known if he had read my writings. I am not a Christian Scientist and have no connection whatever with the Christian Science organization.

Professor Fisher finds difficulty in accepting the affidavits twice made by officers of this League that we are in no way allied with, in sympathy with or in receipt of any financial aid whatever from what he calls quack or patent medicine "pure food and drug" interests.

It is apparently hard for the Professor to understand how or why such a movement as the League would be possible without funds or sympathy from such sources.

If the Professor would secure the consent of one or two representatives of the Committee of One Hundred, say Rev Lyman Abbott, Joseph H. Choate, Walter H. Page, Melville E. Stone or Henry Phipps of New York City, or Edward K. Bok of Philadelphia, to meet me at any given time and place, I will be very glad to tell them about the source of our contributions.

I will even tell them how much we have spent to tell our story to the public open and above board in the display advertising columns instead of trying to work the editors to "say something against these people." which I quote from the last bulletin of the Professor's to the newspapers—"these people" referring to the National League for Medical Freedom.

I will also have present our advertising agent and the "patent medicine manufacturer" who tried to "bribe" one of Professor Fisher's "health writers," according to his bulletin.

These "patent medicine manufacturers" will even tell the stories—if the members of the Committee of One Hundred want to hear them—of their unsuccessful efforts to secure relief from sickness through the "regular" methods and their insurgency to "irregular" methods, by which they had health and happiness restored to them.

I will also have the "representatives of these corrupt commercial interests" tell some of the things the unsuccessful orthodox healers have tried to put them up against since they were healed by unorthodox methods and explain why we are willing to put up all the money necessary for a finish fight with political medicine and an effort to establish a state and national system of medical compulsion in the United States of America.

Very truly yours,

B. O. FLOWER.

*President National League for Medical Freedom, 9084
Metropolitan Building, New York City.*



EDITORIAL SECTION



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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

REAL MONEY TRANSACTION. One of the best things of the convention and one which will always stand out for the sixty-sixth session in general and Dr. Ward in particular, was when he, as retiring President of the Institute, gave his personal check to the Treasurer to cover its indebtedness in the journal matter, thus making the American Institute a solvent body. Cheers, more cheers and then still more cheers. After all Dr. Ward had done and then to do this; there can be no doubt as to his feeling in the matter or his loyalty to the cause of homeopathy.

E. B. SWERDFEGER.



COLORADO HOMEOPATHIC STATE MEETING. From present indications it is not at all improbable the forthcoming meeting of the Colorado Homeopathic Society will be one of the largest, in point of attendance, that the society has held for a number of years.

Added to this the scientific and social side of the sessions will be full and running over with something interesting from

both points of view. Added to the regular program a special session will be held the evening of September 13th, in the Ladies' Ordinary of the Brown Palace Hotel, which will be open to the public and profession of the city, and it is hoped that all schools of practice will take advantage of this opportunity of hearing distinguished members of the new school tell of its superiority over all other forms of medical practice.

On the occasion of the public meeting above mentioned, Dr. H. R. Arndt, of San Francisco, Field Secretary of the American Institute of Homeopathy, will deliver an address, the subject of which we are unable to announce at this time, but as Dr. Arndt is a man well posted upon all subjects pertaining to homeopathy there is no doubt about the delightful part this will play in the program.

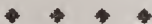
Dr. C. E. Fisher has kindly consented to honor the occasion with his presence and will entertain the meeting with a short address, the subject of which will be "The Physical Sanctity of Matrimony." As a great majority of Colorado homeopaths are familiar with Dr. Fisher's ability as an entertaining talker, there is no need of our saying that all will look forward to this feature of the meeting with much pleasure.

Invite your friends and make this meeting a rousing one; Homeopathy is to have an inning the 13th and 14th of this month and it is the duty of every homeopath in the city and state to exert themselves toward making this particular meeting a splendid success.

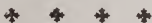


MISCELLANEOUS

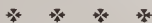
Remember the meeting of the Colorado State Society, Brown Palace Hotel, Denver, September 13th and 14th, 1910.



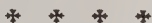
Dr. Sharpley, health commissioner of Denver, is working to have the pest house located nearer the city. Good idea.



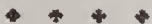
Dr. W. W. Sherwood, Chicago, announces that on and after Saturday, August 27th, 1910, he will be located at 3517 Cottage Grove Avenue.



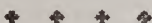
The many friends of Dr. W. F. Burg will regret to learn of the serious sickness which has confined him to his bed during the past month.



"They say" that Dr. T. E. Costain will be the chairman of the transportation committee, Naragansett meeting of the A. I. H., 1911. That appointment would be hard to beat



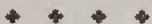
Dr. Twining, of Aspen, Colo., at one time a student in the Denver Homeopathic College, is in Denver attending the called session of the legislature, being senator from his county.



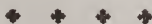
Dr. J. W. Mastin made a professional visit to Glenwood Springs the 13th of last month. He pronounces G-l-e-n-w-o-o-d "delightful," and the trip over the Midland most enjoyable.



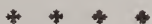
The next meeting of the American Institute of Homeopathy will be held at Naragansett Pier, R. I., latter part of June and first of July, 1911. Make your plans early and go if you have to walk.



Dr. Joseph Hensley, Oklahoma City, Okla., was a visitor in Denver one of the hot days we had last July. The doctor was enthusiastic in his praises of the Pasadena meeting and is one of the many who feel that it was good to be there.



One of the first official acts of Dr. Arndt, as field secretary of the American Institute of Homeopathy, will be to tell the profession and people of Denver all about homeopathy. He will be present at the State Society the 13th and 14th of this month.



Dr. C. E. Fisher, he of the transportation committee fame, was a sojourner for a short time the latter part of last month. One to hear

Fisher tell of the delightful time every one had *enroute* and during the Pasadena meeting of the American Institute, they would resolve never to miss one of these meetings in the future under any circumstances. Dr. Fisher hopes he has established the disease of "officialtrainitis" so thoroughly that in the future no other form of travel will suit A. I. H. members. Let us hope for the best.



The Hering Quarterly, vol. 3, number 1, devoted to Hahnemannian homeopathy, has been received. It shows Hering to be in an unusually prosperous condition. This was the annual commencement number and is ably edited by E. B. Beckwith, M. D.



The following postal card is sufficient evidence that the reception given the A. I. H. members in Denver, the 6th of last July, was not wholly wasted. Dr. James Krause, 419 Boylston Street, Boston, writes editor of *The Critique*, under date of August 11th: "Greetings and thanks to you and your colleagues for the beautiful morning in Denver."



Mrs. Matilda Irvine, aged 78 years, and for nearly twenty-five years a resident of Denver, died at the home of her daughter, Dr. Lillian Pollock, wife of Benjamin Pollock of the district attorney's office, 3434 East Seventeenth avenue, recently. She was one of eleven children of Joseph Johnson, a prominent attorney of Butler, Pennsylvania.



The fifty-first annual announcement, 1910-11, the New York Homeopathic Medical College and Flower Hospital, shows these institutions to be in a most flourishing condition. Among the able teachers of homeopathy on the staff of this institution we notice the name of Dr. Rudolph F. Rabe, which insures something of the right sort in his department.



The second annual meeting of the American Association of Clinical Research will be held in Boston on September 28th and 29th, 1910. Some very valuable contributions on Researches in Medicine and Surgery, in Prophylactic and Anaphylactic Medicine, in Mental Medicine, in Radiotherapeutics, in Metabolism, etc., are promised. There will also be a public meeting.



The Denver Medical Times speaks of those composing the meeting of the National Federation for Medical Freedom as though the thoughts of anyone opposing their beloved American Medical left a very bad taste in its mouth. We put in with it, however, on the J. Cook, Jr., proposition. About one more outbreak by J. Cook, Jr., and the League might as well pack its trunk and go hence.



Just to convince the easily influenced regarding the fast-approaching death of homeopathy we will say the following subscriptions, legacies and donations have been received in the following cities recently, all devoted to homeopathic institutions: In Chicago, \$75,000 for the Homeopathic

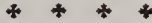
hospital and \$35,000 for a nurses' home; in Philadelphia, \$100,000 from Mr. Hering as a fund for the perpetuation of homeopathy; in Philadelphia a legacy of \$125,000 from the late Mrs. Elkins, for the Homeopathic hospital.



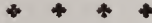
Dr. Hills Cole, of New York City, not satisfied with his previous visit to Denver on the occasion of the A. I. H. blow out July 6th, or else too well satisfied with it, made a return trip to Denver the fore part of last month. Dr. Cole was profuse in his praises of our Pacific coast brethren and their entertainment of the American Institute, and had many nice things to say of the Denver reception. Thanks.



On August 22nd, the Western Pacific Railway, in connection with the D. & R. G., inaugurated through train service between Denver and San Francisco. This new service includes both standard and tourist sleepers and prospective travelers should consult representatives of either line in Denver for rates, time schedules and other information as this new line is much to be preferred over any other between Denver and San Francisco.



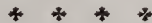
Owing to the appointment of Dr. H. R. Arndt to the position of field secretary of the American Institute of Homeopathy, Dr. Wm. Boericke will, hereafter, assume editorial supervision of the *Pacific Coast Journal of Homeopathy*. Fortunately for homeopathy there is much good material on the Pacific coast to fill this position, but this particular person is perhaps just a little the best suited of any. Continued success to the *Journal* is our wish.



Des Moines, Iowa, Aug. 6.—One-third of the babies in Iowa under 1 year of age have died this summer, according to statistics collected by G. H. Sumner, secretary of the Iowa state board of health, which were made public today. Cholera infantum, infantile paralysis, poor milk and improper care are given as causes. The board of health next week will issue a special health bulletin instructing parents as to the proper care of children.—*Daily Paper*.



We have received a very interesting letter from Dr. Wm. R. Welch, dated at Berlin, Germany, July 25th, which we would like very much to reproduce in these pages. The Doctor, however, forgot the rule which prevents the publication of communications written upon both sides of the paper. His many friends in this city will be glad to know he has enjoyed himself immensely since leaving Denver and we hope he will return in time to attend the State Society meeting this month.



A new hospital is being erected in San Francisco, by Dr. Florence Ward. Dr. Ward is one of the most expert and capable surgeons in the country, far above any other of her sex in the world perhaps, and homeopathy will receive another nail into its coffin by the building of this new institution. We suppose that is what the A. M. A. would call it, inasmuch as that association and the members thereof are constantly predicting its death. Come on, Mr. Death!

CHICAGO LETTER.

Dr. R. C. Dienst, Hahn, '10, is the proud father of a baby girl.

Dr. J. G. Myers, Hahn, '11, is the new interne in Streeter Hospital, Chicago.

Dr. R. O. Howard, Hahn, '09, is now located at Halsted, Nebr., and reports good business.

Dr. I. H. Lockwood, Hahn, '09, after spending a year in New York City, has returned to Chicago.

Dr. F. W. Sigmund, and Dr. J. N. Ewbank, Hahn, '10, are acting as internes in Hahnemann Hospital, Chicago.

Several of the Chicago attendants at the meeting of the A. I. H. spent their vacations in the West. All report delightful trips.

Doctors don't forget there are two good Homeopathic Schools in Chicago. Send in your students to these colleges. Courses open September 26th.

Dr. G. A. DesJardien, Hahn, '08, has been at home ill for several months past. We are glad to report he has recovered and is now looking for a good location.

Chicago, Illinois, August 18th, 1910.



LETTER FROM THE PRESIDENT.

TO THE PROFESSION :

The Colorado Homeopathic Society will meet this year in Denver at the Brown Palace Hotel on September 13th and 14th. It is earnestly hoped that a large number will be present and take part in the proceedings. A fine program will be arranged by the local committee and it is important that the meeting this year shall be made a representative one for our school in this state. We are able to announce definitely that Professor H. R. Arndt, of San Francisco, the new "field secretary" of the American Institute of Homeopathy, will be present and deliver an address, on the evening of the 13th. Professor Arndt's reputation as an author and editor in homeopathic literature is world-wide and we are most fortunate in securing his presence at our next meeting. It is a pleasure also to announce that Dr. C. E. Fisher, of Chicago, has consented to honor us with his attendance, and we may all expect much of interest from this versalite genius.

The secretary wishes especially to urge upon the chairmen of bureaus to hurry up their reports so that he can get his program into type not later than September 3rd.

It is due our school and to our patrons that this year's meeting of the Colorado Society be made notable by a large attendance and an enthusiastic practical presentation of our cause. There is no "therapeutic nihilism" in homeopathy. Come and meet with us whether you are a member of the society or not. We want every doctor in the State to meet our distinguished guests and help us entertain them.

S. S. SMYTHE, M. D., *President*

C. M. WORTH, M. D., *Secretary.*

HOMOEOPATHIC STATE SOCIETY.

Secretary Worth of the Colorado State Society has been using every effort in his power to present the entire program of the forthcoming session of the Colorado Society, to the readers of this issue of THE CRITIQUE. Thus far, however, he has succeeded in securing only the following information along these lines and while the program is only partially outlined it is sufficient to show there will be something doing at the Brown Palace Hotel the 13th and 14th of the present month. The program, as received by Dr. Worth up to the time of our going to press, is as follows:

Bureau of Materia Medica.

J. W. CRAIG, M. D., AULT, COLO., CHAIRMAN.

- 1—Baptesia C. M. Worth, M. D.
- 2—Kali Mur. J. W. Craig, M. D.

Bureau of Tuberculosis.

WALTER J. KING, M. D., GOLDEN, COLO., CHAIRMAN.

- 1—What Place Has Homeopathy in the Treatment of Tuberculosis? W. J. King, M. D.
- 2—Paper (subject not announced) E. L. Sadler, M. D.

Bureau of Dermatology.

MARGARET H. BEELER, M. D., DENVER, CHAIRWOMAN.

- 1—Psoriasis M. H. Beeler, M. D.

Bureau of Pathology and Bacteriology.

J. B. BROWN, M. D., DENVER, CHAIRMAN.

- 1—Some Pathological Conditions Resulting From Neglect of the Mouth of Children R. P. McPhee, M. D., D. D. S.
- 2—The Progress of Bacteriological Research.... E. B. Swerdfeger, M. D.
- 3—The Pathological Sequence of Appendicitis..... J. B. Brown, M. D.

Bureau of Gynecology.

L. E. BARTZ, M. D., WINDSOR, COLO., CHAIRMAN.

- 1—When Shall We Perform Casarean Section and Why?..... J. W. Harris, M. D.
- 2—Chronic Endocervicitis and Endocarditis..... L. Z. Bartz, M. D.

Bureau of Theory and Practice of Homeopathy.

N. G. BURNHAM, M. D. DENVER, CHAIRMAN.

- 1—Theory and Practice N. G. Burnham, M. D.
- 2—Diphtheria G. E. Brown, M. D.
- 3—The Present Status of Medical Tolerance..... G. E. Fisher, M. D.

Bureau of Surgery.

W. R. WELCH, M. D. DENVER, CHAIRMAN.

- 1—Gastric Ulcer, Perforation of Clinton Enos, M. D.
- 2—Rectal Surgery L. C. Hedges, M. D.
- 3—Subject Not Announced W. R. Welch, M. D.

Bureau of Pediatrics.

W. A. JONES, M. D., DENVER, CHAIRMAN.

- 1—Bronchial and Lung Diseases in Children..... W. A. Jones, M. D.
- 2—Some Mechanical and Phy Chic Features in Pediatrics..... N. A. Bolles, M. D.
- 3—Undecended and Misplaced Testicle Clinton Enos, M. D.

Bureau of Obstetrics.

J. W. MASTIN, M. D., DENVER, CHAIRMAN.

- 1—The Practice of Obstetrics from a Homeopathic Standpoint.....
G. Phillips, M. D.
 2—Management of PregnancyJ. W. Mastin, M. D.

Up to the time of our going to press the chairmen of the following bureaus had failed to report their contributions to the program: Sanitary Science; Mental and Nervous Diseases; Ophthalmology and Otology; so it is plain to be seen that the program is but poorly outlined by the foregoing. As the gentlemen who are in charge of these missing members have ever been faithful in the discharge of similar duties on former occasions, it is not at all likely they will fail in representation at the forthcoming meeting.

The program committee, of which Dr. Grant S. Peck is chairman, will, no doubt, provide much in the way of entertainment which at this time cannot be made public. There is still some twenty days from the time of this writing, until the meeting will be held, and much may be done in that time to make the program of scientific papers and the entertainment features more elaborate than those provided at any previous session. Reports, up to this time, indicate an unusually large and enthusiastic meeting. THE CRITIQUE believes the meeting on the 13th and 14th of this month will be a banner event and when Secretary Worth issues his printed program it will be found that everyone had responded with their contributions to the scientific program and that the program committee had provided something worth while in the way of entertainment. Don't forget the dates: September 13th and 14th, at the Brown Palace hotel.



PENNSYLVANIA.

With the present issue, Pennsylvania State news items have been published consecutively, month for month, in ten of the more important homeopathic medical journals throughout the United States during the past year, and from all reports received from homeopathic practitioners throughout the State of Pennsylvania, the news items have been accorded a royal welcome. They have stimulated a better feeling of cordiality and fraternalism among the homeopaths throughout the State; they have kept the homeopathic brethren in touch with one another; they have let them know what has been going on throughout the Counties and State; and have, as well, kept Pennsylvania's State neighbors in touch with what has been going on in the "Keystone State" of homeopathy.

Homeopathy to-day in the State of Pennsylvania is at its high tide. The homeopaths throughout the State have never been better organized, and there has never been a better feeling of cordiality and harmony existing among them.

The State Medical Society will hold its annual session at Williamsport on September 20th, 21st and 22nd, for which meeting excellent programs have been prepared, both from the scientific and social standpoint. The committee in charge, consisting of Drs. Adelbert D. Dye, Hannah C. Reinhold, F. S. Smith and E. C. Blackburn, have been more than busy in arranging details for what is hoped will be a more than successful meeting. The headquarters of the meeting will be at the Park Hotel, Williamsport. The president of the Society, Dr. H. F. Schantz, of Reading, assures a president's address which will teem with important topics of interest to the homeopathic medical profession of the State of Penn-

sylvania, in which he promises to mince no words in telling of the things which he thinks should have stress laid upon them.

The Hahnemann Medical College in the City of Philadelphia has made changes in its faculty during the past year, Dr. W. B. Van Lennep having been elected as its new dean in place of Dr. Herbert L. Northrop, who was not a candidate for re-election. Dr. Van Lennep looks forward to a busy year's work, and assures a fair and square deal for all. The new dean, at the annual banquet of the Alumni Association, announced the donation of the Hearing endowment fund for the establishment of the Hering Chair of Homeopathic Research. Dr. Van Lennep has now further announced the department as being in the hands of Dr. O. S. Haines, Dr. Edwin Lightner Nesbit, of Bryn Mawr, Pa., as director of the laboratories, which shall be under the general supervision of a committee for the present consisting of Drs. O. S. Haines, S. W. Sappington, and Dr. E. L. Nesbit. Personal views as to the requirements of the situation will be embodied in an address by Dr. Edwin Lightner Nesbit, as chairman of the *Materia Medica* Section, before the annual meeting of the Homeopathic State Medical Society to be held at Williamsport in September. The incoming class of the Hahneman Medical College at the present time is far in excess of those who had registered up until this time of last year, which argues well for an unusually large Freshman class.

Dr. Gilbert J. Palen has been appointed chairman of the Hospital Committee, and is most actively engaged in the details of the work of the hospital. Dr. D. Bushrod James has been elected professor of gynecology to fill the chair made vacant by the recent death of J. E. James, Sr. Dr. G. Harlan Wells has been appointed a clinical chief of the morning dispensary of the hospital. Dr. W. N. Sylvis has been appointed on the surgical staff of the hospital.

There is at the present time in course of erection a new receiving ward, which is being built to the north wing of the main hospital building at a cost of \$60,000. The building is to be four stories in height, and is to be finished by the opening of the college session. There will be sixty additional beds for women and children, there will be a new receiving ward on the first floor, new quarters for the resident physicians, and will give increased facilities for clinical teaching purposes.

Dr. W. B. Van Lennep further announces that, as soon as the money donated by the late Mrs. Elkins is available, a new dispensary building will be erected which will contain new and improved pathological laboratories and new dispensary department for those which are in need of it, and will be modernly equipped in all its aspects. This will add greater teaching facilities, as there will be constructed a new amphitheatre for medical clinical teaching purposes.

The various county and sectional societies throughout the State during the past year have, indeed, been most prosperous, have delivered and published many papers of scientific interest and of marked importance to the homeopathic medical profession throughout the world.

The secretaries of all medical societies throughout the State of Pennsylvania are cordially invited to send meeting notices of their respective societies to the undersigned, which will assure, as aforesaid, the publication of their transactions in ten of the more important homeopathic medical journals throughout the United States. Personal news items of interest as well can be forwarded, and which will be cheerfully accepted.

May the coming year's work throughout the State of Pennsylvania be as productive of good for the homeopathic cause throughout the United

States as it has been in the past, and may the "Keystone State of Homeopathy" ever uphold its standard as the bulwark of homeopathy.

RALPH BERNSTEIN, M. D., 37 South 19th St., Philadelphia, Pa.

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THE BERKS COUNTY HOMEOPATHIC MEDICAL SOCIETY held its annual mid-summer outing at Mineral Springs Hotel, Reading, Pa., on Wednesday, July 20th, 1910. The meeting was well attended, and the papers presented were by Prof. D. Bushrod James, of the Department of Gynecology of the Hahnemann Hospital and College, of Philadelphia, and a paper of nose and throat affections by Prof. Gilbert J. Palen, of the Dept. of Otology of the Hahnemann Hospital and College of Philadelphia.

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THE SCHUYLKILL COUNTY HOMEOPATHIC MEDICAL SOCIETY held its July meeting at the Echo Boat House, Tumbling Run, Pa., on Thursday, July 28th, 1910. A sumptuous dinner was served at the Tumbling Run Hotel at 1:00 p. m. The scientific program of the afternoon was participated in by Dr. J. Hubley Schall and Dr. F. E. Coldwell, of Brooklyn, N. Y., and Prof. W. W. Speakman, of the Department of Ophthalmology of the Hahnemann Medical College and Hospital, Philadelphia, and Dr. Ralph Bernstein, of the Department of Dermatology of the Hahnemann Hospital and College of Philadelphia. Dr. Francis M. Boyer, of Pottsville, Pa., the president of the Society, was in the chair, and the arrangements of the outing being in charge of Dr. T. W. Swalm, also of Pottsville. The meeting was largely attended, physicians attending from many miles of the surrounding country, many bringing their wives and daughters as well to attend the meeting.

T. W. SWALM, M. D., SECY.

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THE HOMEOPATHIC MEDICAL SOCIETY OF CHESTER COUNTY held its regular monthly meeting on July 14th, 1910, at the new Temperance Hotel, Malvern, Pa.

L. HOOPES, M. D., SECY.

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THE DEPARTMENT OF PUBLIC HEALTH AND CHARITIES of the City of Philadelphia calls attention to a rule and regulation adopted by the Advisory Board of the State Department of Health in accordance with the authority given by Act of Assembly, approved April 27th, 1905; "All physicians practicing within the limits of the city of Philadelphia shall make an immediate report of each and every case of uncinaria duodenalis (hook-worm), pellagra, and anterior poliomyelitis (infantile paralysis) occurring in their practice, in the same manner that communicable diseases are now by law and by Rule and Regulation of the Bureau of Health and Charities, reported to the health authorities."

Dr. J. C. Biddle, chief of the State Hospital for the Injured at Fountain Springs, Pa., extended a clinic to the homeopathic practitioners of Schuylkill County on July 14th, 1910, which was well attended by physicians of both schools. Numerous cases were presented from the large clinical material in which the mining district abounds. A liberal collation was served, and the spirit of cordiality reigned supreme among the doctors present.

Dr. H. F. Schantz, president of the State Medical Society, promises papers for the annual meeting at Williamsport from Dr. Porter, of the Dept. of Public Health and Charities in the city of New York, and Wm. H. Watters, M. D., of Boston, Mass.

Dr. Nathaniel F. Lane announces the removal of his office to 1925 Chestnut Street. Abdominal surgery and gynecology exclusively.

Dr. G. Haraln Wells and Dr. W. N. Sylvis have just returned from a two week's camping outing on the Eastern Shore of Maryland.

The Van Lennep Clinical Club held its annual outing at Essington, Pa., on July 12th, 1910; the meeting being well attended and an enjoyable afternoon's outing indulged in.

Dr. Alexander G. C. Stetson announces his removal to No. 1825 Chestnut Street, Philadelphia, Pa. Hours 9:30 to 12 a. m. Mechanical Therapeutics.

Dr. W. R. Keller, a recent graduate of the Hahnemann Medical College, Philadelphia, has located in Enid, Oklahoma, being the first homeopathic physician to begin practice there,—there being forty-two allopathic physicians in the community.

Harry Millspaugh, a senior student at the Hahnemann Medical College, Philadelphia, was drowned at Norwich, Conn., on July 22nd, while swimming in the Thames River near the Connecticut State Hospital, Norwich, being siezed with cramps while in swimming with Dr. Harry J. Hoffman, a graduate of this year's class of the Hahnemann Medical College, of Philadelphia, being in charge of the State Hospital. Dr. Millspaugh was acting as interne during the summer and assisted Dr. Hoffman in his work.

Prof. Clarence Bartlett, of the Department of Medicine of the Hahnemann Medical College and Hospital, Philadelphia, is spending the month of August in the mountains of Maine, and is expected to return to his office the first of September.

The following trustees were elected at the annual meeting of the Philadelphia County Homeopathic Medical Society: Drs. D. W. Bayley, E. H. Van Deusen, O. S. Haines, D. W. Lane and L. T. Ashcraft.

Dr. Margaret H. Schantz, of Reading, Pa., was elected second vice-president of the American Institute of Homeopathy at its annual session at Pasadena, California.

RALPH BERNSTEIN.



WHAT OTHERS SAY.

Our hustling colleague of THE CRITIQUE was very much in evidence when the train rolled into the Union Station. Dr. J. W. Mastin retained his well-known reputation for doing things. With Dr. J. B. Brown as the advance guard he devoted his energy to the work of embarking the party on sight seeing automobiles, which really treated his guests to the best ride of the sort we have ever enjoyed. Whether or no the doctor had made especial efforts to provide them, the "choofers" were exceptionally urbane and polite and much interesting information oozed forth. The views were beautiful. The improvements in the city since our last visit, sixteen years ago, were particularly to be noticed. Before we left the depot, by the way, we had the pleasure of greeting the always affable Strickler. Of course, N. G. Burnham was there. He always appears where he can help, and so were W. D. Lucas, T. B. Swerdfeger, Carl D. Fisher, E. H. King, R. B. McGee and several others. Take it all in all, the Denver men did their full duty.—*Journal of American Institute of Homeopathy.*

READING NOTICES

WHEN A TONIC IS NEEDED. When a tonic is needed, there is none that will give more certain or uniform satisfaction than Gray's Glycerine Tonic Comp. For seventeen years it has been serving the profession, and the esteem in which it is held to-day bears eloquent witness to its unvarying quality and efficiency.

* * * *

THE SECOND SUMMER. Experience has shown that during the second or "teething summer" weakened stomachs are strengthened, faulty metabolism is corrected, fatigued heart and circulation is supported, and many a tired worn-out nervous system is restored to its proper tone by the systematic and intelligent use of small doses, 20-30 drops, according to age, of Gray's Glycerine Tonic Comp.

* * * *

IMPORTANT NOTICE. Battle & Co., of St. Louis, have just issued No. 13 of their series of charts on dislocations. This series forms a most valuable and interesting addition to any physician's library. They will be sent free of charge on application, and back numbers will also be supplied. If you have missed any of these numbers, better write Battle & Co. for them before the supply is exhausted.

* * * *

A TISSUE NUTRIENT FOR THE SUMMER. Oft times during the summer, the physician is put to his very wit's end to find a tissue nutrient for his tubercular and debilitated patients; one that will agree with them during the hottest weather. Cord. Ext. Ol. Morrhuæ Comp. (Hagee) by reason of its palatability and the ease with which it is assimilated, is the ideal agent of this character not alone in the summer but at all other seasons.

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PHYSICIANS' LEATHER BAGS AND MEDICINE CASES. Messrs. Boericke & Tafel have just issued an elegant forty-eight-page catalogue of "Physicians' Leather Bags and Medicine Cases." It is profusely illustrated with cuts of the various and latest leather cases, and will be sent upon request. If you are contemplating the purchase of a new bag or case, it would be well to send for a copy of this catalogue. Address any of the B. & T. pharmacies.

* * * *

AN UNEXCELLED COMBINATION. Two parts of Dioivurnia to one part of Neurosine is par excellent in Hysteria, Eclampsia, Melancholia, Female Neurosis, Uterine Congestion, Ovarian Neuralgias. An efficient Diuretic, Asthma Sexualis, Uterine Irritability, Lumbago, Migrane, Menopause, Menstrual Colic, Anemic Nervousness, Nervous Prostration, Reflex Cough, Delayed Catamenia, Non-Descriptive Cases, Subacute Rheumatism. Relieves all False Pains, Rheumatic, Sciatic Pains, Neurasthenia from Uterine Diseases.

* * * *

HAGEE'S CORDIAL. Clinical experience with Hagee's Cordial of the Extract of Cod Liver Oil Compound justifies the assertion that its therapeutic indications are precisely those which belong to cod liver oil in its natural condition.

The fatty element (and this alone) is indeed completely eliminated, and while the nutritional value of that factor is undoubted, as is the case with most of the other varieties of animal and vegetable oils, it

must not be forgotten that oil in any form will not be tolerated by the gastric mucous membrane in many of the cases for which cod liver oil is indicated. Hagee's Cordial is free from the taste and smell of oil, and is acceptable to the most fastidious taste.

* * * *

CLINICAL EXPERIENCE IS ALWAYS A DEPENDABLE GUIDE. Countless physicians the country over have proven to their entire satisfaction that Gray's Glycerine Tonic Comp. fills an indispensable place in the treatment of all diseases in which lessened vitality is a prominent feature. It represents one of the notable advances in modern pharmacy, and many a practitioner has learned to rely upon it as his most valuable aid in increasing functional activity. Gray's Glycerine Tonic Comp. exerts an especially beneficial influence on the gastric and intestinal glands, thus stimulating the appetite, improving digestion and promoting assimilation. In all conditions of mental and physical exhaustion accompanied by malnutrition its effects are speedily manifested by an increase in functional vigor and a general improvement in the health of the whole body. Physicians who are not using Gray's Glycerine Tonic Comp. in their cases of general debility are urged to do so and note what really remarkable results the can obtain.

* * * *

TO RELIEVE THE EFFECT OF SOLAR HEAT. Direct exposure to the sun's rays; employment in or living in hot and poorly ventilated offices, workshops or rooms, are among the most prolific causes of headache in summer time, as well as of heat exhaustion and sunstroke. For these headaches and for the nausea which often accompanies them, antikamnia tablets will be found to afford prompt relief, and can be safely given. Insomnia from solar heat is readily overcome by one or two antikamnia tablets at supper time, and again before retiring. If these conditions are partly dependent upon a disordered stomach, two tablets with fifteen or twenty drops of aromatic spirits of ammonia, well diluted, are advisable. For the pain following sun or heat-stroke, antikamnia in doses of one or two tablets every two or three hours will produce the ease and rest necessary to complete recovery. As a preventive of and cure for nausea while traveling by railroad or steamboat, and for genuine *mal de mer* or sea sickness, antikamnia tablets are unsurpassed.

* * * *

LONG CONTINUED INVALIDISM. Many and diverse are the causes of chronic ill health and many are the problems presented to the physician by patients of this character. If we exclude from consideration such organic and diathetic conditions as tuberculosis, carcinoma, specific disease, rheumatic and gouty states, etc., it will be found that neurasthenics and dyspeptics make up the large majority of chronic invalids. The chronic dyspeptic is usually a neurotic individual in whom the digestive symptoms predominate, being secondary to and dependent upon general and nervous deitalization. In a large majority of such cases, so-called nerve foods, neuro-tonics, stimulants and "pick-me-ups" are resorted to, but without substantial benefit. The essential indication is nutritive and blood-glandular re-enforcement. A nutritious, readily digestible diet is the first and most important prescription and then a general reconstructive, restorative and reconstituent tonic, such as Pepto-Mangan (Gude), should be ordered. This palatable, non-irritant and promptly assimilable blood constructor and hemoglobin creator will almost always assist materially in increasing the general force and vitality of the chronic invalid without disturbing digestion or causing constipation.

* * * *

A NEW PREPARATION FOR HAY FEVER. Dr. J. E. Alberts, of The Hague, has directed the attention of the medical profession to a

new combination which is astringent and locally anesthetic in effect, but which is non-toxic and devoid of the ill effects of cocaine. The new combination contains one part to twenty thousand (1:20,000) of adrenalin chloride and ten per cent of para-amido-ethyl-benzoate, made up into a bland ointment, to which has been given the name of Anesthone Cream.

When applied to the mucous membrane of the nares Anesthone Cream has a persistent anesthetic effect which affords marked relief in hay fever. Inasmuch as para-amido-ethyl-benzoate is only slightly soluble in aqueous fluids, its anesthetic action is prolonged. It does not have the poisonous effect of cocaine upon the protoplasmic element of cells, nor does it depress the heart. Furthermore, there is no tendency to "habit" acquirement.

In a tabulated series of cases collected by the Department of Experimental Medicine of Parke, Davis & Company a very large proportion were very much benefited.

Anesthone Cream is supplied in a collapsible tube with an elongated nozzle. A portion of the Cream about the size of a pea is to be applied to the nasal mucosa three or four times a day, or more frequently if necessary, including the time of arising in the morning and retiring at night.—*Therapeutic Notes.*



THE ANTITOXIN TREATMENT OF DIPHTHERIA. Again are we nearing the season when the problem of diphtheria and its treatment must be met and solved. The writer of this paragraph is forcibly reminded of the fact by the receipt of a modest but important brochure of sixteen pages bearing the title, "Antidiphtheric Serum and Antidiphtheric Globulins." A second thought is that here is a little work that every general practitioner ought to send for and read. Not that the booklet is in any sense an argument for serum therapy. It is nothing of the kind. Indeed, the efficacy of the antitoxin treatment of diphtheria is no longer a debatable question, that method of procedure having long since attained the position of an established therapeutic measure. The pamphlet is noteworthy because of the timeliness of its appearance, the mass of useful information which it presents in comparatively limited compass, and the interest and freshness with which its author has been able to invest a subject that has been much written about in the past dozen or fifteen years. Its tendency, one may as well admit, is to foster a preference for a particular brand of serum, but that fact lessens not one whit its value and authoritativeness.

Here is a specimen paragraph, reprinted in this space, not so much to show the scope and character of the offering as to emphasize its helpful tone and to point out the fact that its author was not actuated wholly by motives of commercialism:

"Medical practitioners have learned that, inasmuch as the main problem presented in the treatment of a case of diphtheria is the neutralization of a specific toxin, the true antitoxin cannot too soon be administered; moreover, that, antitoxin being a product of definite strength, a little too little of it may fail when a little more would have succeeded—hence larger or more frequently repeated doses are becoming more and more the rule. One more point: If the medical attendant is prompt, as he must be, and fearless, as he has a right to be, the full justification of his course will hinge upon the choice of the best and most reliable antidiphtheric serum to be had; for while there is little or no danger of harm ensuing from the use of any brand issued by a reputable house, the best results—which may mean recovery as the alternative of death—can only be hoped for from the use of the best serum."

The brochure is from the press of Parke, Davis & Co., who will doubtless be pleased to send a copy to any physician upon receipt of a request addressed to them at their main offices. Detroit, Mich.



THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath.—Letter No. 12.

OBSTACLES TO RECOVERY AND HOW TO REMOVE THEM...

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MY DEAR DOCTOR: In this, my last letter in the series, we approach a topic no less important than those which we have considered. The founder said: "If, finally, he knows the obstacles to recovery in each case and is aware how to remove them, so that the restoration may be permanent, then he understands how to treat judiciously and rationally, and he is a true practitioner of the healing art." "The physician's high and only mission is to restore the sick to health, to cure as it is termed." But to cure so that the restoration may be permanent, is quite a different proposition to the popular and common and "regular" practice of *suppression*. True, the masses do not seem to know the difference; but it is your duty, as it is the duty of every homeopath, to teach them. It is comparatively easy, by crude drugs and by repeated doses of the wrong medicine though properly prepared, to compel nature to change the signs and symptoms of disease without altering the essence. For instance, we say to her, "You can't come out here" (rheumatism of the lower extremities), and to display our skill and manifest our authority we apply suppressive measures and announce that we *cured* the "rheumatism." In the meantime the *patient* was left diseased; and while we were making our boastful announcement of a cure, nature was muttering to herself, "All right, then I will take another route;" and seizing the heart the patient is removed from this mundane sphere. This is the "scientific" method by which General Logan was removed. In such instances the doctor says, "Too bad; I cured the rheumatism, then heart disease set in." If the people only

knew that suppressing disease and causing it to take a metastasis expressing itself in another form, *never cures* but often hastens the fatal end, they would appreciate Hahnemannian physicians who *never* suppress disease, but cure scientifically and rationally.

OBSTACLES.

One obstacle to recovery in many cases is the *dissimilar* medicine administered by some so-called "regular" which has debilitated the patient, suppressed and suspended the malady for a time, but which never could cure it. This allopathic treatment has further added a new morbid state to the old one, and *this* is ever an obstacle to recovery.

The new morbid state added by the allopathic treatment (though often instituted by pretended homeopaths), is always a *dissimilar* affection; and no dissimilar disease added to the natural disease can cure, however large the doses, however strong the medicine, or however long continued. Whether such dissimilar disorder be added by an allopathic physician, a bungling homeopath or the contagion of a fixed miasm, the result is the same: it *never* cures. On the contrary a *similar* affection added to the natural disease, however instituted, has a curative effect. So the homeopathic way, by the eternal decree of infallible law, is the true and only one whereby the restoration may be effective and permanent.

THE LAW OF METASTASIS.

The popular practice of suppressing or suspending disease invariably results, in EVERY CASE, in an aggravation of the original disease; but unwary patient is told by such doctors that it is "malignancy" manifesting itself; or, if the unscientific treatment has caused the disorder to change its base or its form, then they say it is a new disease!

WHAT EVERY REAL HOMEOPATH OUGHT TO KNOW.

I know of no one truth which I could give you, or which is of so much importance to the young homeopath, as this: When a disease has been suppressed and because of the suppression has taken a metastasis, NO HUMAN POWER CAN CURE

UNTIL THAT SUPPRESSION IS UNLOCKED. To illustrate: A man has the itch suppressed by local applications; by and by he complains of hay fever. When you restore the itch eruption, you can cure the hay asthma—not before. Piles have been “cured” by the injection method; following such suppression the patient suffers from paralysis of the lower extremities. *When you bring back the piles*, you can cure the paralysis—not before. Gonorrhoea has been “cured in ten days” by injections, finally he comes down with rheumatism. When you unlock that “scientific” suppression and restore a free gonorrhoeal discharge, you can cure the rheumatism—not before. You now understand what I mean.

The truth is, allopathic physicians and their imitators *can not cure deep-seated, miasmatic diseases*; but by suppressive treatment they deceive the patient and often leave him wrecked for life. And because they can not cure they imagine no one can. * * * * (THE CRITIQUE, Oct. 1909) is a good representative of this class. He says: “Once a syphilitic, always a syphilitic. There is no cure for syphilis in the sense that the infection can be entirely eliminated from the blood. We may observe the disappearance of all objective symptoms in a given case, and the patient may be to all outward appearances cured. But is he cured? Experience has but one answer: ‘No!’” No one could ask for a clearer demonstration that this doctor never acquired his medical knowledge at the feet of Hahnemann. That answer of ‘experience’ is true; but it is allopathic experience, mongrel experience, the experience of those who do not know how to cure *anything* rationally and scientifically. Pretty lesson, indeed, to hand out to young physicians! Now right in the face of this unwarranted assumption, listen to the founder of Homeopathy: “How, then, could physicians, despite of all these facts and testimonies, close their eyes and ears to the truth; that the whole venereal disease (syphilis) was already developed within, before the chancre could appear, and that it was a most unpardonable mistake to forward the certain outbreak of the syphilis, already present within, into the venereal disease, by driving away and destroying the

chancre by external means, and thereby destroying the fair opportunity afforded of curing this disease in the easiest and most convincing manner, through the internal specific remedy, while the chancre was yet fully present! *The disease is not cured except when through the effect of the internal remedy alone, the chancre is cured; but it is FULLY EXTINGUISHED, as soon as through the action of the internal operating medicine alone (without the addition of any external remedy) the chancre is completely cured, without leaving any trace of its former presence.* I have never, in my practice of more than fifty years, seen any trace of the venereal disease break out, so long as the chancre remained untouched in its place, even if this were a space of several years (for it never passes away of itself)." Again: "The cure of the venereal disease is effected most easily and in the most convincing manner, so long as the chancre (the bubo) still remains unchanged, as a vicarious symptom of the internal syphilis. In this state, and especially when it is not yet complicated with psora it may be asserted from manifold experience and with good reason, *that there is on earth no chronic miasma, no chronic disease springing from a miasma, which is more curable and more easily curable than this.*" (Chronic Diseases, page 89-90.) Oh, ye mongrels, ye allopathic imitators, selling for a price the fair name of homeopathy, put this in your pipes and smoke it; and may you inhale the homeopathic aura.

But hold! In that number I see some mental giants; some who are disposed to investigate and who are scientifically inclined. If these could catch the spirit of homeopathy and once convince themselves by a few homeopathic cures, how they would grow and prosper and shine.

For instance: Suppose they have a case of exema capitis. Thick crusts are observed and a thick, yellow pus oozes out on pressure; and it turns out to be a mezereum case. Mezereum 200 or 1-m is given—just a dose now and then as needed and no local applications whatsoever are used and the patient gradually, quickly and permanently recovers. Or, a young lady has an eruption on her body, arms, hands, face, oozing a honey-like substance and this turns out to be a graphites case; and without any local treatment a quick and satisfactory cure results from a few doses of graphites 1-m or higher. From that day such men, after such experiences, will grow rapidly. And they will soon learn that it is easier to cure syphilis by the internal administration of the indi-

cated remedy than to cure psoric conditions. And this most difficult miasm is also most predominant.

Hahnemann said: "It can be said that at least seven-eighths of the chronic maladies existing at the present day are due to psora." The remaining one-eighth are due to syphilis and sycosis. And still more appalling is the picture when we reflect that the dominant treatment in the past ages has driven back and suppressed the external expressions of this internal, parent-disease, *psora*, until a very large percent of the infantile population are born without a shadow of chance for life and development. And then they talk about 'scientific treatment!' And if they dared they would legislate this mal-practice into compulsory law and bind it as a yoke upon the necks of the nations. Thank God for Samuel Hahnemann and for what he has accomplished in freeing the people from the evil results of suppression and suspension of disease.

INTERNAL DYSCRASIA.

The importance of the internal dyscrasia, whatever its external manifestations, can not be overestimated. It is always an obstacle to recovery; and the physician who does not know how to remove it must utterly fail to cure. Old cases of ringworm, chronic tetter, ulcers of the legs, etc., have behind them an *internal dyscrasia*, and how lamentable the consequences of merely local annihilation by mercurial, lead or zinc preparations!

Owing to the minuteness of the doses necessary in homeopathic treatment, all should understand that during the treatment everything must be removed from the diet and *regimen* which can have any medicinal action, in order that the small dose may not be disturbed; and everything must be removed from the patient's room which tends to extinguish or disturb the indicated medicine. One of these, which should always be enquired after, is camphor; another, any old-school liniment; another, drug-store plasters. I do not authorize the use of *anything* but water in addition to the prescribed remedy. One reason is, such adjuvants generally prove to be *obstacles* to recovery; and another is, if the patient recovers in spite of such "helps" the latter are given the credit of the cure.

The careful investigation into such obstacles by the careful homeopath will always be rewarded; and this is all the more necessary in the case of patients affected by chronic

diseases. A clean homeopathic practice does not need these disease-causing, noxious influences.

HOW TO REMOVE OBSTACLES.

Many a doctor who knows how to diagnose the disease, never learned how to extinguish it and many who have learned the miasmatic nature of chronic diseases never learned how to uproot that miasm and completely remove it as an obstacle to recovery. I ought to make mention of the fact that mongrels know no more about the psoric, sycotic and syphilitic miasms and how to remove them as necessary obstacles to recovery, than allopaths. Both classes flatly deny the existence of these miasms and utterly ignore all the master said regarding them. The result is they can no more cure chronic, miasmatic diseases than could Hahnemann and his predecessors before he made this great discovery. He learned, as every master of the healing art must learn, that these miasmatic obstacles can only be removed by the remedy or remedies which possess the power of producing miasmatic symptoms similar to those of the patient to be cured.

But as to the removal of obstacles to recovery in general, I wish to quote Hahnemann at some length. He says:

"The most appropriate regimen during the employment of medicine in chronic diseases consists in the removal of such obstacles to recovery, and in supplying, where necessary the reverse; innocent moral and intellectual recreation; active exercise in the open air in almost all kinds of weather (daily walks, slight manual labor); suitable, nutritious, unmedicinal food and drink, etc." "Coffee; fine Chinese and other herb teas; beer prepared with medicinal vegetable substances unsuitable for the patient's state; so-called fine liqueurs made with medicinal spices; all kinds of punch; spiced chocolate; odorous waters and perfumes of many kinds; strong-scented flowers in the apartment; tooth powders and essences and perfumed sachets compounded of drugs; highly spiced dishes and sauces; spiced cakes and ices; crude medicinal vegetables for soups; dishes of herbs, roots and stalks of plants possessing medicinal qualities; old cheese, and meats that are in a state of decomposition, or that possess medicinal properties (as the flesh and fat of pork, ducks and geese, or veal that is too young and sour viands), ought just as certainly to be kept from patients as they should avoid all excesses in food, and in the use of sugar and salt, as also spirituous drinks, heated rooms, woolen clothing next the skin (which should be exchanged in warm weather, first for cotton, then for linen garments); a sedentary life in close apartments, or the frequent indulgence in mere passive exercise (or swinging), prolonged suckling; taking a long siesta in a recumbent posture (in bed); sitting up long at night; uncleanliness; unnatural debauchery; enervation; by reading obscene books; subjects of anger, grief or vexation; a passion for play; over-exertion of mind or body; dwelling in marshy districts; damp rooms; penurious living, etc. All these things must be as far as possible avoided or removed, in order that the cure may not be obstructed or rendered impossible."

"In acute diseases, on the other hand—except in cases of mental alienation—the subtle, unerring internal sense of the awakened life

preserving faculty determines so clearly and precisely, that the physician only requires to counsel the friends and attendants to put no obstacle in the way of this voice of nature by refusing what the patient urgently desires in the way of food, or by trying to persuade him to partake of anything injurious."

That the obstacles already mentioned are important, all must admit; but the *internal dyscrasia* is of equal or greater importance and can not be overlooked if a cure is to be accomplished. In the third edition, par. 272, the founder said:

"Therefore, as soon as the chronic diseases has for the time yielded to a thoroughly suitable homeopathic remedy, *i. e.*, specific or nearly specific for this case, if the disease is a very chronic one (ten, fifteen or twenty years old), a dose of the chief remedy must be given for three or six months, at even longer and longer intervals, at last at intervals of several weeks (the intervals being varied according to circumstances), but always in smaller and smaller doses until all tendency of the organism to the chronic dyscrasia has completely disappeared and is extinguished; the neglect of this provision leaves the best treatment incomplete and in ill-repute."

What are the "circumstances" which regulate these intervals; or in other words, how may we know when to give another dose of the chief remedy during this period of three, six or more months? *When some of the chief symptoms of the old malady recur*; and by this rule the intervals will grow longer and longer. During all this time, of course, the patient must have his "constitutional medicine"—*sac. lac.*, and the physician should have his fee; for the doctor who does not know this little "trick" does not know how to cure chronic diseases.

A doctor should be paid *for what he knows*—even if that rule should cut some of us down to mighty thin rations!

DYSCRASIA AND MIASM.

Dyscrasia signifies a morbid state of the constitution; bad temperament; while *miasm* denotes a noxious exhalation; an aura which is given out from the human race. Hahnemann studied twelve years to unearth this secret. He would prescribe and the patient would improve and apparently would finally be cured; but for some (then) unknown reason the trouble would come back again. So he set himself to the task with his characteristic energy to ascertain the reason for this; and he found that the miasm known as *psora* is the foundation of disease—all disease; for without this the other miasms never would have existed, and we never would have been subjects of acute disease.

This tendency of the disease to *fly back* baffled even Hahnemann. He found in his investigations that the cases

which they had cured were those in which the psora was not fully developed, and that in chronic diseases caused by a psora already fully developed the medicines which gave relief and often the appearance of a cure, never sufficed for a complete cure; and those same medicines will not suffice to-day where fully developed psora exists.

He found that he was under necessity of re-proving medicines in order that he might select those which possessed the power of producing symptoms similar to those of developed psora. These are always *deep-acting medicines*, while those of a superficial and short action never can cure diseases caused by developed psora, though they may often relieve and *apparently* cure. They palliate for a time if appropriate according to the law of similars, but it continued long will fail to even do that. He said: "Their beginning was promising, the continuation less favorable, the outcome hopeless" *"Nevertheless this teaching was founded upon the steadfast pillar of truth and will evermore be so."*

"Why, then, cannot this vital force, efficiently affected through homeopathic medicine, produce any true and lasting recovery in these chronic maladies even with the aid of the homeopathic remedies which best cover their present symptoms; while this same force which is created for the restoration of our organism is nevertheless so indefatigably and successfully active in compelling the recovery even in severe acute diseases? What is there to prevent this? The answer to this question, which is so natural, inevitably led me to the discovery of the nature of these chronic diseases."

"It was a continually repeated fact that the non-venerial chronic diseases, after being time and again removed homeopathically by the remedies fully proved up to the present time, always returned in a more or less varied form and with new symptoms, or re-appeared annually with an increase of complaints. This fact gave me the first clew that the homeopathic physician with such a chronic (non-venerial) case, yea in all cases (non-venerial) chronic disease, has not only to combat the disease presented before his eyes, and must not view and treat it as if it were a well-defined disease, to be speedily and permanently destroyed and healed by ordinary homeopathic remedies, but that he has *always to encounter only some separate fragment of a more deep-seated original disease.*"

"*He, therefore, must first find out as far as possible the whole extent of all the accidents and symptoms belonging to the unknown primitive malady before he can hope to discover one or more medicines which may homeopathically cover the whole of the original disease by means of its peculiar symptoms. By this method he may then be able victoriously to heal and wipe out the malady in its whole extent, consequently also its separate members: that is, all the fragments of a disease appearing in so many various forms.*"

The founder of homeopathy refers, by "a more deep-seated original disease," to the miasmatic disease as the "primitive malady;" and the "accidents and symptoms" be-

longing to this miasm as discovered in the patient's history, gives us the key to successful treatment. To illustrate: Only last week a young man of sixteen who had been under sulphur 6-m for some time, came in complaining of a cracking and oozing of a honey-like fluid behind the right ear. I phoned his mother and ascertained that he had this "awfully bad" when a babe, but was "cured" by an old school doctor who applied an ointment. This was one of the "accidents" of the miasmatic disease referred to by Hahneman. Now that it came back under the anti-psoric remedy is the most hopeful sign of his ultimate complete recovery.

This "primitive malady;" this "deep-seated original disease" is the *gigantic obstacle* to recovery, and the physician who does not know how to recognize and remove it, never will be able, by his present equipment, to cure chronic diseases

This monster malady; this unconquered enemy of the human race; this original, primitive disease—*psora*, is transmitted from parent to child and its fragments traced back in a given family to the third and fourth generations. Its first great fragment which history discloses was *leprosy*; then the *itch disease*; and now the innumerable chronic diseases to which mankind is subject.

The term, "itch disease," as used by Hahnemann and others of his day, comprehends *all non-venereal cutaneous eruptions* before they were classified; and their present classification does not change their nature in the least. They are all expressions of *psora* and are, in the truest sense, the *itch disease*. The name, the classification of any fragment of this one itch disease, means nothing so far as the cure is concerned.

Because this foundation disease, *psora*, when manifesting itself chiefly in the form of leprosy was repressed by mal-treatment, the disease in the meantime growing all the more unperceived within, has developed a flood of ailments supposed to be distinct diseases, but which in fact are but fragments of the primitive disease, *psora*, the mother of them all.

"So great a flood of numberless nervous troubles, painful ailments, spasms, ulcers (cancers), adventitious formations, dyscrasias, paralysis, consumption and crippings of soul, mind and body were never seen in ancient times when the *psora* mostly confined itself to its dreadful cutaneous symptom, leprosy. Only during the last few centuries has mankind been flooded with these infirmities, owing to the causes just men-

tioned. It was thus that *psora* became the *most universal* mother of Chronic Diseases."—(*Chronic Diseases*, page 12.)

The miasm, then, be it *psora*, syphilis or sycosis, or two of them or all of them, constitute the greatest obstacle to a permanent cure. But few, if any, cases of syphilis are found to-day free from *psora*; and it is important for you to know that the *psora must be removed first* before syphilis can be extinguished.

Whatever miasmatic disease lies behind the apparent trouble and gives rise to the chief ailment must be recognized by its symptoms and combatted by the remedy or remedies which, in their provings, correspond to said miasmatic symptoms. As a real homeopath, therefore, you have at your command the means of curing chronic diseases thoroughly and with certainty while the most eminent not familiar with this truth must utterly fail. Indeed, any one who does not know the signs of latent *psora*, suppose patients to be healthy and free from any internal disease; while the internal malady, nevertheless, increases unceasingly though it may be years before the external evidences can be perceived by the eyes.

Open "Chronic Diseases," doctor, page 45, and read the large list which Hahnemann has given as signs of this internal disease which, though latent, if allowed to smoulder will finally break forth into an external disease and rise to such dignity that the doctors would then give it a distinct name. Notice some of these signs:

"Frequent discharge of ascarides and other worms—mostly with children.

Perspiration on the head, in the evening after going to sleep.

Epistaxis with girls and youths, often very severe.

Usually cold hands or perspiration on the palms (burning in the palms).

Cold, dry or ill-smelling sweaty feet (burning in the soles of the feet).

Frequent cramps in the calves (the muscles of the arms and hands).

Long continued obstruction of one or both nostrils.

Sensations of emptiness in the stomach.

Sour taste in the mouth.

Repugnance to cooked, warm food, especially to meat (principally with children).

Repugnance to milk.

At night or in the morning, dryness in the mouth.

Passing of mucus from the anus, with or without feces.

Dark urine.

Dry skin on the limbs; on the arms, the thighs, and also at times on the cheeks.

Here or there at times, though seldom, a single insufferably pleasant, but unbearably itching vesicle, at its point sometimes filled with pus, and causing a burning sensation after rubbing, on a finger, on the wrist or in some other place."

The *psora* may be recognized by a few or by more of these and other signs, some not having more than one such symptom, but if not scientifically treated as an internal disease or a miasm which has not fully come to the surface, may slumber on for many years within and the subject will consider himself healthy and the doctors (except Hahnemannians) will regard him as healthy, but let some accident happen such a person—a severe fever, whooping cough, scarlet fever, measles, or an external lesion, etc., and the internal malady which may have been slumbering so long will awake and be recognized as one of the common chronic diseases.

This slumbering internal disease; this psoric miasm when manifesting itself by a cutaneous eruption; or the syphilitic miasm when apparent by the chancre; or the sycotic miasm when announced by the figwarts is often intensified and the patient ruined for life by the “scientific” regular or slovenly mongrel who, with his battering-ram methods, his suppressive and weakening treatment, often renders the case incurable.

The miasm, the *inner disease* must be cured, then the cure is reliable because from within. Following such a cure the cutaneous eruption, the figwart or the chancre, as the case may be, will promptly disappear. And, doctor, you may know this by experience instead of theory if you will follow the master with exactness: and you may also know that *no physician in the world* can accomplish such cures but the real homeopath.

Beginning on page 52, “Chronic Diseases,” note the symptoms which appear when the outbreak of internal *psora* occurs.

For these two distinct classes, the latent and developed *psora*, you will have to choose anti-psoric remedies in order to cure so that the restoration may be permanent; and to facilitate your work you should have the “Repertory of Anti-psoric Remedies,” by Bonninghausen. It is worth its weight in gold.

By anti-psoric remedies we mean those medicines which are capable of producing in healthy subjects symptoms similar to psoric symptoms.

One point possibly I did not make plain, viz. the time of the homeopathic aggravation. I said, if I remember, that it occurs in a few hours and that is true in *acute* diseases; but in chronic diseases you should know that this aggravation may come twenty or twenty-four days after taking a

dose of anti-psoric medicine; and it sometimes fluctuates, that is, there may have been an improvement following the first homeopathic aggravation, then there comes this homeopathic aggravation again lasting perhaps a half hour, an hour or hours, followed again by improvement. Hahnemann explained this as a new *assault* on the disease caused by the homeopathic dose. In such a case the dose should not be repeated nor another medicine given; but let it exhaust its action, which may take fifty to one hundred days. Medicines which, in provings, have shown a long action act only a short time and quickly in acute diseases; but the more chronic and tedious the disease the longer these anti-psoric medicines will act.

The prevailing error among homeopathic physicians is a disposition to whittle off a few of the external symptoms by the administration of various remedies quickly following one another, instead of striking at the root—the *miasm* with the anti-psoric remedy which is homeopathic to the case, and then letting it work undisturbed until it has exhausted itself. Hahnemann says: “The physician must, therefore, in chronic diseases, allow all anti-psoric remedies to act thirty, forty or even fifty and more days *by themselves*, so long as they continue to improve the diseased state perceptibly to the acute observer, even though gradually; for so long as the good effects continue with the indicated doses and these must not be disturbed and checked by any new remedy.”

This is the point in which Hahnemann predicted few of his disciples would imitate him; and time proves that he was a great prophet as well as a great physician.

Better learn of Hahnemann, doctor, and follow him implicitly. True, even so-called Hahnemannians in the last Kansas City convention intimated, and one openly avowed that “Hahnemann didn’t know it all;” but I ask you this question: What does any homeopath to-day know about extinguishing chronic diseases that he did not learn of Hahnemann? *Can one single point be mentioned?* No! Then, to successfully treat syphilis and sycotic gonorrhoea, you will have to employ anti-syphilitic remedies (avoiding all local treatment) and anti-sycotic remedies (again avoiding all local treatments), and as the internal malady is overcome nature will promptly take down her external signals. For the first, mercury and sulphur will be your chief remedies, and for the second, thuja and nitric ac. These used in a high power of development and under the policy of *one dose and*

wait, will extinguish the internal disease, remove the external symptoms and leave the patient *free*.

When you encounter the three miasms in one subject, which will be rare, the psora must be cured first, then of the other two chronic miasms that one in each case which is the most prominent, then the one remaining. There is much more I would like to say regarding the miasms, but this letter is now too long and the series is ended. I thank you and your co-workers for the patience with which you have listened to what I have had to say, and hope that a crop of real homeopaths may develop as the fruit of my labors. The letters I have received from physicians of considerable years and experience as well as many young men, assuring me that they had resolved to study Hahnemann and follow him to the full extent of their ability, amply reward me for the time and service devoted to THE CRITIQUE the past year.

May the Preserver of mankind make us grateful for a system of cure so scientific, simplified and infallible, and for the life of its founder. To Hahnemann we owe a debt of homage, veneration and fealty as we read his works with inspiration and awe.

Yours for unadulterated homeopathy,

J. C. HOLLOWAY, M. D., Galesburg, IH.





SPECIAL ARTICLES



THE PHYSICAL SANCTITY OF MATRIMONY.

BY C. E. FISHER, M. D.

COMMENSURATE WITH THE DAY when Adam went gallivanting about the Garden of Eden hunting Eve and that Maiden Blush apple that has caused so much trouble, there have been sorrows in the matrimonial field.

These sorrows have been psychical and physical. With the temperamental griefs we have at present nothing to do. But with the physical heart-rendings there is a whole lot that the medical profession may well make it its business to look after.

From the very day of that memorable fall the spiritual world has been trying to prevent or limit the hunting of un-ripe fruit, clothing the delicate and delightful physical relations between the sexes with the mantle of "God's Holy Ordinance of Matrimony." That this has been a wise treatment of the subject, in so far as it has been carried is beyond dispute. The legal and Church restraints that have been built up around Adamic debauchery have had a wholesome, social influence; without them society would be but a rotten fester. No one should attempt to say them "Nay!"

But, there is a debauchery that is worse in its effects upon the human race, and more destroying to human happiness and welfare, than that of the strictly Adamic variety, and, unfortunately despite our boasted civilization, thus far neither law nor Religion has done very much toward correcting this deplorable woe. This form of debauchery is of the physical type, in contra-distinction to purely sexual indulgence. Young men and maidens may violate all the laws of sanctity as these relate to the observance of the Fourth Commandment, and may violate all the laws of the statutes

as they relate to chastity, decency and sexual morality, and yet not do half the harm to themselves, their souls or their progeny that is being daily done while yet conforming to all the laws of the State and Church.

“God’s Holy Ordinance of Matrimony” is all too often but the *open sesame* of the sorest kind of physical infliction. It sounds fine and looks well in print. But no brilliant church wedding, no matter how sweet toned the bells, nor how dignified the preacher, can ever atone for a legalized or a sanctified syphilis. No Man of God, no matter how solemn his benediction as the bride and groom kneel before the altar before an admiring and sympathetic multitude can ever make good for the awful iniquity of a transmitted sexual infection committed in the name of the Church. Nor can any county official ever atone for the legal crime the statutes empower him to commit when he issues a license to a tenderloin rake to marry one of those innocent girls who make up the daughters of our best families, as the newspapers delight to chronicle the innocent martyrs of our marriage system. What a horrible travesty upon both law and Church when almost from the initial night of her honeymoon the innocent bride of today frequently becomes a helpless invalid for life, due to the debauchery of her spouse in the tenderloin section while yet, perhaps, he was visiting her and solemnly plighting his troth.

The “Red Plague” in various forms abounds wherever our alleged civilization has made its way. It abounded to a more limited degree before the day of either the Napoleonic code or of Blackstone’s rock-ribbed law. It will probably abide with us for centuries to come, or until the medical profession, upon whose shoulders rests a mighty responsibility in this line, shall have done its full duty toward educating the pulpit, the press and the people to a true sense of their moral debt in connection with the subject of matrimony from its purely physical side.

They sound nice, those beautiful words, “Whom God has joined together let no man put asunder!” ‘Tis a platitude of the most beautiful perspective. What would the world do

without it! The divorce courts would quickly multiply as do grasshoppers in the stubblefield, until all other court business would be overwhelmed by the volume of work which the new tribunals would be called upon to perform. But, what would the good brother of the long frock say about it were he to issue his clerical pronouncement in the case of his own lovely daughter and within a few weeks find her hopelessly diseased with one of the infections of the tenderloin section? With her 'tis the Patrick Henry cry of "Give me Liberty or give me Death!" Her father gave her away for better or for worse. She got the worst of it with pitiful alacrity. Must she bear that worst through all the years of a miserable life, with an infected spouse who haughtily defends his iniquities because their cause is sanctioned by law and by custom and because his doctor, perhaps, told him he was cured and it was safe for him to marry?

Better a thousand more divorce courts, if need be, than that our innocent girls, who have a right to expect protection from the Law, the Church and the Physician, shall have to suffer lives of torture, distress, infection and re-infection with men who may have meant all right when they took these brides to their bosoms, but who should never have been allowed to enter the sacred hall of the right matrimony.

Before a strictly medical audience any student of the subject could bring an array of facts that would wring the heart of even the most obdurate human iconoclast. Before a mixed audience these illustrations are too repellent, too severe. But it is within the sphere of the medical writer or speaker to set the public to thinking—a duty too long neglected and which should no longer be permitted to pass unobserved. Very much has been heard in late years about the "Great White Plague," and the world is now aroused and doing splendid work toward its eradication. Somewhat more delicate is the subject under consideration, but not one whit more necessary is the contest that is being waged against tuberculosis than is it that a like contest shall be systematically begun to save our sons and daughters from the awful ravages of the "Great Red Plague."

Here, again, the medical profession must become a great educational force. Who shall preach the Gospel of the Physical Sanctity of Matrimony if not the medical man? The preacher can take care of the spiritual side of the subject, while the County clerk can issue the licenses and rake in the fees. Both have their functions, which should be rather enlarged than curtailed. Both might well be liberally broadened until in a measure these functionaries will be found encroaching upon the physical side of the topic, also, to the betterment of the contracting couple and the future of their get.

But to the Medical Profession, who study these things as they should be studied, from the historical, scientific and preventive points of view; to those who see the physical iniquities of life, but who are too often lenient, almost to a censurable degree, in advising marriage to many a subject who is known not to be fit for the bonds; to this profession is laid the duty of throwing physical safeguards around this sacred relation between man and woman, for the honor of the wicked and the benefit of the innocent, until the public shall have become thoroughly aroused upon the iniquity and its manifest evils shall have been in good measure or completely removed.

Refer, for instance, to the blander red light disorder, the one which some young men, and some older ones too, say they "would about as soon have as to have a common cold." Since the microscope and culture tube became the chief diagnostic weapons of the doctor, since he began the making of diagnoses by looking into the blood and tissues of folks instead of being satisfied with looking at them, it has become known that the invisible germs of this supposedly innocent disorder love to perform their daily gambols in the cerebro-spinal fluid and in other vital liquids of the human system. In the lubricating membrane of the knee-joint the microscope has calculated as many as fifteen millions of gonorrhoeal germs in that little pouch alone. They are self-propagating, self-perpetuating, as it were, and once they find lodgment in a favorable medium of this character there is no telling the deviltry they are capable of. It takes all the gunning, by all the ammunition the medical man has devised, with all the Gatling hypodermics and other instruments of torture at his command, to wage a successful warfare against this kind of

an invisible enemy, and just when he thinks victory is at hand and when the victim thinks he has about squandered all the money he will have to spend to get rid of the ill-effects of his one night in the tenderloin, the enemy seeks a new field and its manifestations break out in a new place and in new form. It is a subtle foe, capable of the direct consequences. By many a competent authority it is now held that the blander sexual disorder is the harder to cure. An enumeration of the ailments it is capable of causing would startle the average layman. . . . Incurable basal headache, violent neuralgia, insufferable joint ailments, deforming rheumatism, destructive pleurisies, various suppurative diseases of the nobler organs of the body, unnamable infections of unnamable internal structures, high tension nervous disturbances, deplorable and destructive melancholias, oftentimes without the remotest mental connection between cause and effect, have inflicted intolerable suffering for ages upon subjects and their offspring who were without the "Original Sin" in the first instance.

For the greater disorder of the "Red Plague" it is not possible to speak in public with a plainness that would have to be used to do the subject exact justice. It is enough to make the statement, from the purely physical side of the topic, that no young man—for men are the chief offenders—should be allowed a license to marry a young and virtuous maiden, or any old and virtuous one, for that matter, until he shall have shown the license clerk a clean bill of health. And no priest or preacher should have the right to do violence to "God's Holy Ordinance of Matrimony" by uniting in wedlock any man or woman who does not present a certificate of freedom, absolute freedom, of evidences of any private disease, and, more than this, freedom from all traces of germ habitation, whereby he may not infect his bride with microscopic destroyers of whose presence in his system he himself can have no knowledge.

Just what such a Bill of Health will have to be, to be effective and satisfactory, will be a matter of deep and conscientious consideration. Doctor, preacher, lawmaker and layman should be joined in the making of such a measure. Naturally, frequenters of the tenderloin sections will raise the cry of "Medical Trust." But what if they do? Better a medical trust, if such has to be, which is not at all necessary and the veriest lugaboo, than an undertakers' trust to bury the poor

victims of the licentate's destroying! Let the lambs of the green pastures, with the blood of iniquity trailing them through the dens of infamy which are their delight, raise all the hulla-ba-loo they will and cry as loud as they may about their "personal liberty" being interfered with. It ought to be interfered with, with a vengeance, and the sooner the people of this country burn all such men of straw and get down to the legitimate business of protecting their homes and daughters the better will it be for the world and the sooner will all such sophistries be relegated to the background, where they belong.

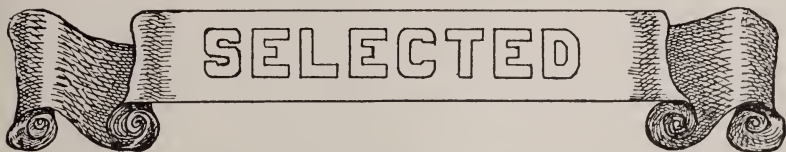
A wide concentration of the brains of honest men will easily evolve an enactment at once a credit to the statutes and a protection to the public. Our innocent daughters and sisters have a right to expect protection from us, and as voters and law makers we have no right to withhold it. No longer should such protection be denied. These are presumed to be the days of civilization, enlightenment and advance. But in these important matters little has been done of a systematic nature and in a concentrated way over centuries of time. The "Physical Sanctity of Matrimony" deserves our earnest consideration, and it deserves it NOW.

Nor does the contention relate to the Red Plague alone. No man and no woman should be allowed to marry or be given in marriage who is inflicted with tuberculosis in transmissible degree. It may even be well to go farther, and refuse the license to anyone whose ancestry shows physical evidence of involvement in any constitutional tubercular process. This would deny marriage to thousands who now receive the license freely. It might work a great many individual hardships and distressing privations. But did we pay one-tenth the attention to the mating of our sons and daughters and our neighbors' sons and daughters that we do to our cattle and swine all ancestral defects would be eliminated from the possibilities. The glitter of the engagement ring, the glamour of the ceremony, the brilliancy of the event, the *eclat* of the occasion, the notices in the newspapers, the general interest which the union of two young souls always arouses, these are so seductive and pleasing that on we drift, without the slightest effort upon the part of the contracting parties or their protecting kinsmen, to learn from their medical advisors and from other sources the physical status of the pair. Little do we know whether we are initiating our daugh-

ters into a beautiful life of happy and successful wedlock or are opening to them, with our free consent, the great brass doors of red light suffering and degradation, or are plunging them into the torture-abyss of a consumptive sanitarium. Perhaps the woes of incurable cancer are their future, perhaps there lies in one or the other of the principals to all this glitter the pedigree of deformity, the seeds of insanity, the dyscrasia of incurable skin disease or deeper seated disorders that will cost years of suffering and the degradation of hopeless deformities upon souls as yet not conceived.

Hardly does the wage worker of today, in all too many instances, set off to his shop the day after his marriage but that his earnings are already morally mortgaged to the care of a wife who is to be a burden to his purse even though she be a solace to his home while yet her health remains. Has he no safety in this sacred union, and have we not the right to look after him? Likewise, the happy girls who are today in school, have they no care from us? Whither are we drifting physically, if all the woes of humanity are to be cast in the grabbag of matrimony that he who may wish to reach therein and draw what he may, whether a prize or a blank, may do so?

It may be of interest to know that a few states in this Union have already put upon their statutes enactments requiring physical certificates before licenses shall be issued. Indiana and Minnesota lead in this wise action. For present purposes their laws are not required. They form a good basis for farther enactments. The working out of the problem will take time and thought. No haphazard evil can be corrected by haphazard corrective. That the evil exists no one can gainsay. It is for the public to correct. It is for the medical profession to educate and arouse the public. It is for the press and the pulpit to second our every endeavor. In fact, all the forces for human up-lift and the betterment of the race, individually and collectively, may well be arrayed as one solid force for the good of humanity through the channel of "The Physical Sanctity of Matrimony." And speed the day when no man or no woman shall be married or given in marriage who is not a fit subject not only to make a physically decent but a physically helpful husband or wife, and whose offspring shall be guaranteed in the license at least a moderate and reasonable physical chance in the world.



SELECTED

HOW I TEACH HOMEOPATHY.

DR. WASSILY, OF KIEL, has this to say of his scheme favorable for those having in contemplation the study of homeopathy, declaring at the same time that there are no specifics in homeopathic treatment. "We do not treat the name of the disease, but the patient with his individuality, and we accomplish this by the aid of remedies covering the totality of both, objective and subjective symptoms, and this explains why a given remedy can cure in one subject pleurisy and in another diarrhoea or acute rheumatism." "Equally important is a profound knowledge of materia medica, obtained from books and clinical observation, without considering pathological anatomy the point of departure necessary for intervention."

"A single remedy should be given at a time, and according to the continued, or interrupted effects, followed by a suitable complementary, taking always into consideration the epidemic genius and the generality of symptoms, as well as of the etiological causes."

Therefore a cold due to a dry wind, demands *Aconite*, or *Nux vom.*; due to dampness or water, *Rhus tox.*, or *Calc. carb.*; a fall or shock indicates *Arnica*; the loss of fluids, *China*; fear or fright, calls for *Opium*; terror with anger, for *Aconite*; a fit of passion, for *Nux vom.*; sadness and grief, for *Ignatia* or *Phos acid*; irritable state, for *Staphysagria*; jealousy, for *Hyoscyamus* or *Lachesis*; spleen, for *Capsicum*; sudden joy, *Coffea*; after great physical efforts, *Arsenicum*; articular fatigue, *Rhus tox.*; mental exertion or night watch, *Nux vom.*; sexual abuse, *Phos. acid*, or *Conium*.

We know the types of chronic diseases for *Sulph.*, *Lachesis*, *Phosphorus* and *Arsenicum*. He insists about the action of remedies in different regions and in the different periods of the day and year, and gives us a condensed pathogenesis of our leading remedies:

ACONITUM.

1. Acts principally on the arterial system.
2. Indicated at the onset of all fevers of sthenic type, with heat, dryness of the skin, and chills.
3. Pulse and heart-beating, full and hard.
4. Restlessness and anguish.

(Continued next month.)



EDITORIAL SECTION



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No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

COLORADO HOMEOPATHIC SOCIETY. CONDENSED COMMENTS THEREON.

THE TWENTY-FIFTH ANNUAL MEETING of the Colorado Homeopathic Society convened promptly in the Ordinary of the Brown Palace Hotel, Tuesday morning, September 13th, with Dr. S. S. Smythe in the chair and an enthusiastic if not extensive membership present to push the proceedings along promptly. The management of the Brown had every convenience at hand so that very little friction ensued, and as the bureau chairman were prompt in presenting the papers, everything went off with unusual vigor and sprightliness. While the meeting, at no particular time, was overcrowded with members or visitors, many who have heretofore been prominent as active participants in previous programs claiming this distinction by noticeable absence, those who were present made up in quality that which was lacking in quantity, a feature so much desired in gatherings of this sort. Secretary Worth and Treasurer Brown were on hand early in the game, so it cannot be charged that any details of record was omitted, or much money permitted to escape. The fact that these two worthy officials were re-

elected by unanimous vote without even a whisper in opposition, is sufficient evidence that the members of the Colorado Homeopathic Society know "good things when they see them."

THE EVENING MEETING on the 13th, was for the purpose of hearing the new Field Secretary of the American Institute, Dr. H. R. Arndt, of San Francisco, and Dr. C. E. Fisher, of Chicago. Candor compels us to say the attendance at the meeting was much below what the efforts of the two speakers merited, but this does not detract from the fact that both did a world of good for the cause; more especially does this apply to Dr. Arndt, who was there for the purpose of presenting the side of homeopathy to the profession, as well as to the people at large. Many favorable comments have been heard regarding Dr. Arndt's lecture; it was told in a simple, sensible and straightforward manner which impressed everyone present with the fact the speaker knew what he was talking about, and that the cause of homeopathy was benefitted hardly needs utterance in this article as everyone feels that such was the effect of his efforts at this time. Dr. Fisher's paper was more along scientific lines, but of a character to show his ability and enthusiasm in conducting a campaign such as he advocated, which will reflect credit upon the profession in general and Dr. Fisher in particular. THE CRITIQUE takes great pleasure in presenting Dr. Fisher's paper in this issue, and regrets its inability to do likewise with Dr. Arndt's impromptu remarks.

QUITE A GOODLY NUMBER of out-of-town members and others were present and took active interest in the program. Dr. Bartz, the newly-elected president of the society, presented one of the very best papers of the meeting and took part in many of the discussions. Dr. J. W. Craig, of Ault, had a good paper on Kali mur. which received careful attention and was deserving of much more extensive discussion. Dr. Craig declined the nomination of 1st vice-president. This is something no young man should do inasmuch as these honors are, if deserved, evidence of one's standing in the estimation of their associates and should not be declined under any circumstances. Dr. W. S. Connett, of Raton, N. M., combined business with pleasure, bringing an operative case to the hospital. Dr. J. B. Brown performed the operation (it was an appendicitis case) at the Park

Avenue hospital, Wednesday morning, September 14th, and we are pleased to learn of its success. Dr. Connett is one of the old guard of the Denver Homeopathic College who has *made good* in his New Mexico home, and never fails to attend the Colorado state meeting. Dr. G. W. Palmer, of Port Huron, Mich., was an interested and interesting spectator. He has not fully determined upon locating in Denver, but the chances are will do so eventually. He is at present domiciled at 1020 W. 14th Avenue. Dr. G. W. Compton's smile lighted up the gloom of the back seats on the first day's session. That helped a whole lot, as G. W. hails from San Diego, Cal., and they all wear smiles in that town that "never come off." There were quite a goodly number whose names we failed to get, but they all seemed to feel at home; in fact strangers were not permitted to feel otherwise as the officers of the society took particular pains to extend the glad hand to one and all, and no one had occasion to feel they had been slighted in any way.

THE PAPERS WERE ALL GOOD and inasmuch as THE CRITIQUE was made the official publication of the Colorado Homeopathic Society, we will endeavor to prove our assertion by publishing them as soon as possible, permitting our readers to judge of the justice of this judgment for themselves.

DENVER DAILY PAPERS, without exception, gave the meeting numerous notices; the *Republican* going its conferrers one better and publishing a pen or pencil sketch of several prominent members of the society. The likeness of Dr. Smythe was originally used in the campaign just concluded, when it was credited to "Jo" Cannon; Dr. Worth was partly hidden behind his cigar, but it looked as though it might have been a good one and we don't blame him for showing it off. The other pictures were more or less true to nature, only Dr. Bartz is liable to be taken for Colorado's senior senator if this system of publicity is persisted in. Taking everything into consideration, however, neither the society nor any of its members have any complaint to enter against the Denver newspapers, inasmuch as their courtesy in giving the meetings a fair and impartial mention is something which has never been accorded the association heretofore.



DR. E. B. SWERDFEGER, 1st V. Pres.

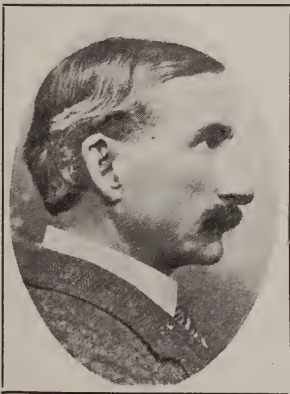
OFFICERS-
ELECT
COLORADO
HOMEOPATHIC
SOCIETY



DR. M. H. BEELEK. 2d V. Pres.



DR. L. E. BARIZ, Pres't



DR. C. M. WORTH, Secretary.



DR. J. B. BROWN Treasurer

AMONG THE AMUSEMENTS announced it was advertised that a "Seeing Denver" trip would be indulged in. Editor of THE CRITIQUE, through courtesy of the "Seeing Denver" company had intended giving out-of-town members a complimentary ride covering eighteen or twenty miles of city scenery, but was unable to get this body of members together. He is prepared to make good at any time, and if the bunch will let him know any time in the future he will give himself the pleasuse of carrying out this part of the program to the limit. The "Seeing Denver" people were instrumental in making the stay of the American Institute members in Denver, the 6th of last July, a most enjoyable event, and we feel sure, had they been given the opportunity, the same opinion as that expressed by many A. I. H. members regarding their ability as entertainers would now prevail in the minds of those whom we proposed placing in their hands on the occasion above referred to.

THE BROWN PALACE HOTEL management was more than attentive to the wants of the society. The ordinary, in which the meetings were held, has been redecorated recently and presented a most beautiful appearance. In fact this hotel has been thoroughly renovated and beautifully decorated and refurnished from top to bottom and out of town homeopaths will make no mistake in recommending this place of entertainment to their friends or taking advantage of it themselves should occasion call them to Denver. The society passed suitable resolutions to this effect; the Brown management is certainly deserving of all the good things that are said of it.

AN EXHIBIT. It is the pleasure of most members attending National and other gatherings of medical societies, to be confronted by "exhibits" of all sorts and sizes, but the twenty-fifth annual session of the Colorado Homeopathic Society was the first event in the society's history that we can recall, where the occasion has been honored with a display of any kind whatever. We may be mistaken in this of course, but an occasional mistake of this sort will not spoil the mention in this particular instance. Horlick's

Malted Milk representative was present at all of the meetings and distributed many samples of this excellent preparation among the profession, besides providing them with literature concerning it. We believe the homeopathic profession at large was the first to "recognize" Horlick's and it is barely possible the latter has not entirely forgotten the former, in its days of prosperity and usefulness.

ELECTION OF NEW OFFICERS took place at noon on the second day of the session. A goodly number were present and voted on this occasion. We will qualify that statement somewhat, however, by saying a goodly number were in attendance, but that the secretary did most of the voting inasmuch as every officer was chosen un-animously, the secretary casting the vote of the society in every instance but one. The outcome will show there was no put up slate, and as a result the utmost harmony prevailed not only throughout the sessions, but following the election of officers. It is to be hoped the following selection will have the effect of unifying the homeopathic profession of Colorado and that next year's meeting will see the full strength of the membership present at the meetings. The election resulted as follows:

President—L. E. BARTZ, M. D., New Windsor, Colo.

1st Vice-President—E. B. SWERDFEGER, M. D., Denver, Colo.

2nd Vice-President—MARGARET H. BEELER, M. D., Denver, Colo.

Secretary—C. M. WORTH, M. D., Denver, Colo.

Treasurer—J. B. BROWN, M. D., Denver, Colo.

Executive Council—DRS. J. W. CRAIG, P. D. RUSSELL, E. L. SADLER, D. A. STRICKLER, W. A. JONES, N. G. BURNHAM.

The different committees and bureau chairman will be appointed later by President Bartz, and the same will appear in these pages. (See Miscellaneous News.)

WE BELIEVE that the meeting just mentioned has been productive of much good to homeopathy in this state. Dr. Arndt's talk will be rewarded by good results and returns which will increase the membership of the A. I. H. Let us all work for the betterment of the cause in Colorado.

MISCELLANEOUS

Editor of THE CRITIQUE and wife celebrated their twenty-fifth wedding anniversary today, October 1st.

* * * *

We take pleasure in printing pictures of the officers-elect of the Colorado Homeopathic Society in this issue. There is no occasion for apology on our part.

* * * *

And we must repeat it again: THE CRITIQUE will answer no requests for sample copies unless the same is accompanied by sufficient coin of the realm to pay postage.

* * * *

Dr. Carey K. Fleming, one of the most highly respected physicians and surgeons of Denver, died at his home in this city the latter part of last month. The death was sudden, being due to hemorrhage of the brain.

* * * *

Dr. George Phillips, formerly of Kansas City, was one of the new members enrolled in the State Society. He began well by having a very interesting paper for the bureau of obstetrics which will be published later in THE CRITIQUE.

* * * *

Dr. C. N. Sommer, a homeopathic physician formerly located at Boulder, has moved to Denver and will open offices in this city as soon as he can find a suitable location. He attended the State Society meeting and enjoyed it very much.

* * * *

Dr. Robert McAdams, of Hot Springs, Ark., was a visitor in Denver at the residence of his sister, Mrs. J. Polson, 1455 Humboldt Street, several weeks of last month. He is one of the prominent homeopaths of that hustling Arkansas town.

* * * *

Mr. S. K. Hooper, for many years General Passenger and Ticket Agent of the D. & R. G. Railway, has been promoted to the position of assistant to the traffic manager. Mr. Frank A. Wadleigh succeeds Maj. Hooper as general passenger agent.

* * * *

Dr. Wm. H. Van Den Burg has returned to New York City and from this date can be consulted as usual. Patients will not be seen in the office on Sundays except by appointment. Hours, 9 a. m. to 12 m., and by appointment. 30 West Forty-eighth Street, New York.

* * * *

Dr. G. A. Almfelt wishes to announce that he has removed his office and residence to 5333 North Clark Street, Chicago, Ill., and opened a down town office at Suite 1404, Heyworth Building, 42 Madison Street, where he may be seen Tuesdays and Thursdays, 3 to 5 p. m.; Sundays, 1 to 4 p. m. Telephone, Central 32; residence telephone Ravenswood 2193.

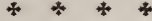
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Dr. H. R. Arndt, Field Secretary of the American Institute of Homeopathy, is carrying off the joke in a business-like way. He attended the Pennsylvania State meeting the 20th, 21st and 22nd of last month and from there went to Philadelphia where he addressed a large meeting of medical men and students on the occasion of the opening exer-

cises of Hahnemann Medical College. This listens good to THE CRITIQUE and looks like there was "something doing."



Dr. W. R. Welch, globe-trotter, returned to Denver the latter part of last month. He had a delightful trip abroad and is back in the harness ready for business at the old stand.



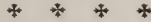
There will be a meeting of the Denver Homeopathic Club at the Chateau Lafayette, Saturday evening, October 8th, at which time a report of disbursements of money donated for A. I. H. entertainment will be made and such other business as may come before the meeting. It is hoped a large attendance will be present as matters of importance will come up for consideration.



The National League for Medical Freedom has opened offices in the Majestic Building, this city, and if our A. M. A. friends imagined this organization would be fooled into quitting simply because the "Committee of One Hundred" had withdrawn all bills which were brought to the attention of Congress at its last session, notably the Owen Bill, "it has another guess coming," as the boys say.



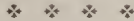
Dr. George William Compton, San Diego, Cal., made a much appreciated visit to THE CRITIQUE headquarters the latter part of August. We are pleased to report the good doctor in excellent health and that he assures us of his prosperity by word of mouth and from general appearances. THE CRITIQUE is pleased to learn that Mrs. Compton and Compton, Jr., are both enjoying their California home.



Dr. C. D. Fisher was one of the "lucky dog" doctors able to escape the dull period of July and August and take a trip. During these months he sojourned in Alaska, devoting his time to rest, recreation and religious reflection. He returned in time to participate in the program of the State Society and gave every evidence of being ready for the fall campaign, insofar as his physical condition is concerned.



Owing to the lack of space in this month's issue we have been compelled to put off publishing State Society papers until next month. We hope to give our entire space to the work in November and December issues and thus get this material before our members before the papers get "cold." Those who have not had their papers typewritten are requested to do so at once and also that they send the same to Secretary Worth.



A year ago there emanated from the Passenger Department of the Denver & Rio Grande Railroad a folder giving the time of trains, with notes descriptive of points of interest, the scenery, and the industrial and commercial importance of the cities located on its line, together with information regarding altitudes and populations. This folder, at once so simple and understandable, was such a marked improvement over the puzzling leaflets usually handed the traveler that it was received with instant favor and attracted much attention. Its drawback was an awkward fold, and it was minus a map. All this has now been remedied, a new descriptive folder, with a splendid Coast to Coast map and a collapsible fold that simply falls together, having made its appearance a day or two ago. The Rio Grande now enjoys the distinction of issuing the simplest and most readily understood time table of any railroad in the United States. May its example be followed by other lines.

THE AMERICAN INSTITUTE ENDORSES (?) FEDERAL HEALTH BUREAU.

The American Institute of Homeopathy at the regular annual convention at Pasadena, California, on July 15th, 1910, put itself on record as favoring the establishment of a Federal Bureau of Public Health. A special committee of three, with Dr. James W. Ward, of San Francisco, as chairman, was appointed to assist in the establishment of such a Bureau. This is further evidence of the erroneousness of the claims by opponents of the Federal Health Board that Homeopaths are against it.—*Bulletin of the Committee of One Hundred on National Health*, August, 1910. The foregoing statement is correct, we suppose, but the Committee of One Hundred should not advertise it too strong; it is barely possible, yea altogether probable, that A. I. H. members as individuals are not overly enthusiastic regarding this particular "One Hundred's" efforts.



SCHEDULE OF PRELIMINARIES, HOMEOPATHIC COLLEGE, UNIVERSITY OF MICHIGAN.

REGISTRATION—Old College Building, North University Avenue, October 3rd.

OPENING ADDRESS—The Dean, Lower Lecture Room, Hospital Building, 10 a. m., October 4th.

OPERATIVE CLINIC—Hospital Amphitheatre, 11 a. m., October 4th.

ASSIGNMENT OF LABORATORIES AND CLASS WORK—Hospital, a. m. October 4th.

FACULTY RECEPTION AND BANQUET to the men of the Department, Michigan Union Club House, 7:30 p. m., October 28th.

RECEPTION to Ladies of the Department, residence of Mrs. Hinsdale, 8 p. m., October 28th.

STUDENTS WHO ARE STRANGERS in Ann Arbor will do well to report at the Dean's Office as early as convenient. Members of the different classes will be selected to receive such as may wish assistance in becoming located. This will obviate the anxiety and annoyance sometimes experienced by one's going to a new locality.

ALL STUDENTS will take notice that under the new general rules, registration must be made by October 4th, as class work will begin at once. It is a misfortune not to commence a course of study promptly.

W. B. HINSDALE, *Dean*.

Ann Arbor, Mich., September 15th, 1910.



COUNCIL AND COMMITTEE CHAIRMEN AND MEMBERS.

Before leaving for his home, President-elect Bartz of the Colorado Homeopathic Society, made the following appointments of council and committee chairmen and members:

Administrative Council—J. W. Craig, Chairman; P. D. Russell, W. M. Dake, C. W. Enos, G. R. Lamb, Emma D. Pronger, Leroy C. Hedges.
Legislative Committee—J. B. Brown, S. S. Smythe, J. G. Locke.
Publication Committee—J. P. Willard, A. M. Moore, N. G. Burnham.
Finance Committee—C. D. Fisher, I. M. Pierman, Lillian I. Pollock.

Arrangements Committee—G. S. Peck, Wm. R. Welch, Frona Abbott, C. M. Worth, F. A. Faust.

Press Committee—J. W. Mastin.

The following resolutions were unanimously adopted:

Be it resolved by the members of the Colorado Homeopathic Medical Society, in regular session assembled, that a vote of thanks be tendered to the Brown Palace Hotel management for the many courtesies extended and especially for the use of their Ordinary as a meeting place.

Be it resolved by the members of the Colorado Homeopathic Medical Society, in regular session assembled, that a vote of thanks be tendered the Denver press for favorable mention made of our meeting and for the many courtesies extended us during said meeting.



CHICAGO LETTER.

Dr. Robert Moth, Hahn. '05, is visiting his family in Chicago.

Dr. J. L. Gable, Hahn. '09, is now located at Cambridge, Ohio.

Dr. G. E. Dienst of Auroa, Ill., is spending his vacation in Michigan this year.

Dr. John R. Wilkinson, Hahn. '11, is the proud father of a new arrival in his home. This time it is a boy.

Dr. W. W. Sherwood has moved his office from 103 East Thirty-first Street to 3517 Cottage Grove Avenue, Chicago.

Dr. H. C. H. Schroeder, Hahn. '09, has located in Granite City, Ill., after spending a year at the Metropolitan Hospital, New York City.

Dr. Margaret M. Dunn, Hahn. '08, now located in Momence, Ill., was a recent Chicago visitor, bringing a surgical case to Hahnemann Hospital.

Dr. G. H. Grieve, Hahn. '09, after spending a year as interne in the Massachusetts Homeopathic Hospital of Boston, has returned to Chicago and is now interne in Hahnemann Hospital.

Dr. R. L. Barr, Hahn. '08, who has been located in Rochester, N. Y. since his graduation, was married in August and will change his location to Mount Upton, N. Y. Like many of the younger M. D.'s the doctor chose a nurse for his life partner.

Dr. J. B. S. King, as president of the Executive Committee of the Regular Homeopathic Medical Society, with the aid of the committee, is preparing an interesting program for the coming winter. The Society meets the first Tuesday in each month.

An informal dinner was given on Friday, September 16th, by the Chicago Homeopathic Medical Society in honor of Dr. H. R. Arndt, Field Secretary of the A. I. H. Dr. Frank Wieland was the efficient toastmaster of the occasion.

The September meeting of the Esglewood Homeopathic Society was held on the 13th at the home of Dr. Guernev. The following officers were elected for the coming year: President, Dr. L. F. Ingersoll; Vice-President, Dr. Harvey Farrington; Secretary and Treasurer, Dr. D. M. McMullen. Dr. E. A. Taylor gave a good talk on materia medica and general discussion followed. The October meeting will be held at Dr. Ingersoll's home. Topic, "Public Vaccination."

Chicago, Illinois, September 17th, 1910.

PENNSYLVANIA NEWS.

THE PENNSYLVANIA HOMEOPATHIC STATE MEDICAL SOCIETY. By direction of the Board of Trustees, the following program of the forty-seventh session of the Homeopathic Medical Society of the State of Pennsylvania has been arranged. The meeting will be held in Williamsport on September 20, 21 and 22, 1910, and many of our members have signified their intention to make it a memorable one.

Wednesday evening will be devoted to social enjoyment under the auspices of the West Branch Homeopathic Medical Society, which is arranging to entertain members and visitors most hospitably. The ladies will receive particular attention, and it is hoped that many of the members will bring the ladies of their families with them.

Membership in the Society is a duty each one owes to himself and to the cause of homeopathy. How many of those who are receiving the benefits of our organization in the conservation of the interests of homeopathy will show an indifference to those interests by remaining away from the meeting, if a member, and by not affiliating with us, if not already one of our number.

Order of Business, Tuesday, September 20, 1910. Morning session, 9:30 to 1 o'clock:

Call to Order.

Invocation—Rev. William Perry Eveland, A.M., Ph.D., D.D., President of Williamsport Dickinson Seminary.

Address of Welcome—Hon. Charles D. Wolfe, Mayor of Williamsport.

Address of Welcome—E. C. Blackburn, M. D., of Williamsport

Response to Address of Welcome.

Address of President—H. F. Schantz, M. D.

PROGRAM OF SCIENTIFIC PAPERS.

Ophthalmology, Otology and Laryngology—G. J. Palen, M. D., Chairman.

Obstetrics—J. M. Heimbach, M. D., Chairman.

Gynecology—D. B. James, M. D., Chairman.

Paedology—H. Ellen Walker, M. D., Chairman.

Surgery—G. W. Hartman, M. D., Chairman.

Materia Medica and Provings—E. L. Nesbit, M. D., Chairman.

Sanitary Science—I. D. Metzger, M. D., Chairman.

Homeopathic Institutes and Clinical Medicine—G. M. Golden, M. D., Chairman.

Sixty (60) papers in all will be presented.

PHILADELPHIA COUNTY HOMEOPATHIC MEDICAL SOCIETY. The regular monthly meeting of the Homeopathic Medical Society of the County of Philadelphia was held at Hahnemann College, Thursday evening, September 8th, 1910, at 9 o'clock. Dr. Theodore J. Gramm, President, in the chair, delivered his inaugural address. The scientific paper of the evening was read by Dr. Edwin Lightner Nesbit, Director of the Hering Laboratory of Drug Research of the Hahnemann Medical College, entitled, "The Comparative Method of Studying the Action of Drugs." The meeting was well attended, and hearty discussion was entered into.

PERCY A. TINDALL, M. D., Secretary.

THE PHILADELPHIA SOCIETY FOR CLINICAL RESEARCH. The Philadelphia Society for Clinical Research announces its fall and winter program, the first meeting of which was held on Tuesday evening, September 28th, at the residence of C. Emory, M. D., Second Street Pike, Fox Chase. The officers for the ensuing year were nominated at this meeting. Dr.

Emory read a paper and presented numerous interesting clinical cases. The physicians and guests of the Society journeyed from Philadelphia to Dr. Emory's residence by automobile, the meeting being held in the open. There was a full attendance, with a bounteous repast, Dr. Emory acting as host.

JOHN F. ROWLAND, M. D., *Secretary*.

HAHNEMANN MEDICAL COLLEGE OF PHILADELPHIA. The sixty-third annual session of the Homeopathic Medical College of Philadelphia begins on Monday, September 26th, 1910, and continues until June 1st, 1911. In the recent announcement special attention is directed to the prospectus of the department of *materia medica*. The alumni of the college will be highly gratified at learning the particulars regarding the magnificent endowment of Mr. Walter E. Hering, who has established for all time the Constantine Hering Professorship of Homeopathic *Materia Medica* and Therapeutics. The *materia medica* of Hahnemann, Hering, Dunham and other noted investigators is thoroughly elucidated throughout the course, and a number of enthusiastic and experienced clinical teachers will demonstrate the principles and efficiency of homeopathy in practical work.

The college library contains about 20,000 volumes, besides a large and rare collection of unbound pamphlets, some of which are scientific, and others of historic value. The college library contains all of Hahnemann's works in the original, many of them being enriched by annotations in the handwriting of Dr. Hering, and complete sets of all the homeopathic journals of this and other countries. This is without doubt the most complete library of homeopathic literature in existence.

The following is a summary from the report of the Hahnemann Hospital for the past year:

In-patients treated	3,087
Emergency cases	8,465
Out-patients	21,876

The 21,876 out-patients treated in the dispensary were distributed as follows:

Medical	7,597
Women	1,550
Eye, Ear, Nose and Throat	5,208
Surgical	7,521

The total cost of maintenance of the hospital during the year aggregated \$175,000.00.

The teaching facilities of the Hahnemann Hospital will be greatly enhanced during the session of 1910-1911 by reason of the association of the Children's Homeopathic, St. Luke's and the West Philadelphia General Homeopathic Hospitals with Hahnemann College for teaching purposes. These institutions, in conjunction with the college hospital, will give the students the opportunities to be derived from the experience of over five hundred beds, and a total number of cases of illnesses and accidents of all sorts during the year just closed amounting to 78,004. The following figures have been obtained from the last annual reports of the respective institutions:

Children's Homeopathic Hospital—

In-patients treated	1,441
Emergency cases	3,542
Out-patients	12,319
Maternity department	109

Total

17,411

St. Luke's Homeopathic Hospital—

In-patients treated	846
Emergency cases	1,192
Out-patients	11,616
Total	<u>13,654</u>

West Philadelphia General Homeopathic Hospital—

In-patients treated	568
Emergency cases	9,111
Out-patients	4,832
Total	<u>14,511</u>

PERSONALS.

Dr. Alexander G. C. Stetson and Miss Lucy Haddock Hewitt announce their marriage on Saturday, the third of September, 1910, in the city of Philadelphia.

Dr. Fred W. Smith announces the opening of his office at 1433 Spruce Street, Philadelphia. Eye, ear, nose and throat. Hours, 4 to 6 p. m.

Dr. Thomas H. Carmichael of Philadelphia has been appointed chairman of the committee on legislation of the Homeopathic Medical Society of the County of Philadelphia.

Dr. Harry E. Hoffman, a recent graduate of the Hahnemann Medical College of Philadelphia, and at present medical director of the State Hospital for the Insane at Norwich, Conn., passed the Connecticut State Board Examination with an average of 94.1 per cent; one of the highest averages ever obtained before the Connecticut State Board of Medical Examiners.

RALPH BERNSTEIN.



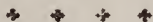
NEW MEDICAL BOOKS.

MOTHERHOOD. A Manual on the Management of Pregnancy, the Preparations for and the Conduct of Labor, the Care of Mother and Child after Labor, and the Principles and Methods of Infant Feeding up to the Third Year of the Child's Life. Prepared especially for mothers and nurses. By Hudson D. Bishop, M. D., Visiting Obstetrician, The Maternity Hospital, Cleveland. Octavo, 244 pages, with Appendix and Glossary. Cloth. Price, \$1.50 net. Rose Publishing Co., Cleveland.

This is one of the most practical works upon this subject it has ever been our good fortune to get hold of. It is a book that would prove of inestimable value to the young practitioner, especially if he has been obliged to get his practical experience of obstetrics after leaving college, and to the prospective mother it would prove a veritable boon as it would inform her upon subjects connected with pregnancy she would be unable to get otherwise than by actual experience. Every physician in the country should recommend this book to their prospective parturient patients and see they are provided with a copy, as it will make the work of the physician and nurse much easier and the labor of the prospective mother less laborious in many cases.

READING NOTICES

BLOOD DISORDERS. In all forms of blood dyscrasia, as indicated by skin disorders, bad healing power and general debility. Ecthol often proves effective when other treatment fails. It quickly raises the antitoxic and so-called opsonic power of the blood, increases the resisting power of the tissues and thus minimizes the dangers of bacterial attack. Healing processes are stimulated, and the whole economy is materially improved in its vital details.



MOIST HEAT. Thermotherapy in inflammatory conditions seems to prove most effective when applied in the form of moist heat.

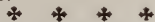
The relaxation of pressure by infiltrated and swollen tissues upon nerve endings, as experienced by the relief of pain, specifically proves this.

The advantages of moist heat where indicated is generally acknowledged. The method of its application from professional preferment seems to be in the form of Antiphlogistine. By this method, a high temperature can be maintained in contact with the affected part for hours without exposure to the patient for redressing.

The superior advantages of Antiphlogistine over other forms of moist dressings, such as poultices, hot packs, etc., are that it is easily applied, retains its heat for hours, is antiseptic in action, and above all produces satisfactory therapeutic results.



A VALUABLE AND SEASONABLE REMEDY. To reduce fever, quiet pain, and at the same time administer a laxative and tonic is to accomplish a great deal with a single tablet and we would especially call attention to the wide use of Laxative Antikamnia and Quinine Tablets in chronic or semi-chronic diseases which begin with a severe "cold." Among the many diseases and affections which call for such a combination, we might mention lagrippe, influenza, coryza, coughs and colds, chills and fever, and malaria with its general discomfort and great debility. Attention is particularly called to the therapeutics of this tablet. One of its ingredients acts especially by increasing intestinal secretion, another by increasing the flow of bile, another by stimulating peristaltic action, and still another by its special power to unload the colon. When the temperature of the body is above normal, conditions are especially favorable for germ development. It is a matter of every day observation that a simple laxative is often sufficient to relieve the most serious complications.—*Archives of Pediatrics.*



HOME TREATMENT OF TUBERCULOSIS. Not every tubercular patient is able to seek the climate best suited to his condition, and it becomes necessary for him to make the best of those curative means at his command. After the physician has outlined to him a well ordered mode of living, there then arises the question of an agent that will aid in tissue reconstruction and resistance to the disease process. In choosing his therapeutic means of combating tuberculosis, the physician takes into consideration two features—the value of the remedy chosen for the purpose and the patient's ability to continue it for a sufficient period to derive results. Quite naturally, he thinks of cod liver oil. But generally cod liver oil products quickly prove distressing to the gastric apparatus. A striking exception is the *Cord. Ext. Ol. Morrhuæ Comp. (Hagee)*. Although it is just as potent a tissue builder as the crude product, it possesses added advantages in that it is palatable and this is a most im-

portant feature. It agrees with weak stomachs in a surprising manner and may be continued indefinitely without giving rise to gastric unrest.



THE MANUFACTURE OF ANTITOXIN. In the treatment of diphtheria the physician of today uses antitoxin as a matter of course. It is his first expedient and his last resort. He believes implicitly in its efficacy. But does he understand and appreciate all that is involved in the production of that antitoxin—the scientific knowledge, the skill, the caution, the minutiae of detail? This thought is forced upon the writer through the perusal of a recent publication of Parke, Davis & Co., which deals in part with the subject of antitoxin manufacture. Here is a specimen chapter:

"In the selection of the horses which are to act as the living laboratories for the production of antitoxin, we apply not commercial or academic knowledge merely, but, what is more to the point, veterinary skill. The animals must be vigorous and healthy. They are carefully examined, their temperature noted for several days, and the presence of glanders excluded by the delicate mallein test. It is the blood-serum of these animals that is to be injected into the patient later on, and no precaution can be regarded as extreme which contributes the slightest positive assurance of its purity.

"Not only must the horses be in good general condition when inoculated; they must be kept so. They are fed, stalled, groomed and exercised for no other purpose than to maintain to the full their self-protective, antitoxin-producing powers. Thirty miles removed from the noise, smoke and dust of the city is our stock farm, equipped with model stables and supervised by expert veterinarians. Here, at Parkedale, on more than three hundred acres of sunny slopes, at an altitude of six hundred feet above the level of the Great Lakes, live the horses which we employ in serum-production. Amid these favorable surroundings they maintain the physical condition so essential to satisfactory service as serum-producers.

"These are preliminary considerations. Young, healthy, well-kept horses, indispensable as they are, would be of little use in the elaboration of a reliable antitoxin unless the work of injecting them with toxin were conducted accurately, aseptically, systematically, and throughout a period long enough to allow physiological reaction up to the limit of attainable immunization. We have horses enough, so that there is no occasion to be in a hurry with any of them; the exact length of time required for complete reaction is determined in each individual instance by carefully scheduled observations.

"It goes without saying that in the preparation of the toxin and its injection into the horses as well as in obtaining the blood serum, the most rigid bacteriological technique is maintained. The methods we employ agree substantially with those of Roux, Aronson, and Behring, and are from first to last in charge of experts. The varying susceptibility of different animals, whether guinea-pigs or horses, to the diphtheria poison; the more or less rapid physiological reaction; the variation in strength of the antitoxic serum from different horses; the absolute purity of the finished product—these are all important and delicate questions demanding for their determination a high degree of skill and scientific accuracy of observation. These qualifications, in our judgment, outrank all other considerations in the work of producing a reliable antidiphtheric serum."

The foregoing has reference to but a single step in the process of serum production, and affords but a hint of the safeguards with which antidiphtheric serum (P. D. & Co.) is hedged about at every stage of its manufacture—conditions which enable the company to guarantee the purity and potency of its antitoxin.



ORIGINAL
ARTICLES

*CHRONIC ENDOCERVICITIS AND ENDOMETRITIS.

By L. E. BARTZ, M. D.

I HAVE PURPOSELY CHOSEN the dual subject of chronic endocervicitis and endometritis because of their intimate relationship, and their frequent common etiological origin. There is probably no other pathological condition in the female for which the family physician is so often consulted.

Of the two diseases, endocervicitis is the least dangerous, the more frequently complained of and most neglected by both patient and physician. How often have each of you had patients come to your office, who on their first visit have given the history of having had an annoying or even a profuse leucorrhœa, menorrhagia or metrorrhagia for from three to six months and probably as many years preceding, and have given the patient but slight attention, when a closer examination might have disclosed a soft, patulous and eroded cervix, sending forth a mass of tough, stringy mucus which sooner or later must break down the natural barrier at the internal os and allow the infection to continue upward into the intrauterine canal, and finally complete the devastation by invading the delicate structure of the fallopian tubes. Then could there be any reasonable excuse for not insisting on a vaginal examination in every case of leucorrhœa, menorrhagia or metrorrhagia extending over any considerable period of time? I dare say there is none.

Their etiological factors may be classified as predisposing and exciting.

Among the more common predisposing causes are the constitutional dyscrasia as manifested in the syphilitic and tuberculous. It matters little whether these be hereditary or acquired, the one predisposes as readily as the other.

The unsanitary home, the improper and insufficient dress, and those trade occupations which require the individual to assume and maintain the stooped or standing

*—Read before Colorado Homeopathic Society, September, 1910.

position a great part of the working day, are frequent causes that predispose to a lowered vitality and a lowered resisting power of the body, and which often finds its first expression in a congestion of the papilla of the mucus membranes of the respiratory, digestive and genito-urinary tracts, as manifested by a superabundance of catarrhal secretions.

It is not necessary for me to repeat here the evil effects of the sweatshop or of the seatless department store that draw so heavily upon the dependent girl who is just developing into womanhood, as well as the indigent mother upon whom falls the burden of supplying the necessities of life to her offspring. Since the development of the sugar industry in many parts of our state there has been a rapid increase in the prevalence of these ailments among the inhabitants of the rural districts. The beet tenders are, as a rule, foreign people, coming from Northern Europe, who as a class are remarkably free from pelvic troubles when in their native countries, but, being desirous of wresting a home and a competence from their labors, the expectant mother and her daughters labor in the field from early morning until late at night along with the father and the sons. The necessary and continuous stooped position, during thinning, weeding and topping of the crop, crowds the viscera down into the pelvis and is leaving in its wake a long train of retroversions and flexions, prolapses and barrenness accompanied by the usual inflammatory processes of the cervical, intrauterine and tubal structures.

The exciting causes may be divided into those that extend from below upward and those that come from above downward. Among those that extend from below upward, the cervical laceration readily ranks of first importance. Every woman with a lacerated cervix carries with her a prolific soil for catarrhal, if not for septic and malignant invasion. The laceration, with its consequent eversion, exposes the delicately constructed mucus membrane of the cervical canal to friction and irritation against the comparatively harsh walls of the vagina.

Gonorrhoea is another frequent cause of chronic inflammation of the female genital tract. The microscope has shown us that the innocent sufferers from chronic gonorrhoea among women are far more frequent than was formerly taught or believed. The continued use of the stem pessary, excessive coition—especially in case of unrepaired

cervical laceration—malignant and non-malignant growths of the vaginal walls and cervix, and the cold or strong antiseptic douche used immediately after coitus, while the parts are in a high state of hyperaemia, for the prevention of conception, are other external causes that tend to keep up a congestion of the uterine and pelvic organs.

Probably the most frequent cause of chronic inflammation of the mucus membrane of the fundus, which eventually finds its way down through the cervix, is suppression and retention of the menstrual flow. Whatever the nature of the obstruction, the blood within its warm confine soon deteriorates into a foreign body and through its irritating influence on the mucus membrane gives rise to uterine contractions and uterine inflammation. Menstrual suppression due to exposure during or immediately preceding the flow always causes more or less congestion of the endometrium, which, as time goes on, develops into a chronic catarrh.

Parturition and abortion are often followed by endometritis because of mechanical injury and retention of secundines and other products of conception. Subinvolution, corporeal fibroids, carcinomas and sarcomas are occasional causes of chronic endometritis. Indeed, any form of acute endometritis may terminate in one or more of the chronic.

The most constant symptoms of chronic endocervicitis or endometritis is leucorrhœa. It is often the only symptom. At first the secretions are alkaline in reaction and resemble the white of an egg; later, they become more viscid and adhere closely to the affected parts and become loaded with epithelial cells; finally, the secretion loses its tenacity and assumes a muco-purulent character, which may be stained with blood. As it progresses it loses its alkalinity, and becomes very acid, causing the epithelial layers of the mucus membrane of the cervix to undergo disintegration, thus exposing the underlying surface in the form of abrasions and erosions. If it is not relieved and the disease progresses still further, the papillae of the mucus membrane proper undergo proliferative granulation. On examination, the cervix has a decided feeling of roughness as well as a fiery red appearance. It is sometimes difficult to differentiate between granular endocervicitis and cervical papilloma.

Pain like leucorrhœa is a common symptom in chronic endometritis, but it is not so constant in endocervicitis unless there be cervical laceration. The pains are usually referred

to as being of a heavy, dragging or burning variety located in the supra-pubic, inguinal or sacral regions, which become aggravated from much standing, and which may become sharp or lancinating immediately before, during or after the menstrual periods. If there are lacerations, erosions or eversions of the cervix, coition may become painful and even unbearable. After a considerable period of suffering, there usually is a long train of reflex aches and pains, manifesting themselves in periodic neuralgias, headaches and migraines, accompanied or succeeded by nervous reflexes ranging from a feeling of uneasiness and uncertainty to that of globus hystericus and neurasthenia. The intensity of the pain does not always coincide with the extent of the lesion.

Menorrhagia and metrorrhagia are often annoying as well as persistent symptoms during the stage of hypertrophic infiltration of the mucus membrane or when extensive exfoliation of the endometrium takes place. This seems to become especially true when specific infection with the gonococcus or tubercular invasion of the endometrium has taken place.

Amenorrhœa or even cessation of menstruation may succeed menorrhagia and metrorrhagia when the hypertrophic infiltration gives way to atrophic absorption.

Sterility is more often the result of pathological changes during either specific or non-specific endometritis than that of being a symptom of those conditions themselves. Not infrequently, however, cases are met with that have seemingly no other complaint. Upon thorough examination, however, a large percentage of these cases reveal a well developed endocervicitis or endometritis, and occasionally both. A smaller percentage gives a history of the abortive habit. Which habit may or may not date back to some previous confinement or abortion, but which most assuredly with rare exceptions depend upon an existing chronic inflammation of the intrauterine cavity.

The treatment of chronic endocervicitis and endometritis resolves itself into prophylactic, local, internal and surgical.

There are general prophylactic measures applicable to these affections as well as to the various other pelvic diseases. By the proper application of diathetic rules in selecting such foods as will improve the nutritive functions, the body is rendered less susceptible to inflammatory processes. Costive-

ness, which has such profoundly evil effect in the female, can usually be overcome by the selection of proper food and drink. Open air exercise should be prescribed in those of sedentary habits. Sea-bathing, when it can be had, and the steam or sitz bath in most cases accomplish much good by keeping the skin healthy and active. The clothing should, as much as possible, be suspended from the shoulders rather than from the waist; especially is this to be desired in those who do much physical labor. The corset should only be tolerated while on dress parade, and not then during the menstrual or gestative periods. Any form of dress which either temporarily or permanently crowds the viscera into the pelvis will sooner or later cause congestion of the pelvic organs and should therefore be interdicted. Any measure that will prevent lacerations of the cervix during confinement, or that may be judiciously used to hasten complete evacuation of the uterus after delivery, should be unhesitatingly applied. A hasty resort to the obstetrical forceps for the sole purpose of shortening an otherwise normal delivery, as is made possible and many times necessary by the administration of opiates and anaesthetics in the first or second stages of parturition, on the groundless plea of a painless childbirth, is an abominable habit that is being condoned by the busy, indolent and careless practitioner; but which should be discouraged by all fair-minded and sound-thinking men and women, as a prophylaxis against cervical and uterine laceration and consequently against inflammations of those organs.

Local Treatment. Hot vaginal douches of mild antiseptics, such as normal salt, boracic acid, carbolic acid, permanganate of potassium, cleanse the parts and often reduce inflammation in simple catarrhal endocervicitis. I prefer the douche to consist of three or four quarts of the solution, given as warm as bearable, and as often as each alternate day. The hot douche has the advantage that it may be readily administered by the patient herself in the privacy of the home, an advantage that is worth the while in the treatment of young and unmarried women and many others who are sensitive about appearing for regular office treatment.

Local medication is usually most successfully applied on a tamponade made of absorbent cotton or wool. I prefer them combined, as the wool maintains its bushy effect even when wet, while the cotton absorbs and retains more of the medicament. Glycerine as a basis for local medication is so

commonly used that it is unnecessary to repeat its advantages more than to say that its chief action is that of extracting the blood serum from the mucus membrane, and that it is of a proper consistency to make it a valuable menstrum for carrying other drugs. I will not enter into detail indications for the unnumbered preparations which have their advocates as being the remedy par excellent. Let it suffice to give the indications for a few which most of us have learned to trust.

In simple catarrhal endocervicitis, where there is a considerable congestion of the cervix and surrounding vagina, with acid-leucorrhœa, and increased menstruation, or when the cervix or vagina is studded with aphthous ulcers, boro-glyceride becomes as near a specific as we could think of or wish for; for the same conditions with the addition of extension to the glandular structures, and a profuse, stringy leucorrhœa, *hydrastis canadensis* becomes the indicated remedy, both locally and internally; if the tough, tenacious discharge becomes purulent with erosions or granular degeneration of the cervix, think of *calendula*.

I have personally learned to place a great deal of reliance upon the efficacy of a compound prepared in the following manner: to a warm watery extract of a half pound each of the flowers of *calendula* and *hypericum*, add a half pound of crystal boric acid; then to the warm mixture add sufficient pure glycerine to make one gallon. This I have learned to use, almost empirically, in all degrees of local congestion of the cervix and endometrium. It has the advantage of combining in one solution the hygroscopic qualities of glycerine, with the antiseptic features of boric acid, the sedation of the *hypericum* and distinct granulating or healing powers of the *calendula*.

Occasionally it becomes desirable to use a strong yet harmless antiseptic and cautery. An admixture of equal parts of the tincture of iodine and pure carbolic acid does the work efficiently and painlessly.

In recent years the several varieties of electrical currents, when judiciously applied, have proven to be valuable adjuncts in the local treatment of chronic inflammations of the uterus. The continuous or galvanic current is probably more often indicated than other varieties. The action of the positive and negative poles of this current are diametrically opposite. A knowledge of their action therefore becomes an

essential feature in applying them to disease. The positive pole is anaesthetic, astringent, absorbent, and the least painful. The negative pole is an irritant, caustic, a destroyer of tissue, and a vasomotor dilator; both destroy pathogenic bacteria, promote general nutrition, and are powerfully stimulant in their general or systemic effect.

The poles of the faradic currents are not nearly so much at variance with each other, though the positive pole is said to be more sedative and the negative more stimulant in action. The direct or inducing current stimulates muscular contraction, while the secondary or induced current is more useful for its sedative effect.

There is probably no one local measure to which the profuse leucorrhœa of chronic endometritis will so readily yield as to the positive galvanic current, applied directly to the endometrium semi-weekly in quantities ranging from twenty-five to seventy-five milliamperes. By its attraction for the acid radicals of the disorganized tissues, it at first converts the acid-leucorrhœa into a bland non-irritating discharge and later dries it up by its astringent action on the mucus membrane. When applying direct positive galvanic current, a plain copper or mercurial-coated copper electrode is to be preferred on account of their increased antiseptic value. During electrolysis the acids of the tissues form an acid salt of copper or mercury, which is driven into the adjacent tissues by cataphoresis. Should the difficulty depend upon a chronic gonorrhœa, the cataphoric effect of these electrodes is all the more to be desired.

Again, the positive pole becomes a powerful hemostatic when directly applied in a menorrhagia or metrorrhagia, which are frequent sources of annoyance, and even alarm to both patient and physician. By its vasomotor constructive effect, and by its power to coagulate albumens, it closes the dilated capillaries, and hardens the tissues against easy egression of the blood supply.

The negative galvanic current has found its field of greatest usefulness in these diseases in the presence of amenorrhœa and dysmenorrhœa. Through its irritant effect it stimulates vaso-dilation, and attracts the fluids and alkaline radicals of the tissues, thereby increasing the flow of blood to the parts and softening the tense sphincter muscles of the os uteri. I have found nothing so gratifying as the use of fifty or more milliamperes of negative galvanic electricity;

a few days before the expected period in cases of dysmenorrhœa. It matters not whether the dysmenorrhœa be consequent to retention of blood clots, exfoliations of the mucus membranes, or stenosis of the os from cervical lacerations.

The primary faradic current is a valuable local measure, in reducing the uterus to its normal state in subinvolution. It also stimulates uterine contractions and thus becomes a useful agent in expelling retained clots, secundines and false conceptions. The secondary faradic current is chiefly used to relieve pain and sensitiveness.

Static electricity has no effect on the pathology of the uterus, and its use in these diseases is therefore limited to the treatment of the neurotic symptoms.

Internal Medication. In selecting the internal remedy the constitutional symptoms must be taken into account, as well as the local manifestations. Owing to the limited time at my disposal, I shall only give the keynote and differential indications for a few selected remedies, rather than the totality of symptoms which make up the complete picture of the remedy.

Hydrastis canadensis and *kali bichromicum* have as their keynote: tough, yellowish, tenacious discharge, which can be drawn out in long strings, with erosions and superficial ulcers of the cervix and vagina. *Hydrastis*, however, has a nervous symptom manifesting itself as a sinking at the epigastrium, while the characteristic punched out ulcer of *kali bich.* is found here as in catarrh of the nose and throat.

Too early, too profuse and too long menstruation lead to *calcarea carb.* and *creasotum*; especially in tubercular and leuco-phlegmatic constitutions. *Calcarea* patients, however, suffer from the slightest draft of cool air, while *creasotum* has an intensely acid and putrid leucorrhœa, which burn and scald the parts, causing redness, itching and sensitiveness to touch and coitus.

Graphites and *pusatilla* have scanty and delayed menses. *Graphites* has as its distinguishing symptom an irritable skin, while *pulsatilla* has a mild tearful disposition and a bland leucorrhœa.

In the syphilitic, think of *mercurius* and *aurum mur.* *Mercurius* has all its symptoms worse at night. *Aurum* finds its expression in the nervous system, with nervous despair and melancholy.

Conium maculatum has as its keynote, indurated cervix and breasts; sepia, bearing down pains, causing the patient to cross her limbs to keep from losing the parts.

Arsenicum, pale and waxy complexion. Lachesis, she can not bear any pressure over the uterine region. Secale, subinvolution. Belladonna, hot blood, hot leucorrhœa and hot skin. Macrotin, severe pain in the small of the back. The latter is often useful as a prophylactic against menstrual colic when given in the lower potencies a few days before the expected period.

Surgical treatment. Surgery plays a more important part in the treatment than is commonly practiced. Many grave consequences and sequela of these diseases are avoidable by early resort to surgical measures. It is more than useless to continue the administration of drugs in a case of chronic endometritis with dysmenorrhœa, resulting from stenosis of the os or unrepaired lacerated cervix. At best, we could only hope for temporary relief, while through dilation and repair of the cervix, supplemented by the indicated local or internal remedy, a permanent result may be hopefully expected.

When late in the disease catarrhal inflammations continue in spite of medical and local measures, the sharp curette will often give gratifying results.

If a history or a suspicion of chronic gonorrhœa exists, the curette becomes an indispensable remedy, contra-indicated only when the tubes or cellular tissues have been invaded. When the process continues and menorrhagia or metrorrhagia develops curettage may still prove a valuable adjunct to medicinal treatment, by removing the soft granular or polypoid mucus membrane. However, more radical surgical measures may become necessary. Ovariectomy may become imperative to check depleting and breaking down of more vital organs. I call to mind a case of chronic tubercular endometritis accompanied by metrorrhagia and hemoptisis so intense that at each menstruation the floodings and hemorrhages became so profuse that the patient's life was often despaired of. Local measures were without avail, the electrode ineffective, and the internal remedies without appreciation. In desperation, double ovariectomy was recommended, and performed, with the happy result of a complete, rapid and permanent cure of the endometritis and its consequent metrorrhagia and hemoptisis. All tubercular man-

ifestations, even to the disappearance of the tubercular bacillus; have been completely eradicated without any return after a lapse of four years.

Should, at any time during the course of chronic endometritis, symptoms of malignant degeneration of the cervix or body of the uterus arise, extirpation of that organ should be favorably considered. Every case of chronic endocervicitis or endometritis becomes an entity unto itself, and must be treated according to the necessities of the case and the best means available by both patient and physician.

New Windsor, Colorado.



WHAT PLACE HAS HOMEOPATHY IN THE TREATMENT OF TUBERCULOSIS.*

BY WALTER JOEL KING, M. D.

IN THE TREATMENT OF TUBERCULOSIS, there are many measures to be used. All are agreed upon the essential need of pure, fresh air and good food. Without these no consumptive can be cured. With these alone, some are certainly cured. Everyone admits the value of sunshine, sufficient sleep, good hygienic conditions, rest or moderate exercise depending upon the temperature, and every other auxiliary aid in husbanding the strength and increasing the vitality of the patient.

The Colorado Association for the Prevention and Control of Tuberculosis and the National Association for the Study and Prevention of Tuberculosis have been doing a very excellent work. The literature, exhibits and addresses prepared or given under their direction have been very helpful. April 24th was generally observed as Tuberculosis Sunday and physicians spoke in many churches on the prevention and control of tuberculosis. Enthusiastic public interest in the warfare on the great white plague has been fostered and many laymen are taking an active part in this great industrial and economic movement.

In its literature the Colorado Association states that tuberculosis can be prevented, that it can be controlled and, at least in the early stages, cured. All this is true. Chief reliance is placed by it on pure air, sunlight and good food.

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And we know that a proportion of consumptives are cured by observing these hygienic and dietetic measures. But little if anything is said about medicinal treatment. Old school literature holds out very little of aid in this direction. Of course, there are various "tonics" recommended by them, but their measures are largely auxiliary, stimulant or palliative. Possibly they should be credited with "tuberculin," though its use is not limited to any school. Tuberculinum is one of our nosodes and is an excellent remedy when administered in accordance with the homeopathic indications.

In contrast with this dearth of remedies of the irregular old-school what does homeopathy offer? Can we do any better than this? Yes, we surely can! This is not saying there is any specific for tuberculosis; neither is it saying that all that is needed is the indicated remedy. Fresh air, sunshine and proper food are essential; better have these and no medicine, rather than the best medicine on earth without these auxiliaries; but better far is the indicated remedy coupled with hygienic and dietetic measures.

Osler says: "No medicinal agents have any special or peculiar action upon tuberculous processes; whatever influence they exert is upon the general nutrition, increasing the physiological resistance and rendering the tissues less susceptible to invasion." The tubercle bacilli themselves are not very aggressive. "A pure tuberculosis infection is one of the most amenable to treatment of any of the infectious diseases." But when a secondary infection takes place with some of the so-called pus-forming organisms—most frequently the streptococcus pyogenes, the staphylococcus aureus and the micrococcus lanceolatus—the problem becomes very different. If given a fair opportunity, the general tendency of the tubercle is to heal, provided they are not too numerous. It is difference in the soil that explains the various degrees of virulence seen.

Prof. James R. Leaming, of New York, states that he believes that nine-tenths of all forms of phthisis commence with interpleural plastic exudation. I doubt not that every one of you have more than once cured, not palliated or simply temporarily relieved, this condition; we all know the value in cases of this nature of bryonia, kali carb., iodine and sulphur.

In night sweats agaricus, phosphoric acid or jaborandi will frequently be the indicated remedy.

For the diarrhœa often complicating or accompanying tuberculosis arsenicum, croton tiglium, china or ferrum phos. are frequently indicated.

Ipecac, millefolium, hamamelis, aconite, atropia and geranium are of great value in hemorrhage.

Among the remedies from which you are likely to find the ones indicated for your tuberculous patient are: stannum, lycopodium, iodine or one of the iodides, the kalis, the calcareas, sulphur, arsenic, silicia, thuja, argentum, nitricum, phosphorous, antimonium tartaricum and mercury. I believe the great results that have been claimed for mercury in phthisis, have been accomplished usually if not always, where syphillis was the primary or accompanying disease and that the improvement was due to the effect of the mercury upon the syphillis.

As homeopaths we always treat the patient, not his disease. All these remedies should be administered according to indications.

I am sure I have told none of you anything you have not known before. We all have had personal experience, numerous cases, in which we have been enabled to restore to health and active life those who had been attacked by tuberculosis. Each of us knows the homeopathic remedy selected and administered according to indications accomplishes results in tuberculosis as well as in every other time of need.

I believe we should inform the public that homeopathy has a very important place in the treatment and cure of phthisis. The State and National Associations for the study, prevention and control of tuberculosis should be kept reminded of this truth and its recognition secured in their literature if possible.

While the public is taking such an interest in this subject, would it not be worth while for this society to publish some statistics and a short statement of our results? These might be taken from the National Tuberculosis Sanitarium of the Modern Woodmen at Colorado Springs, which is under the medical directorship of Dr. John E. White, a member of this State Society. Compare his report with that of other similar institutions in the state or elsewhere. I am sure homeopathy would have no reason to be ashamed of its record.

While it has no reference to tuberculosis, would it not really be a good thing to issue some such statement and

statistics as suggested above, for general distribution among the laity, and include in this same leaflet figures on results with the insane, the feeble minded and the mental defective. This should help us in securing representation on the new State Home and Training School for Mental Defectives and control of the additional State insane asylum to be erected sooner or later. We might, if you thought wise, even include other diseases, such as those concerning which Dr. Strickler secured statistics a number of years ago for the American Institute. In all of these we could show the superiority of true Scientific Medicine, HOMEOPATHY.

Golden, Colorado.



***OBSTETRICS.**

BY G. PHILLIPS, M. D.

OBSTETRICS IS DEFINED as the art of conducting cases of child-birth. That branch of surgery which deals with pregnancy and labor. Every physician should be able to handle these cases successfully and do the right thing at the right time. If he is able to do this he will be a great blessing to humanity and a financial success. The man who handles a case of labor successfully will be the family physician in that home.

Labor is that process by which the child is expelled from the uterus. This may be greatly facilitated by the physician in many different ways, by artificial means or by internal remedies. While in medical college I have seen our professor delay the crisis until the students could get there and on the other hand have seen him hasten the time of delivery—all by internal, indicated remedies.

There are three stages of labor: first, is from the beginning of the pains until the complete dilation of the os; second, is from the complete dilation of the os to the delivery of the child; third, is from the delivery of the child to the establishment of lactation.

At the beginning of the first stage of labor the patient should be surrounded with everything aseptic, generally about the same as for an abdominal operation. If any difference we should be more careful because there is great danger of infection, which may greatly endanger the life of the patient.

*—Read before Colorado Homeopathic Society, September, 1910.

This infection may occur at any time from the time that labor begins until one week after delivery. No physician should handle a confinement case while attending infectious cases, such as scarlet fever, erysipelas, etc.

The patient's room should be light, sunny and well heated, as well as cleared of all unnecessary furniture. We should have rubber sheets, sterile towels, napkins, etc.

The bowels and bladder should be emptied at the beginning of the first stage of labor. The patient should urinate every four hours during labor and every six or eight hours after delivery. The vulva should be kept thoroughly clean.

At the beginning of the second stage of labor, the bed should be re-dressed and all necessary preparations made. As the child leaves the vagina the physician's hands should follow down the uterus and contract it by Crede's method. Lay the child on its right side and put it to the breast soon, as it will help to contract the uterus. Remove the placenta and examine it carefully and see if any pieces of it are left. Examine the os and perineum and if there are any tears sew them up immediately, generally one or two stitches are all that are necessary. Sew deep.

Always be exceedingly careful about infection which may be mild or severe, local or general. Infection frequently follows a laceration. If we let the head come slowly we may often prevent a tear. Ordinarily we should not cut the cord until it ceases to pulsate. Some recommend not to tie the cord at all. Generally all that is necessary for a dressing is boracic acid or sterile cotton.

As soon as the baby is born all the orifices of its body should be washed thoroughly with boracic acid, giving special attention to its eyes, in order to prevent ophthalmia neonatorum. In case this should develop we must take drastic measures at once, otherwise the child will be blind.

Keep the vagina (in case of infection) cleansed with a douches of one of the following: 2% solution of lysol, creasol or 1 dram carbolic acid to 1 quart of water, especially where there is bad odor or infection.

As soon as the baby is born, wash the mother's breasts with soap and water; and some recommend the application of an abdominal binder.

Wash the mother's breasts and child's mouth before and after nursing with boric acid solution; let the baby nurse every four hours until the milk comes; after that every two

hours during the day time and every four hours during the night.

Change the cloth and clean the vulva of the mother every time the bowels or kidneys move for three or four days after the birth of child. If perineal tears have been repaired tie the knees together for about nine days; watch the stitches and keep the parts clean. If the vulva becomes swollen use cloth wet in warm water one-half dram of carbolic acid to 1 quart of water, placing this cloth over the parts. .

Watch the breasts. If they become inflamed and sore keep bowels and kidneys acting freely, use English breast pump to keep the breast empty. Massage them, rubbing toward the nipples. The breasts should be given special attention two or three months before delivery. If the nipples should become cracked cleanse with boracic acid after each nursing, and then dust with subnitrate of bismuth. If breasts are swollen, hard, reddish; throbbing headache, belladonna will generally relieve the condition.

Forceps Operation.—I am satisfied that if we understand our materia medica and give the right remedy at the proper time, we would not have to use the forceps so often in delivering the child. Of course there are cases where there are deformed pelvices, exhaustion, face presentation, hemorrhage, prolapsed cord, etc., when the forceps must be used to save the life of the child, or the mother, or both. But I am satisfied they are used many times when they need not be if the indicated remedy was given at the proper time.

Hemorrhages.—There are various predisposing causes of puerperal hemorrhage, such as albumen in the urine, malarial poison, alcohol, high altitude or any circulatory disturbance. And I might say right in this connection that every woman should be under the care of the physician at least three or four months before delivery and that physician should examine the urine for albumen frequently. We also have exciting causes such as improper treatment during second and third stage of labor, too rapid emptying of the uterus, forceps, too rapid delivery after version, excessive use of chloroform, distended bladder and rectum and retention of placenta.

Treatment.—The uterus should be contracted by Crede's method; if this does not stop the hemorrhage place the hand over the os and press against it. Of course the foot of the bed should be raised. There is no reason why any physician

should let a woman die from puerperal hemorrhage. Remedies to be used in such cases are as follows: *If bright red blood, cold, gasp for breath, chilly, nausea—*ipecac; *blood mixed with clots, pain in back and comes to the front, blood spurts at each pain—*sabina; *ringing in the ears, drowsy and weak, twitching of muscles, limbs cold,—*china; *flabby uterus, protracted labor, painless dark flow—*ergot; *profuse flow, throbbing, bright red blood, full hard pulse—*bella-donna; *feel as if something were alive in the pelvis, dark stringy blood—*crocus; *blood thin and dark—*hammamelis; *pain extended down legs, dark blood, restless—*chammomilla.

After pains may be greatly relieved by the internal indicated remedy.



*KALI MUR.

BY J. W. CRAIG, M. D.

I HAVE FOUND KALI MUR a very valuable remedy indicated in later cases of colds, deafness, catarrhal conditions and glandular swellings.

The remedy is especially successful in ear troubles. I have used it with great success in my own practice and feel that the remedy is not used as largely as it should be by the general practitioner. Because of my finding it so valuable a remedy in my practice, and since I find that its value is not generally appreciated by the profession, I thought it well, in a brief paper, to present a few of the most prevalent diseases in which kali mur is indicated and symptoms manifested by clinical reports.

It is not my intention in writing a paper on this drug to exhaust the subject by an elaborate treatise, but simply to suggest its usefulness and advise the further provings of the remedy.

Nash speaks of this remedy as one of the so-called bi-chemic remedies, or one of the twelve tissue remedies, claimed by Schussler to be able to cure all ills that flesh is heir to.

It was Hahneman who discovered the importance of the inorganic cell salts as remedial agents of a high order. He began a thorough investigation into their pathogenetic effects and therapeutic uses. His provings of lime and salt and

*—Read before Colorado Homeopathic Society, September, 1910.

potash prepared the way for the rest of the tissue remedies, showing what vast store houses of medicinal force these inorganic substances are, although wholly inert in their crude state. It remained for Dr. Schussler to develop these suggestions.

Kali muriaticum, or common name, chloride of potash, may be prepared by neutralizing pure aqueous hydrochloric acid with pure potassium carbonate or hydrate. For homeopathic use, the pure chloride of potassium is prepared by trituration. We have no real provings of this drug but may reasonably assume from clinical reports and its chemical constituents, that it is homeopathic to condition given.

In Herring's guiding symptoms we find a long list of clinical symptoms: the chief characteristics is the white or gray coating at the base of the tongue and when found can usually be relied upon.

In the hands of the aurist we perhaps find its chief use. A great many cases of chronic, incurable deafness might have been cured with this remedy had it been used early.

It has been found very efficacious in deafness from inflammation and closure of the Eustachian tube. Dr. Copeland says when the Politzer bag fails to open the Eustachian tubes, after a few doses of kali mur, they may be inflated easily. I have used it with success for that purpose, and find it most useful in the second or later stages of inflammation and catarrhal conditions.

Deafness, due to swelling of the glands about the ears and throat or external ear, we find it beneficial. In colds, after ferrum phos., in the second stage, the phlegm is white and thick with whitish grey coating of the tongue. The vault of the pharynx is covered with adherent crusts. Dry coryza or a stuffy cold under the throat.

Schussler says the sole remedy in most cases of diphtheria, alternated with ferrum phos. and gargle with same.

Mumps, with great swelling of the parotid gland with pain on swallowing, this remedy alone will cure most cases, unless there is fever.

Let me illustrate from my cases: A young boy came to me who for several months had found it very difficult to hear. It was necessary to speak very loud and distinctly to make him hear at all, and then he often failed to hear until the sentence had been repeated. After thoroughly examining the boy it seemed that kali mur. was the indicated remedy.

He was placed under this treatment and in two weeks' time his hearing was completely restored. Four years have now passed with no return of the trouble.

A man, perhaps 60 years of age, whose ears had been completely impacted with cerumen, after removal of cerumen inflation seemed impossible. He was placed under the treatment with kali mur. and in one week the tubes easily opened and hearing was restored.

In chronic deafness, after years' standing, little results are obtained, although often slight improvement, after persistent use, is noticed. However, I have quite often failed to gain any results in treating chronic cases of long standing with this remedy. But in recent cases, one can always hope for improvement, if resulting from a catarrhal condition.

Ault, Colorado.



*THE MANAGEMENT OF PREGNANCY.

By J. W. MASTIN, M. D.

IN SELECTING THE FOREGOING as a suitable subject to present at this time, I was fully aware of its lack of possibilities to provide anything either new or startling; that it has to do with the securing of healthy offspring, through maintenance of the mother in a state of health during pregnancy, should be sufficient apology, however—if any is asked—to those interested in this line of work.

From the very beginning of pregnancy the prospective mother should place herself under the care of some capable man or woman, homeopath preferred, in order that any deviation from normal conditions may receive early recognition and immediate attention; this precaution, if made routine practice, would forestall many distressing complications; make actual labor less laborious for the mother, besides bettering after-conditions to such an extent as would relieve both doctor and nurse of much worry and still more work.

Much has been written concerning the routine hygiene of pregnancy; a great deal more of the so-called "common sense" of old women advocated and a whole lot of this brand of wisdom possessing practical value overlooked; yet there still remains room at the top for those who are disposed to

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work for the best interests of those demanding their advice and assistance prior to the birth of the baby.

Educational energies, if devoted to enlightenment of the prospective parturient patients, to care of the breasts and care of the teeth; to the benefits to be secured from baths, both body and sitz; to the securing of the most comfortable and healthful way of wearing the garments; to giving directions as to diet and exercise; information regarding the results of environment, mental tranquility and sexual seclusion, and finally to the insistence on the part of the physician upon frequent examinations that he may keep in touch with conditions, and it may be said that the child-bearing woman has embarked upon the journey which she confidently hopes will terminate in so much joy to herself, well prepared for the duties which await her.

The care of the breasts has become almost routine and I do not propose to take up your time in telling what should be done regarding them. There is one thing however that should not be overlooked and that is to caution against the wearing of clothing which constrict the nipples. This bit of carelessness is most prolific of functional failures in these organs. While the clothing should be loose over all parts of the body, this applies particularly to the breasts and more especially to the nipples themselves.

"For every tot forego a tooth," is an old saying vastly more poetic than prophetic, inasmuch as it is not true that for every child born to her a woman loses a tooth; but there is no doubt that the teeth of pregnant women are more apt to decay during that period than at any other time of her life.

The reason given for this is "that the requirements of nutrition for the mother and child are not fully met as to bone-forming material, and nature gives to the child at the expense of the mother."

There is no doubt but that systematic care of the teeth during this period should form a part of the program of pregnancy, as a decayed tooth might hinder proper performance of digestion and assimilation, besides, should any considerable pain accompany the condition, might bring about a nervous exhaustion that would prove serious to both mother and child. While, as many of not only the laity but profession as well insist that no dental work should be done during the period of pregnancy, there appears no contra-indication to work of this kind if the same be considered neces-

sary. Close observation however convinces me that most of the fault is due to either a constitutional or conditional dyscrasia, which may be overcome, almost invariably, by application of the indicated homeopathic remedy.

The benefits to be derived from full body and sitz baths during pregnancy, depend largely upon the habits and tolerance of the individuals thereto during normal conditions. There is no time however when absolute cleanliness is more to be desired than at the lying-in period, and many physicians will bear truthful and almost tearful testimony regarding events in their obstetrical career, which might have left a pleasanter recollection had even the ordinary precautions of toilet preparation been observed.

As this paper is not supposed to deal with eleventh-hour details however, I will say that as pregnancy progresses, more especially during the last few weeks of its duration, the functional activity of the skin becomes an important and almost imperative factor in the elimination of the waste products of the body, consequently a very hot bath, sufficient to produce profuse perspiration, is quite often beneficial, and is in many instances indicated. Sitz baths, if more modern conveniences are lacking, taken in an ordinary tub during the last two months of pregnancy—especially where there is much soreness of the muscles, are highly recommended by a recent writer of one of the most practical works I have ever read upon this subject; besides they are credited with making labor less difficult.

There is no particular objection to the vaginal douche at any time during pregnancy, provided the water used at the time is not too hot. Eliminate the so-called antiseptic tablets, and if taken in an upright posture, the vulva should be compressed in order that the vaginal mucus membrane may be dilated and thoroughly cleansed.

Sexual seclusion should be the rule, broken only by the desires of the woman.

Exercise should be moderate and never to the point of fatigue, but persistent exercise, such as walking, should be advocated and should be indulged in up to the very last hours preceding the birth of the child. Scrubbing floors and other domestic duties should not be omitted on account of the condition, in fact, at some institutions it is the rule to insist upon this sort of work for pregnant patients, inasmuch as it has been found highly beneficial—giving tone and strength to the

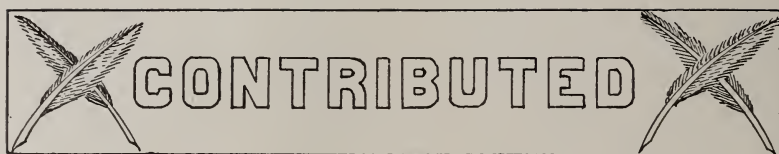
large abdominal muscles and adding to the expulsive efforts of the woman, making labor of shorter duration and the efforts of the prospective mother more satisfactory.

The question of diet admits of too much difference of opinion to be discussed in this paper. It is never out-of-place however to suggest moderation at meals; more particularly so where the patient is not disposed to or is in a position which prevents a proportionate amount of exercise.

While I have not touched upon all points introduced under the head of education of the patient, I wish to call attention particularly to the absolute necessity of mental tranquility for the pregnant woman. Most young women approach the period of parturition with fear and trembling, made more apprehensive in many cases by the overzealousness of "sympathizing sisters" bent upon relating instances, the horrifying features of which are uppermost; none of the horror being omitted in the telling, even if the imagination has to be drawn upon for sufficient local coloring.

To avoid as far as possible the interference of meddling Matties in matters of this kind, the physician should be the only one permitted the privilege of giving the prospective mother "pointers" regarding the forthcoming event. The days of many young women have been made hideous by the apparent delight of older women in portraying the lying-in period as one through which no woman can pass without undergoing the most excruciating mental and physical torture. All such visitors should be denied admittance to the house, but if one should accidentally gain access and persist in picturing the expected event in lurid colors, she should be immediately removed from the scene of her pernicious activity, even at the expense of losing her more or less valuable friendship—less in the majority of cases however.

Dr. Henry D. Bishop, of Cleveland, Ohio, in a recent work upon "Motherhood," and one which should be in the hands of every prospective mother in the land has the following to say upon "Mental Conditions and Environment:" "A pregnant woman needs encouragement and hopeful suggestions. She should cultivate a spirit of optimism, for in no condition of life is the effect of the mind upon the body so marked. The mental condition has much to do with the development, both of the child's body and the delicate and complex organization of the mind."



THE SHOE IS PINCHING.

ONE OF ITS ISSUES for May of this year the *Journal of the American Medical Association* in an editorial under the caption "A New Combination Against the American Medical Association," plainly admits what everyone knew already, namely, that that association is the author of and behind the Owens bill in Congress proposing to create a National Health Department at Washington.

There is nothing particularly startling about this, for we all know the general disposition of the managers of the American Medical Association to consider that body the concentration of all the wisdom of the medical profession and that no matter what it essays to do it can do no wrong. Nevertheless, it is something for the official association to bluntly admit, by its editorial caption as well as by the general trend of the article, that it looks upon the "National League of Medical Freedom," which is the most active contesting body against the proposed enactment, as also against the officious efforts of the American Medical Association, as an outspoken foe; and in so admitting accepts the onus of being the author of the obnoxious measure.

For it is a greedy, grasping, ill-timed proposal. There is about as much need in these United States for a National religion as for a National medicine. True, the proposal is under the guise of a "Department of Health," but we have had so many examples of how quickly abuses follow these "Health" propositions and laws that the profession is becoming a wee bit chary and wants in so important a matter as this to know just what is proposed, how far the measure is likely to be carried; whether it is in honest and generous hands, etc. And from the experiences of the past all peoples engaged in medical practice not wholly in harmony with the charmed circle are fully justified in holding their breath and taking all the time that is necessary before pitching headlong into the attractive pit which the American Medical Association has prepared for them. Notwithstanding the fact that there are many thousands of high-minded and honorable men

and woman in that body, its politics are so rotten and its greed so unlimited that the American Medical Association and all its public acts will bear the closest scrutiny; so, if for no other reason than this, a National League of Medical Freedom has justification for its existence.

But what about this League? Who can tell us of its personel and general desirability. The writer attended one meeting of a branch of this body in Denver and heard a loud mouthed blatant demagogue of a blatherskite practically pronounce the medical profession a band of murderers. He doubtless meant to limit his indictment to a certain type of drugologists, but his remarks were so sweeping that no self-respecting physician would wish, if it could be avoided and the purposes be effected the while, to belong to the same association with him and his kind. Three-fourths of the deaths of Denver were by this blatherskite attributed to the medical profession of that city. A mild rebuke by the writer—if anyone can imagine a rebuke from him being of a gentile character—brought a good number of favorable responses, even from those in charge of organizing meeting. But, on the whole, I cannot say that I was very favorably impressed with that particular start-off of the League's work. It must, of necessity, be of the well-tempered kind to be effective.

I rather enjoy an association with the people of the New Thought, the Emmanuel Movement, the Christian Science devotees, the well meaning and oftentimes accomplished and successful osteopaths, and see no good reason why the "medical profession" should longer be considered as being composed only of the allopathic, the homeopathic and the eclectic professions. Many men are of many minds, and what is one man's food is necessarily and in history another's poison. Of all folks we homeopaths, who for a century or more were made to "Pass under the Rod," can afford to be and should be high-minded, liberal, generous even to a fault in this matter of medical sectarianism and new doctrines. Nothing in medicine is absolutely settled yet, not even the doctrine of bacteriology and its relation to cause and effects in disease and treatment. Jenner was long derided by the regular profession, whereas now his doctrine is swallowed with a gulp and it begins to look as if the whole science of treatment is soon to be based upon the idea of vaccines. We who still doubt the efficacy and desirability of Jenner's practice, much more its

necessity, are now almost as unholy as was Jenner in the eyes of the "regular" profession less than a century ago.

And so it goes. Nothing is settled in medicine, nothing ever can be or ever will be. It may be termed a Speculative Science. In the very nature of its work it is fanciful to conceive that it can ever become exact; its subjects are too abstruse; its work is along the line of inductive methods and processes of reasoning rather than along the line of exact facts; therefore there exists a necessity for the greatest degree of tolerance and medical freedom conceivable, and the American Medical Association, in this country, is wholly to blame for the necessity of the creation of such a body as the "National League." Its existence is in itself an indictment against the American Medical Association's greed and intolerance. Cut these out, proceed upon the "live and let live" principle, awaken from the slumber of a fancied security that you possess a complete knowledge of everything and all things essential, desirable and permissible in dealing with sick folks, and there will be small need for the organizing of any "New Combination against the American Medical Association," now, henceforth, or forever.

Only the narrow-mindedness and intolerance of the profession for which it stands made the organization of Homeopathy necessary or desirable. It should this very moment be operating strictly and acceptedly within the field of general medicine, and would be, quickly enough, if the old school were broadminded, open to all substantial and provable facts in medicine, and not intoxicated with its own conceit and arrogance. Likewise as to Osteopathy, Eclecticism, Christian Science and the rest. All of them will say, and their word is good before the counts of the land, that but for the old school itself there would be neither sect, party nor division. Tear down the Chinese wall of arrogance and narrow-mindedness and there can easily be established one great, broad, brotherly "Medical Profession."

As for the League, it has hardly been started upon the plane to command the respect and co-operation of those within the various branches of the profession whose help is desirable and may be needed for the accomplishment of its purposes. Call off the hounds; appeal to reason and a common brotherhood; especially cease obnoxious and senseless attacks upon doctors because they are doctors; don't shoot at an eagle, mistaking him for a buzzard. Get right, and go ahead. Such

a League, properly manned and conducted, can harm no good measure, but many a bad measure can be successfully carried through by schemers and selfish politicians in medicine if opposed only in the spirit shown by the National League of Medical Freedom in its early work.

Be careful that the same shoe that now pinches the American Medical Association does not tightly bind your own pedal digits.

C. E. FISHER.

October 20th, 1910.



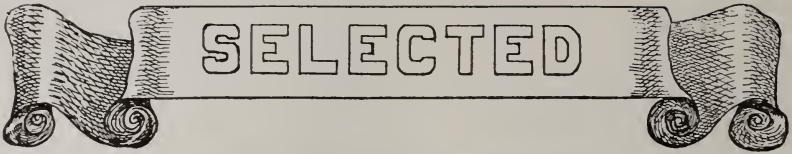
BROMIUM, 1X-2X.—WHOOPIING COUGH.—It appears that few, if any, physicians recognize the extraordinary value of this remedy in the treatment of this intractable affection. This fact appears the more singular, as its pathogenesis manifestly indicates its use in spasmodic affections of the bronchial portion of the respiratory tract. This is probably due, in a large measure, to the worthlessness of the remedy in stock because of its instability and tendency to rapid deterioration. The reliability of the drug must be insisted upon absolutely if its use is not to prove disappointing. Have it fresh and properly prepared and in the lower dilution, the 1X and 2X being found most effective by me.

The indiscriminate use of the remedy necessarily means some failures, but the dearth of characteristic indications or symptoms in the early stages of the disease has led me to an almost routine use of the remedy as soon as I am fairly sure of my diagnosis.

The only special indications that can be given you are, the aggravation late in the day and early part of the night, and also from the warm air of poorly ventilated room.

In association with bromine, belladonna and ipecac, are valuable inter-currents; belladonna for dry cough with the appearance of fever and ipecac, where there are excessive quantities of mucus with a tendency to vomit—both conditions are from bronchial inflammation resulting from taking cold.

An effective way to administer the remedy is to add 2 to 3 drachms of the 1X and 2X dilutions to 6 oz. of simple syrup—giving a teaspoonful from one to two hours.—*The Clinique.*



HOW I TEACH HOMEOPATHY.

DR. WASSILY, OF KIEL, has this to say of his scheme favorable for those having in contemplation the study of homeopathy, declaring at the same time that there are no specifics in homeopathic treatment. "We do not treat the name of the disease, but the patient with his individuality, and we accomplish this by the aid of remedies covering the totality of both, objective and subjective symptoms, and this explains why a given remedy can cure in one subject pleurisy and in another diarrhoea or acute rheumatism." "Equally important is a profound knowledge of materia medica, obtained from books and clinical observation, without considering pathological anatomy the point of departure necessary for intervention."

"A single remedy should be given at a time, and according to the continued, or interrupted effects, followed by a suitable complementary, taking always into consideration the epidemic genius and the generality of symptoms, as well as of the etiological causes."

Therefore a cold due to a dry wind, demands *Aconite*, or *Nux vom.*; due to dampness or water, *Rhus. tox.*, or *Calc. carb.*; a fall or shock indicates *Arnica*; the loss of fluids, *China*; fear or fright, calls for *Opium*; terror with anger, for *Aconite*; a fit of passion, for *Nux vom.*; sadness and grief, for *Ignatia* or *Phos acid*; irritable state, for *Staphysagria*; jealousy, for *Hyoscyamus* or *Lachesis*; spleen, for *Capsicum*; sudden joy, *Coffea*; after great physical efforts, *Arsenicum*; articular fatigue, *Rhus tox.*; mental exertion or night watch, *Nux vom.*; sexual abuse, *Phos. acid*, or *Conium*.

We know the types of chronic diseases for *Sulph.*, *Lachesis*, *Phosphorus* and *Arsenicum*. He insists about the action of remedies in different regions and in the different periods of the day and year, and gives us a condensed pathogenesis of our leading remedies:

ACONITUM.

1. Acts principally on the arterial system.
2. Indicated at the onset of all fevers of sthenic type, with heat, dryness of the skin, and chills.
3. Pulse and heart-beating, full and hard.
4. Restlessness and anguish.

5. Violent thirst for cold drinks.
6. Difficult emission of urine.
7. Numbness and tingling in the left arm, in diseases of the heart.
8. Aggravation in the evening and at night.
9. After colds from dry, chilly winds, or the ill effects of anger with anguish and fright.
10. For vigorous, full-blooded individuals.

ARSENICUM.

1. Acts chiefly on the respiratory organs, the nervous system; the skin, and the mucous membranes with tendency to exfoliation.
2. Burning pains everywhere.
3. Great anguish and agitation.
4. Extreme thirst, craving for small quantities of water at frequent intervals.
5. Rapid sinking of the forces.
6. Periodicity of the symptoms.
7. Ill effects of animal substances, especially morbid in the lungs and blood. (*Belladonna*.)
8. Weakness and prostration after the least exertion.
9. Malignity of the symptoms.
10. Asthma, anguish coming from the heart.
11. Pains of cancer.
12. Need of having the head raised in bed.
13. Aggravation after midnight, and from cold, especially while at rest, on commencing to sleep, and in a closed place.
14. Amelioration by dry external heat.

BELLADONNA.

1. Chiefly affects the venous system, hence the remedy for passive inflammations.
2. It is a remedy for the head and for spasms.
3. Blood congestion with redness, erysipelas and heat. Apoplexy.
4. Dilated pupils, photophobia, violent injection of eyes.
5. Painful points sensitive to least pressure; a strong pressure is tolerated.
6. Dryness of the throat.
7. Scarlet fever.
8. Enuresis of children.
9. Acts principally on the right side.
10. Pains appear and disappear suddenly.
11. Aggravation from 3 to 4 in the morning, during full moon, by deglutition, in a current of air.
12. Suits obese individuals with black hair.

BRYONIA.

1. Acts upon the serous membrans, the liver and the respiratory system. It is an articular remedy.
2. Lancinating pains.
3. Aggravation by motion, by lying on painless parts.
4. Extreme thirst, takes large draughts every time he drinks.
5. Dry cough, worse from deep inspiration and after suppressed eruptions.
6. Inflammatory swelling of the joints, or rather pale tissues.
7. Sleeps lying on the back.
8. Desires beer.
9. Uneasiness, headache, diarrhœa during hot weather.
10. Amelioration from damp, cloudy weather.

CALCAREA CARB.

1. Rachitis and leucophlegmatic patients with light hair.
2. All bone diseases and gouty constitution.
3. Polypoid growths.
4. Abundant perspiration on the head.
5. Abdominal distention.
6. Pains principally like cramps.
7. Anticipated and profuse menstruation.
8. Painless adenitis.
9. Dermatoses worse from cold washing.
10. General aggravation from dampness, while fasting and on raising the limbs.
11. Complementary to Belladonna.

CANTHARIDES.

1. Acts especially on the urinary tract and all its diseases, with the greatest degree of irritation.
2. Burning pains.
3. Amelioration from heat and rest.
4. Aggravation from walking out of doors, and the absorption of cold water.

CARBO VEGETABILIS.

1. Special action on the stomach and bowels.
2. Exhaustion, debility and depression of the pulse.
3. Burning pains, especially in ulcers.
4. Flatulence, gastric dilatation.
5. Bad taste in the mouth.
6. Putrid, hot and moist gases.
7. Hæmorrhoids, with constipation, exterior bleeding, tumors, after stool.
8. Supports badly fatty food.
9. Ill effects from spoiled vegetables.
10. Desires salty food.
11. Hoarseness, especially from dampness and night air; moist rales.
12. Whooping cough, at the onset and at the end.
13. Dislikes motion.
14. Useful remedy for the aged.

CHINA.

1. General debility after the loss of fluids.
2. Intermittence of diseases.
3. Pains in the spleen. Biliary calculi.
4. Meteorism.
5. Craves dainties.
6. Complementary of Ferrum.

COLOCYNTHIS.

1. Acts especially on the intestines and indicated in neuralgia.
2. Violent colics and contractions.
3. Intestinal cramps from anger.
4. A pressive, sneezing headache in the sinciput, worse while stooping or lying on the back.
5. Phosopalgia or facial pains as well as affected hip.
6. Predominance of nervous symptoms in inflammation.
7. Painful contractions of the face.
8. Amelioration from motion, heat of bed, and coffee.

HEPAR SULPH. CALC.

1. Adapted to scrofulous, lymphatic subjects, predisposed to moist eruptions.
2. Ulcers and suppurations of all kinds.
3. Susceptible to unhealthy skin.
4. Mercurialism.
5. Specks and suppuration of the cornea, worse from cold applications.
6. Dark complected individuals with moist cough.
7. Persistent hoarseness.
8. Sensibility to touch and to cold air.
9. Insensibility in chronic diseases, and sometimes great sensibility.
10. Aggravation from dry weather; cold bearing on a particular point, and in the interior of the cranium.
11. Complementary to *Calc. carb.* and *Belladonna*.

KALI CARBONICUM.

1. Acts upon the blood, heart and mucous membranes.
2. Great debility and pain in the sacrum.
3. Dryness of the throat without particular thirst.
4. Dilatation of the inferior palpebral bag (?).
5. Stitching pains.
6. Hard, very variable pulse.
7. Difficult first menses or superabundant with bright blood.
8. Hæmorrhoids, especially with kidney trouble.
9. Most all pains reappear between two and four a. m.
10. Complements: *Phosphorus* and *Carbo veg.*

LYCOPODIUM.

1. Acts particularly on the bladder, and the digestive and respiratory organs.
2. Troublesome production of flatus, inodorous.
3. Red sand sediment in the urine, and uric acid.
4. Pulmonary pains with moist rales and fan-like motion of the *alæ nasi*.
5. One foot cold, the other warm.
6. Sensibility to open air, and to cold.
7. Vascular tumors.
8. Pulse, accelerated after meals, and in the evening.
9. Pains travel from right to left.
10. All maladies are worse from 4 to 8 p. m., and from satiety.
11. Amelioration from eructations, and in bed.
12. Complementary of *Lachesis*.

MERCURIUS SOL.

1. Principal remedy for diseases of the genital organs; and for jaundice.
4. Otagia (otorrhœa), with secretion of bloody pus and weakness of hearing; inflammation of the auditory canal, with formation of abscess.
5. Abscesses and ulcers of the mouth, tongue and gums.
6. Sore throat, with inflamed tonsils, circumscribed redness and profuse salivation.
7. Painful stools with slimy secretion.
8. Ineffectual urging to stool.
9. Superficial ulcers.
10. Sensibility to cold air.
11. Aggravation at night, from heat of bed, on opening the mouth. Cold increases all pains.
12. Longing for bread and butter.



EDITORIAL SECTION



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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

THE TWO HUNDRED AND SIXTY-SEVENTH session of the Denver Homeopathic club was held at the Chateau Lafayette, Saturday evening, October 8th, Dr. J. W. Mastin presiding. The committee on entertainment of the American Institute visitors last July, presented its report which showed all bills paid.

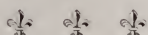


E. B. SWERDFEGER, M. D.
Pres. Denver Homeopathic Club

The report was accepted and the committee discharged. Notwithstanding the small attendance, those present enjoyed the spread and participated in the discussion of several subjects, all of which referred to the promotion of Homeopathy and the welfare of the profession in Denver. It was unanimously understood that if the Club was to continue there would of necessity have to be a more general attendance and it

was decided that the incoming president prepare a general letter setting forth the purposes of the Club and endeavor

thereby to induce all old members and as many new ones as could be secured, to take part hereafter in the proceedings with a view of making the meetings more interesting and instructive. It was, furthermore, decided to take up the subject of vaccination at the meeting this month. This will give the advocates of internal vaccination an opportunity to present their side of the case and it is hoped if compulsory measures of this kind are adopted by the health authorities, that homeopathic adherents will be permitted their choice between the former and the old method by sacrifice. The following is a copy of the letter issued by the executive committee and shows these officers are interested in the future welfare of the Club and it is hoped their efforts may prove productive of much good, many new members and an increased attendance at the meetings.



COMMITTEE APPOINTMENTS FOR A. I. H.

After a somewhat protracted period the committee appointments for the forthcoming meeting of the American Institute of Homeopathy has been published. This friendly office was performed by the Journal of the Institute, but, so far as we know, no other journals have, up to the present time, been supplied with this copy.

There is nothing particularly startling about the appointments unless it be the almost entire absence of Colorado names. Inasmuch as Colorado was represented by Drs. Brown and Swerdfeger at the Pasadena meeting common courtesy at least would be sufficient reason for seeing their names mentioned in the list of those honored by the newly elected president.

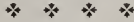
The success of the meeting depends very much upon comitteemen, and while Colorado may not have received its just recognition there is no question but what those appointed will use their very best efforts to make the Narragansett meeting as near on a par with the Pasadena session as possible. If they do this it is a pleasant reflection to imagine that they will have to "go some.."

MISCELLANEOUS

Mrs. Ada C. Mastin, Chicago, was a visitor at the editorial bungalow the fore part of last month.



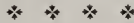
Dr. A. F. Swan is now located at Colorado Springs and is in the employ of the Internal Revenue department of the government.



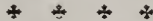
The Shannon (Ill.) Express man says: "Now, on the square, wouldn't a man make an awkward angel?" In a hobble skirt, yes.



Dr. Ella Griffith takes great delight with her 1,000-dollar riding mare. Dr. Griffith makes a fine appearance and her mount is a beauty.



The business manager was called out of the city the 17th of last month. Much bear and other large game busted before he returns.



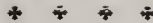
The Denver Homeopathic Club held a meeting at the Chateau Lafayette, the 8th of last month, which, by the way, was not very largely attended.



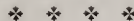
Dr. Will T. Swan, of Colorado Springs, was elected president of the State Medical Society, at its annual meeting in Colorado Springs the forepart of last month.



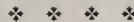
The F. C. Shaw Drug Company has moved its store from opposite the Brown Palace Hotel, to the new Metropolitan Building, corner of Sixteenth and Court Place.



Dr. J. W. Mastin will remove from 1312 Stout street to apartment 6, "The Florence," 1641 Washington street, the 1st of November. His residence telephone after that date will be York 6450.



Dr. E. B. Swerdfeger was elected president of the Denver Homeopathic Club, at the October meeting. The election of secretary and treasurer was deferred until more definite plans could be made.

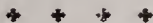


The commission of scientists to which John D. Rockefeller gave one million dollars to find a cure for the hook-worm disease, report they have found it, and, marvel of marvels, the remedy is k-e-r-o-s-e-n-e. If that man J. D. were to fall in the river he wouldn't get wet!



Dr. F. C. Strong's name was mentioned as a possible candidate for coroner on the "Independent" ticket. The Citizen's-Platform Democrat-Insurgent Republicans made a mistake when they failed to nominate Dr. C. M. Worth for that position. Worth was knifed because he was a homeopath, which should be a warning to all homeopaths not to monkey

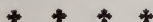
with the political buzz saw, and is a further evidence of how dearly our friends, the old-school enemy, love us.



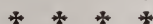
Dr. Benjamin F. Bailey, Lincoln, Neb., was a caller at the editorial offices of THE CRITIQUE the latter part of September. He was flirting with a full fledged case of hay fever while here, and was in hopes of losing the pestiferous plague somewhere in the west, to which point he was headed.



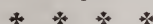
Flexner in one breath condemns homeopathy as being non-scientific and with the next exhaust recommends it be put in the "melting pot" and used as a contribution to scientific (?) medicine. If this mixture of his is expected to be as palatable as his reasoning is logical, you may excuse us, please.



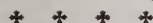
The next meeting of the Southern Homeopathic Society will be held in Jacksonville, Fla., December 6th, 7th, and 8th, 1910. The "Southern" is fast becoming a most flourishing organization, the sessions thereof being largely attended by prominent and progressive members of the profession from all quarters of the country. Dr. Jno. T. Crebbin is the secretary; write him at New Orleans and get full particulars.



And now cometh the health officer and insists upon pretty general vaccination of Denver's school children. Just bear in mind that in Iowa the homeopaths made just such compulsory imposition impossible. If any vaccination, insist upon the "internal" brand and thus avoid many of the distressing complications so prevalent under the old practice.



Dr. J. W. Craig, Ault, Colo., was a welcome caller at THE CRITIQUE headquarters the 12th of last month. Besides bringing a type-written copy of his most excellent paper read at the State Society meeting, we were pleased to learn that on October 3d. a fine 103-4 pound son and heir arrived at the Craig home and that all concerned were doing nicely. THE CRITIQUE extends congratulations to mother and son, but will await developments before saying anything that will make "father" any happier than circumstances would warrant.



At the annual session of the Southern California Homeopathic Medical society, which held its meeting in Los Angeles the 12th and 13th of last month, resolutions were passed heartily commending the campaign of the National League for Medical Freedom, in opposition to the scheme to create a medical trust and arm it with federal power. The following resolution, was unanimously adopted: "*Resolved*, That the Southern California Homeopathic Medical society in its twentieth annual session, Oct. 12 and 13, 1910, and representing over 200 registered physicians, is not opposed to just and equitable laws to regulate food and drug products, or necessary sanitation, but it is unalterably opposed to federal or state compulsory laws, except such legislation be so prepared and passed as to preserve the absolute liberty and independence of the physician and citizen, also the legally established college and hospital to teach, use or employ the system of treatment most consistent with their choice and belief, the same as kindred individual rights and privileges of all citizens are now guaranteed with respect to politics and religion; and also, to recognize the eligibility of equally efficient physicians and surgeons, though not identified with the aopathic school, to federal and state appointments where the services of the profession are required."

CHICAGO LETTER.

Dr. Robert Moth, Hahn. '05, has located in Council Bluffs, Iowa.

Dr. P. M. Cliver has recently parted company with his appendix.

Dr. C. A. Washburn, Hahn. '08, is the proud father of a big baby boy.

Dr. E. S. Bailey has just returned from an extended trip in the East and South.

Dr. J. G. Maxon, Hahn. '10, has located at Harvard, Ill., and reports a good beginning.

Query—What is the reason that Miller Coombs, Hahn. '12, goes to Valparaiso, Ind., so often?

Dr. A. S. Byle, Hering '09, has located at the corner of West Harrison St. and Kedzie Ave., Chicago.

The Southwestern Homeopathic Medical College, of Louisville, Ky., has consolidated with the Hahnemann Medical College of Chicago.

The students of Hering Medical College have organized a Debating Society and look forward to many pleasant times the coming winter.

Dr. G. A. Almfelt, Hahn. '05, has changed his residence to 5333 North Clark St., Chicago. Down town office in the Hayworth Building.

Dr. B. Thurber Guild, Hahn. '08, was a recent visitor in Chicago while on his honeymoon trip. The doctor is practicing in Shelburne Falls, Mass.

The 19th annual opening exercises of Hering Medical College were held Tuesday evening, Sept. 27th. Addresses were made by Drs. J. T. Kent, J. R. Boynton, E. A. Taylor and E. E. Vaughn.

The opening exercises of Hahnemann Medical College were held Tuesday evening, Sept. 27th. Addresses were made by Drs. Chislett and Wieland. The college laboratories have been enlarged during the past summer.

The October meeting of the Englewood Homeopathic Society was held on the 11th at the home of Dr. L. F. Ingersoll. A good attendance was present to hear a paper by Dr. J. W. Hingston, "Shall we Vaccinate our Children?"

The first meeting of the Regular Chicago Homeopathic Medical Society was held Oct. 4th. Papers, "Clinical Experiences in Homeopathy" by Dr. A. H. Grimmerl and "Homeopathic Principles and Law" by Dr. J. A. Kirkpatrick, were presented and discussed. A good attendance was present.

Chicago, Illinois, October 17th, 1910.



THE DENVER HOMEOPATHIC CLUB.

DEAR DOCTOR:

Owing to the increased apathy of the members of the Denver Homeopathic Club, as marked by the decreasing attendance at the past few club meetings, the undersigned executive committee has been instructed

to endeavor to learn why this state of affairs exists, and to solicit an expression from you as how best to remedy it.

Several plans have been suggested, among them (1) to meet on some night other than Saturday, (2) to hold the meetings semi-monthly, (3) to hold the meetings bi-monthly, (4) to eliminate the supper and to make the program purely scientific, meeting at some central point, as for example the "Brown."

Do any of the above plans meet with your approval? If not, have you some feasible plan of your own?

Has any feature of the conduct of the Club met with your disapproval?

Do you believe in medical organization, and in the maintenance of an active Homeopathic Club for the physicians of Denver and vicinity?

If there is no more interest shown than has been evident during the past year the present organization will be forced to discontinue. Should this happen it will not be because Homeopathy is on the decline. On the contrary, Homeopathy is in the ascendancy, and by active co-operation it will take its proper place in the medical affairs of this community.

On Wednesday evening, November 9th, a grand Homeopathic rally will be held at a place to be announced subsequently. You are earnestly urged to come, prepared to present your ideas along the above lines, and also to take part in the discussion of a paper to be presented on "Is Internal Vaccination Efficient?", a subject actively before us at the present time.

Fraternally yours,

E. B. SWERDFEGER,
J. B. BROWN,
C. D. FISHER.



SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION.

We again wish to call your attention to the next Session of the "Southern," which will be held in Jacksonville, Fla., December 6th, 7th and 8th, 1910.

The officers and bureau chairman are making an earnest and determined effort to make this the most profitable meeting ever held, and, with this object in view, it is essential that you should contribute papers and take part in the discussions, and above all, that you should be present. You will greatly assist the officers if you will let the secretary know if you will attend.

If you are not already a member, fill out the application previously enclosed and return same. The dues are only two dollars. If this application has been mislaid, we will be pleased to forward another.

If you have not paid, please send dues to the Treasurer, Dr. W. L. McCreary, 421 Clinch Avenue West, Knoxville, Tenn.

All information regarding hotel arrangements and transportation will be found in the program which will be sent out in advance of the meeting. Any one desiring the above before, may obtain same from chairman, Dr. H. R. Stout, Jacksonville, Fla.

Again urging attendance, we beg to remain,

Fraternally yours,

JNO. T. CREBBIN, Secretary.

READING NOTICES

AN UNEXCELLED COMBINATION. Two parts of Dioviburnia to one part of Neurosine is par excellent in Hysteria, Eclampsia, Melancholia, Female Neurosis, Uterine Congestion, Ovarian Neuralgias, An Efficient Diuretic, Asthma Sexualis, Uterine Irritability, Lumbago, Migraine, Menopause, Menstrual Colic, Anemic Nervousness, Nervous Prostration, Reflex Cough, Delayed Catamenia, Non-Descriptive Cases, Subacute Rheumatism. Relieves all False Pains, Rheumatic, Sciatic Pains, Neurasthenia from Uterine Diseases.

* * * *

A PALATABLE COD LIVER OIL PREPARATION. By means of Cord. Ext. Ol. Morrhuæ Comp. (Hagee), the patient may enjoy the great advantages of cod liver oil and be relieved of its distressing features. The plain oil frequently gives rise to gastric distress. Cord. Ext. Ol. Morrhuæ Comp. (Hagee) does not, yet its therapeutic properties are just as potent as the plain oil when the latter is tolerated. Cord. Ext. Ol. Morrhuæ Comp. (Hagee) nourishes the tissues as does nothing else and may be relied upon in grippe, bronchitis, tuberculosis and all states demanding tissue reconstructives.

* * * *

POST-GRIPPAL ASTHENIA. Of all the acute infections to which human flesh is heir, none seems to be followed by such general prostration as La Grippe. As the Irishman aptly described it, it is "the disaise that keeps ye sick for a month after ye get well." The general devitalization that ensues after the subsidence of the acute symptoms appears to be entirely out of proportion to the severity of the original attack. It is therefore distinctly the part of clinical wisdom to inaugurate a vigorous reconstructive campaign as soon as the febrile movement subsides. Plenty of fresh air, an abundance of nutritious but easily digestible food, and regular doses of Pepto-Mangan (Gude) constitute a trio of therapeutic measures of marked benefit. If the heart action is unduly weak, or if the prostration is more than usually pronounced, an appropriate dose of strychnia added to the Pepto-Mangan is of considerable additional service.

* * * *

ONE COMMON LUNG BACILLUS. It is quite generally accepted that pulmonary tuberculosis is caused by a bacillus. Coughs, colds, lagrippe and bronchitis come and go, even if we cannot exhibit them as entities under the microscope. It would indeed be a fortunate thing if there were one common lung bacillus, the destruction of which would remove the cause of all respiratory affections. But under the present condition of things we can only meet indications, treat symptoms and trust to nature. In the treatment of throat and lung affections, one remedy of the materia medica stands out more prominently than all others. Codeine has the marked peculiarity of controlling coughs and relieving the irritated and inflamed lining of the respiratory tract without arresting secretion. Here it shows its value over morphine. It is not followed by constipation, creates no habit, nor is the mucous membrane of the throat and bronchial tubes made dry. To control the cough and quiet the irritation, at the beginning of an attack, often prevents most serious trouble. There is another remedy which must occur to the mind of every well posted physician as especially applicable to these conditions. The power of antikamnia to reduce fever and thus control inflammation makes it one of the best preventive and curative agents. The combination of two such clearly defined remedies for respiratory affections is most fortunate. They are prepared in the form of "Antikamnia and Codeine Tablets."



***BRONCHIAL AND LUNG DISEASES OF CHILDREN.**

By WADE A. JONES, M. D.

MR. PRESIDENT, MEMBERS AND FRIENDS OF THE COLORADO STATE HOMEOPATHIC SOCIETY: After consenting to present a paper and to act as chairman of this bureau, I began to cast about for a subject. Calling to mind my limited experience in treating the diseases of children and the cases that had been the most numerous and troublesome to me, I could think of none more abundant or perplexing than diseases of the respiratory system. It was my impression at the time that this was peculiarly true of our high altitude and dry atmosphere, but when I consulted such expert authority as Holt, I found that my small experience was multiplied and magnified many times in the observations of specialists. My appreciation of the importance of the subject was greatly increased when I saw the large amount of space devoted to the respiratory diseases of children; and even now when I have limited my subject to the respiratory diseases of the thorax, the subject is far too large to do it justice.

We are living in a day of specialism, and when one observes the vast amount of knowledge acquired, and the almost endless investigation made in some one organ or group of organs, we are convinced of the wisdom of proper specialization. The subject of bronchial and lung diseases of children is of every day importance to the general practitioner as well as to the specialist, for it is one of the ever present diseases that all are called upon to treat. The anatomical features of the chest of a child is an important thing to consider if we would better understand this class of cases. We find that the antero-posterior diameter of the chest is about the same as the lateral diameter, making the thorax more

*Read before Colorado Homeopathic Society, 1910.

nearly round in the child than in the adult. The chest walls are thinner and more elastic and the lungs are placed more posteriorly than in the adult chest; this latter fact is of prime importance when making an examination of the lungs and bronchi of children. The diaphragm is placed higher, decreasing the capacity, the trachea and bronchial tubes are relatively larger and the air vesicals are smaller and surrounded with a comparatively larger amount of interstitial tissue. These anatomical facts will indicate how easily the bronchial system of the child is affected and how much more marked and fatal in these young and undeveloped subjects. With these things in mind, let us briefly consider bronchitis: it is a very common condition in children, varying in form from a superficial inflammation of the trachea and large bronchi to an inflammation involving the deeper tissues and the smallest bronchi. Bronchitis is prone to attack poorly nourished and rachitic children, or those suffering from malnutrition due to some preceding acute disease or chronic ailment. In such children with lowered vitality, an acute attack of ordinary bronchitis is apt to be followed by an extension of the inflammation to the deeper tissues and smaller bronchi, furnishing a fine soil for dormant tuberculosis or the introduced bacilli. Bronchitis is not always a primary disease; in fact it is more often a secondary condition following some of the exanthematous diseases, whooping cough, influenza or diphtheria. In the acute primary cases, it is often a mild, self-limiting disease. The mucous accumulating in the tubes of infants and very young children often causes vomiting and may produce serious and even fatal suffocation.

The symptoms in the primary case usually follow acute rhinitis and pharyngitis and develops gradually. The cough at first is dry and teasing, becomes loose with much mucous secretion. Large, coarse rales may be heard all over the chest and especially between the shoulders. The treatment of bronchitis consists largely in building up the general health of the patient and protecting the body from atmospheric changes. The child should be confined to the house and if necessary in bed, selecting a large, airy, sunny room for this purpose. The use of an oil silk jacket or of raw cotton batting wrapped about the chest is an excellent accessory treatment. If the child is sick enough to be confined to the bed it should not be allowed to lay in one position continually but should be changed occasionally from side to side, and infants may be taken up and held by the nurse at intervals. In severe

bronchial troubles, Holt recommends inhalations of either creosote, eucalyptol or lime water by means of the croup kettle, and we of the new school might add the introduction of our indicated homeopathic remedy by this method. All of these general measures apply in all of the bronchial and lung affections and will not again be referred to in detail. In addition we of course will not forget the internal administration of our homeopathic remedies, such as scilla, bry. alb., ipicac, ant. tart., and hepar sulph., according to their indications and our own personal experience with them.

We must now pass over the different forms of bronchitis such as the fibrinous and chronic, and simply mention asthma, hay asthma, and come at once to the most serious of all respiratory diseases of children, pneumonia. This condition is divided into two principal forms, viz.: bronco-pneumonia, or lobular, catarrhal or capillary bronchitis as it is variously designated; and lobar pneumonia or fibrinous or crupons as it is denominated by different authors. These two conditions are the most fatal of all of the diseases of children. According to figures given us by Holt, in a series of 726 autopsies in deaths of children from all causes, he found pneumonia in 322 of them. He also gives facts gathered from other sources than his own, which aid him in the conclusion that about 51 per cent of all the deaths of children is caused by or complicated with pneumonia in one form or another.

We will discuss first broncho-pneumonia: this is the most prevalent among children and the most disastrous in its results. It occurs mostly in children under three years of age and is prone to develop in those who are weak, poorly nourished and suffering from some form of malnutrition. It is most likely to develop in the course of measles, scarlet fever, whooping cough, diphtheria, and influenza. When broncho-pneumonia is a primary disease, the source of infection is the nose, mouth, pharynx, larynx and the trachea, hence the importance of treating catarrhal conditions of the upper respiratory tract. The inflammation in broncho-pneumonia affects the smaller bronchi and the air vesicles supplied by the inflamed branch of the bronchial tree. Here and there throughout both lungs may be found pneumonic patches situated near the surface and most often in the posterior part of the lungs. A peculiarity of selection as to the two lungs is that the base of the left lung and the apex of the right lung are the parts most often affected and in the order named. The stages of inflammation are not distinct, in fact the child

may die without any clearly defined physical evidences of the disease. In rare cases death has been known to occur within twenty-four or even twelve hours from the time of the first symptoms of the disease; but in cases that run the ordinary course, we may find illy defined congestion, red hepatization and grey hepatization all in the same subject. The symptoms of the disease in a majority of the cases are irregular and indistinct, leaving much room in the very young subject for mistaken diagnosis. Its approach may be so insidious and so dove-tailed into the primary disease as to make it impractical to tell where the one left off and the other began. The temperature is not usually high, ranging from 100 degrees F. to 102 degrees F. in the ordinary cases; but in exceptional and fatal cases may rise to 106 degrees F. or even 107 degrees F. The inflamed tissue being scattered here and there throughout the lungs and the inflamed area gradually shading into the healthy tissue, makes it difficult indeed to obtain sufficient data for a certain diagnosis. There may be sonorous and sibilent rales heard throughout the chest and respiration is short and hurried. In the ordinary cases with hope of recovery, improvement usually sets in about the seventh or tenth day; the older the child the better its chances of recovery. Cough is one of the most constant symptoms and may be incessant and annoying, either with pain or without, depending upon the amount of pleurisy accompanying the condition. Rapid respiration is very characteristic and may rise to eighty, ninety or even a hundred per minute; the pulse is usually fast and feeble, running as high as two hundred per minute; in infants we have no expectoration, the mucous, if raised at all, being immediately swallowed. A strong cough in cases that have advanced beyond the early stages, may be taken as a favorable indication, but cyanosis with its blueness of lips and nails are indications of failing respiration and usually of a fatal termination.

In some cases marked nervous symptoms may arise in an otherwise mild appearing case, and are omens foreboding no good to our young sufferer, for if we are not able to check these nervous symptoms, the probable meningitis that is complicating our case will soon prove disastrous. Another unfavorable sign is the prolongation of the fever; cough and general feebleness, beyond two weeks; for it is found that in these persistent cases marked consolidation usually develops and death from a slow asthenia, after weeks and sometimes months of suffering. Many of these cases furnish soil upon

which tuberculosis develops, flourishes and completes the deadly process begun by pneumonia. But not all of these prolonged cases are necessarily hopeless, for under judicious treatment and care many may completely recover after weeks of grim struggle and fighting. The tendency is often to diagnose all of these chronic results of pneumonia as an ingrafted tuberculosis but the results of many autopsies and the revelations of the microscope have often given negative answers on the deadly tubercular bacilli. There are two important conditions in pneumonia in children that are worthy of emphasis. They are: first, gastric disturbances such as nausea and vomiting which are at times the earliest indications of the approach of the disease and are misleading as to what we have to deal with; the other is pain which is not referred to the seat of the trouble at all, but at times to the stomach and often to the abdominal regions. These things will often mislead even the medical attendant and a careful examination and a guarded opinion are the only things that will save us from many embarrassing situations.

Convulsions that occur early in pneumonia do not signify much as they may simply announce the approach of the disease as the chill announces it in the adult, but convulsions that occur late in the disease are usually warnings of an involvement of the nervous system and are bad omens.

As a secondary disease pneumonia adds a very grave outlook to an otherwise hopeful case. When complicating whooping cough, it develops gradually and usually within a period of two weeks, and coming after the exhaustion of the cough makes an unfavorable diagnosis almost certain.

When complicating measles, broncho-pneumonia usually develops following the eruption. The temperature instead of going down as is usually the case, remains up or even goes higher. With this symptom and short respiration and cough, we may on careful examination find a fully developed or a rapidly advancing broncho-pneumonia.

Complicating diphtheria, we have one of our most perplexing and distressing cases to handle. In these cases, the pneumonia is found associated most often with the laryngeal form of diphtheria, extending by continuity of tissue first to the trachea and then into the bronchi and lungs. But there are records of exceptional cases where the broncho-pneumonia clearly followed from the toxic product of the disease with only the upper respiratory tract involving the primary disease. These diphtheritic cases with the broncho-

pneumonia complication usually run a rapid and fatal course.

As a complication of influenza, bronco-pneumonia is often very difficult to diagnose. The early stages of the two diseases may be so nearly identical as to make it impossible to tell the one from the other, but the aching and marked prostration of la grippe will help in clearing up the distinction even in the bronchial variety of that disease. An unusual complication that may accompany a broncho-pneumonia is ilio-colitis. It has been found in cases in which death was caused presumably by ilio-colitis, autopsy showed accompanying it, and probably the immediate cause of death, a broncho-pneumonia.

A few other diseases which broncho-pneumonia may complicate which are worthy of our attention, but rare in practice, are purulent meningitis, hemorrhage of the brain, endocarditis and pericarditis. But we pass these with the mention of their possible presence. Broncho-pneumonia is so varied in its manifestations and so insidious in its attack, that it is well for the practitioner to carefully search for this sneaking enemy of children in every obscure case. And when there appears a high temperature, rapid respiration, cough and cyanotic manifestations, whether physical evidences can be definitely discovered or not, he is safe in diagnosing broncho-pneumonia as either a primary or secondary disease. The general mortality rate from broncho-pneumonia is given as being 10 per cent to 30 per cent deaths in private practice, and from 30 per cent to 60 per cent in institutions for children.

In its treatment, all of the general measures mentioned previously are to be judiciously used in these cases also, and in addition we should bear in mind the sponge bath, which if given under proper conditions should not be considered as an enemy but a friend. We may use alcohol and water in the proportion of one to three; in my own hands the use of common baking soda, a teaspoonful to the quart of water, has proved useful in keeping the skin active, lowering the temperature and oft times soothing the restless patient to sleep.

In very high fever, the cold bath or cold pack is recommended by authorities, always watching the circulation, to massage the extremities and apply heat when necessary. Again we mention the use of the oil silk jacket, and, too, we recommend the antiphlogistine pack in the early stages. In later stages experience has taught me to substitute the raw cotton jacket for the antiphlogistine, it seeming not to meet

the later conditions. As to remedies, we of the new school have a host of tried and proved friends in bry. alb., scilla, phos. and ipecac, in the early stage of the disease, and according to their indications; and tart. em., phos., ars. alb., carbo-veg., and veratrum alb. in the later stages and according to their indications. Stimulation is to be used with judgment and when called for by the exhaustion, certain nervous conditions or failing circulation. And among the most available and satisfactory are brandy and hot water mixed, strychnia, atropine, external heat, including the hot mustard bath, and the mustard draught. The old school here again recommends inhalations to relieve the cough and to promote the secretion of mucous. These inhalations may be made from four to twelve times a day and may last from ten to fifteen minutes at a sitting, according to the condition of the patient.

For want of time we will not discuss pleuro-pneumonia, gangrene of the lungs, empyema, emphysema and a number of other conditions meriting our attention but will close this paper by making a brief comparison of broncho-pneumonia with lobar pneumonia. Lobar pneumonia in contra-distinction to broncho-pneumonia is usually a primary disease and usually comes on suddenly.

The inflammation of lobar pneumonia is usually confined to one lung at a time instead of being spread over parts of both lungs as is the case in broncho-pneumonia. The physical evidences in lobar-pneumonia are distinct with well marked boundaries between the inflamed area and the healthy tissue instead of gradually shading off as does its more formidable rival, broncho-pneumonia. The stages of inflammation are distinct in lobar-pneumonia, passing through congestion, red hepatization and grey hepatization in regular order instead of the indistinct conditions found in broncho-pneumonia. Lobar pneumonia also gives off the characteristic sputa and in fact all of the symptoms found in a similar case of the adult lobar pneumonia. But with all of its well marked and clear cut symptoms, lobar-pneumonia is far less fatal than the indistinct, insidious broncho-pneumonia. The average death rate of lobar pneumonia being only 3 per cent, compared with an average death rate of about 34 per cent in broncho-pneumonia. The average case of broncho-pneumonia that recovers is likely to be afflicted with some chronic ailment, while the lobar case usually rapidly and completely recovers.

*DIPHTHERIA.

BY JAMES B. BROWN, M. D.

DURING to modern, scientific research, diphtheria has lost its terrors. While it still is a serious disease, it is readily curable if taken in time and the remedies correctly applied. It has a mortality of 6 to 8 per cent. There are three different and distinct forms of this disease, as follows: The faucial, nasal and laryngeal.

As an early diagnosis is the important thing, a brief description of each kind may not be amiss. In the faucial or common form, the membrane first occurs on the tonsil, with a tendency to spread rapidly to the soft palate; it is a grayish color and leaves a raw, bleeding surface when removed; the tongue is coated a grayish white. In most cases, there is an involvement of the glands of the throat and neck. The child appears languid, slight headache and often vomits at the beginning. There is an offensive odor from the mouth, the temperature usually runs to 100-101, but some cases remain normal and others sub-normal; the pulse is soft and not rapid; Klebs-Loeffler bacillus is always present. The nasal form is ushered in more slowly; the child may show a history of a slight discharge for a week or two before appearing very sick. It is of a whitish-yellowish color, soon becoming bloody. It may attack both nostrils, but very often only one; the throat shows no abnormal condition and often gives a negative culture, when the nose shows positive. The glands of the throat may be involved, but this is the exception; the eyes very often become inflamed and a diphtheretic membrane forms. It is intractable to treatment, often lasting a month or two, and, being only a running nose, can easily be overlooked.

The laryngeal, malignant or diphtheretic croup, as it is sometimes called, is the most to be feared of all. The physician who has many of these cases on hand is not liable to oversleep during the attack. These cases are usually ushered in with a croupy cough, not unlike the plain croup.

*Read before Colorado Homeopathic Society, September, 1910.

It may linger three or four days or two weeks, without much change, while some cases will be taken very sudden.

In 1903 an epidemic of malignant diphtheria occurred at the Denver Orphans' Home. The first case, a boy of six years of age, took his breakfast, as usual. About 10 o'clock he was found lying upon the floor. He appeared stupid and drowsy; an hour later became dyspnoeic and cyanotic. I saw him about noon. He appeared semi-conscious, with labored breathing and cyanosis; his temperature was normal, pulse 90, throat negative. He expired thirty minutes later.

The next day, another was taken the same way, with the same symptoms; a culture was taken; although the throat and nose appeared to be normal, there was no glandular enlargement.

In spite of all we could do, he lived but little over 24 hours. The culture was found to be negative. The next day two more were taken the same way, the following day another. Realizing we had something out of the usual order in virulency in these cases, diphtheria of malignant type was suspected. With heroic measures, comprising antitoxin and intubation, etc., there were no further deaths. The concomitant symptoms were absent, as follows: No change in the throat, nose or glands; normal temperature and slight elevation of pulse and negative culture, showing how easily these conditions may be overlooked. The membrane was evidently located low down in the trachea and the germs the most virulent type. Many epidemics have occurred in this institution since, but none in such a virulent form.

In making a diagnosis, tonsilitis and streptococic infection must be considered. In tonsilitis there is a severe inflammation of the tonsils. They are greatly enlarged, bright or dark red, with patches in spots which later may become confluent. Removing the membrane does not always produce bleeding, the membrane has a yellowish tint, the odor is bad and glands of neck enlarged. Associated with this is a high fever 102-105, aching over the whole body and restlessness; to open the mouth is painful, whereas in diphtheria is not the case.

In streptococic infection of the throat there is not so much involvement of the glands as a rule. The tonsils are

somewhat enlarged and badly inflamed, mostly a bright red color. A yellowish, thin membrane forms and spreads rapidly until it covers both tonsils and very often the uvula and soft palate. The temperature may go to 103; toxemia is not profound; the pulse above 100 and soft, cultural methods show the typical cocci. It is intractable to treatment but seldom fatal.

In the treatment of diphtheria the outcome depends upon the length of time it has run. A few hours of delay often proves fatal. Antitoxin has and undoubtedly is saving millions yearly, however, in the common and nasal forms, remedies applied according to the law of similia will do as well. During the past month the writer treated twelve cases of diphtheria, six nasal and six faucial. Three of these cases were given antitoxin, one dose each of three thousand units, the balance received the remedies as indicated and all have recovered. The remedies used are belladonna, mercurius bin iod., cinnabaris, merc. cyan., rhus tox, phytolacca, lachesis, kali bi, mercurius sol., mezereum and sulphur. Antitoxin may be used in conjunction with any of the above remedies if preferred. I do not use it unless a great deal of membrane is present, then a dose to overcome the toxemia if necessary.

In treating the malignant laryngeal or croupous form there is only one treatment, viz: Antitoxine and intubation. This will do the trick when everything else fails. There is a condition which often resembles diphtheria but without the specific germ. This disease attacks the tonsils and soft palate. It will eat away the greater part of the tonsil and palate if not checked. There is considerable involvement of the throat and cervical glands. Microscopical examination shows a fusiform bacillus or bacillus of Vincent. The child feels languid, throat painful with a temperature of 101 to 102, the toxemia is slight. It usually responds to treatment in ten days to two weeks; mercurius and echinacea cures.

Post diphtheretic paralysis does not occur unless the disease is neglected in the beginning, at least this is my experience. Should it occur it runs its course in from three weeks to six months. The remedies for paralysis are gelsemium, cocculus, zincum., argentum nit. and sulphur. Sprays are mentioned only to be condemned. If the child is old enough, a gargle of echinacea will help. The diet must be sustaining; broths, milk, gruels, etc., are the best.

18 and 19 Nevada Building, Denver, Colo.

***ACUTE PERFORATION OF GASTRIC ULCER.**

BY CLINTON ENOS, M. D.

THERE IS NO COMPLICATION of any disease which more urgently demands surgical interference than acute perforation of gastric ulcer. Without operation fully 99 per cent of these cases die; with operation fully 50 per cent are saved, and with prompt operation the mortality is as low as 10 per cent. Deaver reports six cases operated upon at the German Hospital, Philadelphia, with six recoveries. Operations done in the first twelve hours after perforation show a mortality of about one-half, compared with those done in the second twelve hours. This, then, is a condition that demands prompt action and prompt action depends upon prompt diagnosis.

The first symptom of acute gastric perforation (subacute and chronic perforation are somewhat different and will not be referred to in this paper) is a sudden, severe, cramping, burning pain which has no tendency to radiate to other regions. This is succeeded in five to thirty minutes by symptoms of collapse, recognized by the anxious cast of countenance, the cold and clammy surface, the sudden pallor, the guarded breathing, the quickening feeble pulse. In about one-half the cases the patient vomits, but this is not commonly repeated. When peritoneal reaction has set in, marked board-like rigidity of the upper abdominal wall appears; this is more marked in stomach perforation than in perforation of any other abdominal viscera. Tenderness arrives at the same time as rigidity. This tenderness and rigidity will soon spread over the abdomen. Thirst is a very frequent symptom. If much air escapes into the peritoneal cavity the liver dullness may be diminished or actually disappear. There is, invariably, a fall of temperature after perforation; as reaction sets in fever will be present. There is always quickening of the pulse.

The initial symptoms of perforation of any abdominal viscera look a good deal alike. It is mainly by attention to the previous history of the case, and to certain rather ill-de-

*Read before Colorado Homeopathic Society, September, 1910.

finer differential points, that we base our diagnosis upon. If a patient is known to suffer with gastric ulcer and symptoms of perforation come on, the complication is easily recognized; but if severe symptoms appear in the abdomen in a patient whose medical history you are unfamiliar with, or whose past symptoms are vague or unreliable, the diagnosis may be very difficult to make. It must be remembered that while perforations in other portions of the abdominal viscera sometimes produce epigastric pain, it is exceedingly rare for gastric perforations to cause other than epigastric pain. In perforative lesions of the lower abdomen the pelvis is usually first involved by extension, and the umbilical and epigastric regions do not become involved till later. In gastric or duodenal perforations, any fluid extravasated, owing to the anatomical arrangement of the viscera, immediately collects in the right kidney pouch and iliac fossa. In such a patient seen after a few hours, the resemblance to appendicular abscess is so great that a diagnosis of gastric perforation is rarely ever thought of unless there is a history of typical gastric ulcer.

In acute appendicitis the initial pain is diffuse, colicky, and wave-like in character; at a later period it settles into the right iliac fossa. In those cases in which there is no perforation of the appendix in the first twenty-four hours, there is little if any collapse; fall of temperature to subnormal is rare; abdominal rigidity is well localized to the region of the appendix; and the general peritoneal invasion is often delayed for one or two days, a palpable mass in the meantime forming in the right iliac fossa. The pain in acute gastric perforation is overwhelming, and though local at first, very quickly becomes general; the shock is profound, the temperature falls, and the patient appears in immediate danger of death; as reaction commences, evidences of general peritonitis are found, and at a much earlier period than is the case in appendicitis. The symptoms are practically the reverse of appendicitis.

The symptoms of perforation of duodenal ulcer are the

same as those of gastric ulcer. Previous history alone can differentiate before the operation.

Ruptured extrauterine pregnancy resembles gastric perforation in the initial symptoms. The history of the patient, location of the pains, tender tumor in the pelvis, etc., differentiates.

Acute intestinal obstruction may look like gastric perforation after two or more days of duration, but that will not fool any well-informed physician.

Acute hemorrhagic pancreatitis resembles gastric perforation in the intensity of the pain and the profundity of the shock. A tumor just above the umbilicus will differentiate.

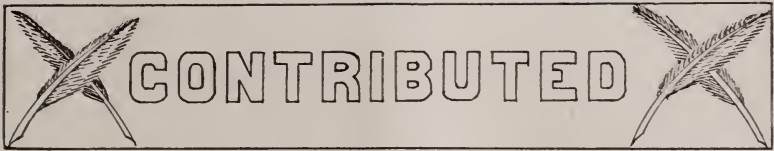
Mesenteric thrombosis, ptomaine poisoning, and the gastro-intestinal crisis of certain skin diseases may somewhat resemble gastric perforation.

Gall-stone colic and acute cholecystitis when commencing severely may resemble gastric perforation; but the history, location and radiation of the pain and the slower development of the peritonitis serve to differentiate—at least on paper.

I wish to report a case of acute perforation of gastric ulcer. While the clinical history is somewhat obscure, yet enough was developed in the examination to make the diagnosis of gastric ulcer fairly accurate. Mr. W., age 51. During the previous year the patient gave a history of four attacks of severe epigastric pain, vomiting after eating, fever and jaundice. The attacks usually lasted from four days to a week. I saw him first on the night of July 1, 1909, in consultation with Dr. E. Agnes Scott. He had been sick for four days. His principle complaint was severe pain in epigastrium, aggravated by eating and followed by vomiting. That evening he had very severe pains after eating some oatmeal and his temperature had gone up to 102°. He was very sallow but not jaundiced. The whole abdomen was somewhat tender and rigid but there was excessive tenderness about three inches above the umbilicus and just to the right of the

median line. Being an ignorant man, he could not give anything definite about his previous stomach history except as stated above and that these spells had always been diagnosed as gall-stones. The region of the gall-bladder was not especially tender nor was the liver enlarged as one would find in cholecystitis. The tender spot corresponded to the prepyloric ulcer region. One, however, does not expect such fever in a simple ulceration. Some suppurative process, undoubtedly, was present as a complication to the gastric ulcer. Owing to the serious nature of suppurative processes of the upper abdomen and the danger of delayed interference, we advised an operation without taking more time for study of the symptoms in order to arrive at a more positive diagnosis. The next day we operated. On opening the abdomen I was surprised to find a perforation one-half inch in diameter well up on the anterior wall of the stomach near the pylorus. There were no adhesions. No extravasation had occurred. The best explanation of this perforation existing without the usual symptoms, seems to me, to be that the ulcer was nearly ulcerated through the stomach wall at the time the patient went on the operating table. Up to six years previously he had been a hard drinker and he took the anesthetic very badly and struggled so hard that two men could scarcely hold him on the table. The perforation, however, was not a slit as is usual in cases caused by exertion, but nearly round. No evidences of other ulcers existed.

While the interne was making traction downward on the stomach to bring the perforation into better position for suturing, there was a sudden rent in the stomach wall for more than an inch extending from the perforation to the pylorus. There was a profuse hemorrhage but it was controlled by through and through sutures which also extended to include the perforation. A superficial layer of sutures was also added. A posterior gastro-enterostomy was then performed. The patient made a fine recovery and has had no more symptoms of gastric ulcer.



AMERICAN INSTITUTE OF HOMEOPATHY.

TO THE PROFESSION OF THE WEST: The men and women who accepted the hospitality of the West during the last meeting of the American Institute of Homeopathy, appreciate more fully than ever what hospitality means.

We have no hope that future time, in other sections of the country, will bring the same warm-heartedness and open handedness and general enthusiasm which was received in the West, but we feel that in going to the extreme East, as we are this year, will give an opportunity to the Western profession to see something of the Eastern country and its environments, at the next meeting to be held in Narragansett Pier.

It is our purpose, in order to make it as easy as possible, and as congenial as possible to start a special car or cars from San Francisco, picking up on the way East the people who desire to attend the Institute, with the ultimate stopping place of Chicago. We have no doubt that many can arrange to take their vacation during the last week in June, and we have arranged to stop over at several points on the way East from Chicago.

There is no more pleasant way of spending a vacation than to extend the acquaintance and renew the acquaintance of the profession in our section of the country, and to commingle and become acquainted with the profession in other sections of the country.

We have, as yet, been unable to get a definite idea of the cost of the trip, but we are sure that we will get the lowest figures to be had at that time. We cannot at this time tell you the exact number of places we will stop on the way East, but it is proposed to stop at Cleveland, possibly Erie, at Buffalo, Rochester and Albany. If it is desired by those wishing

to go, to go on an earlier train from Chicago and stop off in New York City for one day, we will make such arrangement. It is the intention of the committee at the present time, to take the day boat down the Hudson and the night boat from Albany to Narragansett. If we do this, there will be no time for stopping in New York City on the way going, but something can be done about returning by way of New York City, or by way of Boston possibly later on.

One of the pleasant features, among the many pleasant features, of the trip to California was having a hotel all to ourselves, or practically so, where we all stopped under one roof, where the meetings were all held, and the hospitality of the hotel to its guests on that occasion will long be remembered. We are pleased to tell you there has been made such arrangements for the next year at Narragansett, in the New Mathewson House. We are going there at the time of the year when they promise the hotel practically to ourselves. The hotel is new, beautifully situated on the sea shore, where there is bathing, fishing and boating. It is cool there in the summer time, due to the ocean breeze, and to the fact that this particular section of the country is so surrounded by water that it is rarely ever warm at that time of the year.

In addition to having the sea shore, there are beautiful drives in the wooded country surrounding it. There are golf links, and polo grounds, and other things to entertain the visitor. For this reason we feel that no better place could be found to spend a short time during the summer. From the mountains of the West to the sea shore of the East makes a pleasant variation, and those who went to the mountains last year and will go to the sea shore this year, we feel sure will be well repaid for the trip. The bathing at the beach is excellent. It is a gently sloping beach, the surf is not high, and the bathing is not dangerous so that this in itself is quite an attraction. There are some famous country clubs in the surrounding country which can be visited, and many other features that I am sure will please all those who take the trip to Narragansett Pier.

Now, we want everybody who possibly can to arrange at this time to take a vacation during the latter part of June. Remember that such a vacation will do you good, physically and professionally. It will give you an opportunity of seeing much of the country, that possibly many have never seen, and will swell the ranks of the American Institute of Homeopathy and make the meeting a memorable one, because we feel sure

with the Eastern profession so near we will have a large gathering.

Now, members of the West, make up your minds to join us. Dr. Guy Manning of San Francisco will have in charge the cars on train coming from the West to Chicago.

Later on we will be able to outline the itinerary, giving you all the stops and time of trains. At the present we are unable to do so, because we do not feel that we want to select the roads until after we have accomplished something in the way of rates. You will be informed of all matters of detail in the *Journal* later on. What we want now, to call your attention to more than anything else is the fact it is a great opportunity of seeing the Eastern country, and we know the hospitable men of the West who entertained the profession so generously last year will want to join us again this year.

Chicago, Illinois, October 24th, 1910.

T. E. COSTAIN,
Chairman Transportation Committee.





EDITORIAL SECTION



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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

A WRONG IMPRESSION. A wrong impression was given out by Dr. Fisher's paper published in the last issue of THE CRITIQUE. Not a few have understood that some one officially connected with the National League for Medical Freedom was referred to when Dr. Fisher made mention of the blatherskite at the Denver meeting. Dr. Fisher had ample reasons to resent the insinuations of the person referred to and did so in a characteristically Fisher-esque manner, much to the delight of all present. We are pleased to say, however, that since the meeting referred to the individual indicated by Dr. Fisher has been removed from further activity along his line and in addition neither the League, its officers nor members care to be associated with sentiments such as the individual in question advanced. The National League for Medical Freedom solicits an investigation of its intentions, among which will not be found the condemnation of any individual, school of medicine or association which do not advocate un-American principles.

FOOL LEGISLATION. The following is a shining sample of some of the "fool legislation" we may expect this coming winter. A bill will be introduced in the next legislature providing that any surgeon who shall perform an operation for appendicitis and thereafter be unable to prove that the appendix was in a diseased condition, shall be guilty of malpractice and punishable under the penal code.

The bill is being fathered by Philip Schuch, Jr., and a number of medical practitioners throughout the state, who, since 1905, have held to the theory that the appendix has a function to perform in the human body and that operations for its removal are due in many cases only to the surgeon's love of his science and desire for a large fee.

Nine hundred persons were operated on for appendicitis in Colorado during the last year and the average of deaths following operations ranges about 12 per cent. The promulgators of the proposed bill declare that not more than 10 per cent of these operations were necessary.—*Denver Post, Nov. 19th.*

It is hardly possible the people have entered into contract with Mr. Schuch, Jr., to advise them just what to do in the matter of the treatment for appendicitis, but it would be vastly better for them as a whole if some such measure was made possible. This, however, is on a par with some of the so-called "health" measures which will be proposed by the American Medical Association this coming winter and should all be put down under the head of "Fool Legislation" and allowed to come under the special care of the fool killer.



MISCELLANEOUS

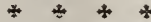
The business manager of THE CRITIQUE returned from a very pleasant hunting trip the 15th of last month.



Dr. J. H. Morrow was the Socialist candidate for coroner at the late democratic landslide. Comments unnecessary.



Dr. Lewis Pinkerton Crutcher is chairman of the bureau of Pedology, for the Narragansett meeting next year. Good selection.



We regret our absence from the office during a call from Dr. A. F. Swan, of Colorado Springs, Sunday, November 13th. Try it again.



An effort will be made by the executive committee of the Denver Homeopathic Club, to hold the next meeting in the Public Library building.



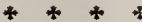
Dr. C. E. Fisher paid a short visit to this office the fore part of last month. The doctor was *en route* to Texas whither he had been called professionally.



The Park Avenue Hospital, formerly Denver Homeopathic, is sadly in need of more room. Why not get together and build an addition and then replace the old sign?



"Green Gables," ex-president of the A. I. H. Bailey's sanatorium at Lincoln, Neb., does its Colorado advertising in *Colorado Medicine*, organ of the old-school in this state.



Dr. Wade A. Jones was a candidate for legislative honors at the last election. Notwithstanding his ability and fitness for the position he was on the losing side. 'Twas ever thus.



Notwithstanding so distinguished an individual as Simon Flexner has discovered a "serum" for the cure of infantile paralysis that disease continues adding to the death list daily.



The Metropolitan building, corner of Sixteenth and Court Place, is the new home of a large number of doctors. The County Society's large library will be housed there we understand.



Our friends of the "Southern" Homeopathic Medical Association have issued the program for the forthcoming meeting, which takes place at Jacksonville, Fla., the 6th, 7th and 8th of this month. As usual it is a document not only demanding but deserving the highest consideration inasmuch as it shows our brethren of the fast-becoming-famous "South-

ern" to be of the right sort. Continued success to this association and its members is the wish of THE CRITIQUE.



The Atlantic Medical College, of Baltimore, has given up the struggle and is now numbered among the "has beens."



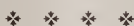
The thirty-fourth annual session of the Homeopathic Medical Society of the state of Oregon, was held in Portland, the 7th of September, at which time Dr. A. L. Canfield was elected President.



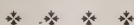
Every homeopathic physician in the city should attend the meeting of the Denver Homeopathic Club this month. Dr. Strickler proposes presenting an unusually interesting program on that occasion.



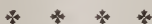
Dr. W. H. Sharpley, health commissioner of the city of Denver, had additional political honors handed him at the last election. He is a state senator now, thank you, and by quite a large majority, too.



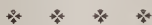
The California fellows have begun the boosting of a "West of the Rockies" special to the Narragansett meeting of the A. I. H. Weil, what those people start they usually finish, so look out for the aforementioned special.



W. H. Lauth, the popular surgical instrument manufacturer and dealer, has moved from his old location on California street, to large and convenient quarters in the Metropolitan building. He is now "right in the push."



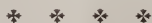
Dr. Gaius J. Jones, President of the A. I. H., was slightly injured in a collision between his carriage and a street car, in his home town, Cleveland, some time in September. This rather indefinite bit of information is taken from the November number of *Medical and Surgical Reporter*.



Dr. George H. Martin, Boston University School of Medicine, has been appointed to fill the chair of Neurology in Hahnemann of the Pacific. This move was made necessary by the election of Dr. Arndt to the Field Secretaryship of the American Institute and consequent removal from Frisco.



In quoting our comments concerning change of editors of *Pacific Coast Journal of Homeopathy*, our esteemed cotemporary *New England Medical Gazette* credits the same to "Clinique." The *Gazette* should be more considerate of our feelings, and, besides, who knows but what *The Clinique* might object.



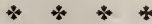
"At Denver I was most cordially received at the depot by Drs. S. S. Smythe, Worth, J. W. Mastin (of THE CRITIQUE), J. B. Brown, and put into comfortable quarters at the "Brown's Palace," where years ago, at the Denver meeting of the "Institute," I passed some very pleasant days in the company of Dr. Wm. Boericke. The Colorado friends had an

excellent meeting, without a large attendance, but affording some very good papers, which were generally and ably discussed. It was a rare treat to see old veterans like Dr. I. N. Burnham and Dr. S. S. Smythe still actively engaged in work, and meeting at every turn proof of the high esteem in which they are held by the younger men of their city and state. Among the "busy" men of the convention was Dr. C. E. Fisher, who has something of a right to feel at home in Denver, and who takes a keen interest in Colorado affairs. Dr. Fisher read an exceedingly interesting paper, and in many ways added to the success of the meeting.

Since, if I am correctly informed, there are but few large cities in the state the "school" is not very strong outside of Denver, and the attendance from without the metropolis is never expected to be large; but, as before stated, the interest at the sessions was well maintained throughout. The hospital, so all agree, is doing good work, and there seems to be harmony on part of the profession concerning hospital affairs. The college, of course, is a thing of the past, but I am glad to state that if those alumni whom I met are fair examples of the kind of men they turned out, then the college must in the main have done very good work. To me it seems as if all that the Colorado friends need is an incentive to renewed work, a more aggressive and determined spirit, and that opportunity to increase their numbers in the state which depends upon time and the normal increase of the population. The helping hand of the Institute can do much in infusing new life into the state organization and in developing a live, active city society, which should by all means be maintained. Dr. L. E. Bartz, of Windsor, a graduate of the Denver school, and a man of evident ability, was chosen for the presidency, and Dr. C. M. Worth, an excellent officer, was re-elected secretary. I think seven "applications" were handed me at Denver.—From resume of my first "trip" In the Field, by Dr. H. R. Arndt in November *Journal* of the *A. I. H.*



Applications for membership in the American Institute of Homeopathy, according to the list published in November issue of the *Journal*, were confined to Colorado, Oregon and Washington, and were, no doubt, due to the energetic efforts on part of the Field Secretary, Dr. Arndt, during brief visits in these several states.



According to *The Pacific Coast Journal of Homeopathy*, "Dr. Helen Woodruff has returned from her European trip." Dr. Woodruff is a graduate of the old Denver Homeopathic and her college associates and numerous friends in this city will be pleased to learn of her apparent prosperity. She is now located in Los Angeles.



"The Land of Irrigation" is the title of an unique booklet picturing some of the productive valleys of the Rockies. The leaflet, which is being distributed by the Passenger Department of the Denver & Rio Grande railroad, is devoid of descriptive text, but depicts in a few terse axiomatic sentences the wonderful natural resources and possibilities of the Rocky Mountain region.



There is nearly 100 per cent. larger enrollment at Cleveland-Pulte medical college this year than last. This with a freshman class of nearly one hundred at the New York institution and gains in all other homeopathic schools of the country, is pretty clear and convincing evidence that old Mr. Homeopathy is not entirely eliminated from consideration in the selection of a medical education. Let the good work go on and onward.

INVITATIONS FOR PLACE OF MEETING FOR 1911.

Under the By-Laws, invitations for the meeting of the American Institute of Homeopathy must be in the hands of the committee ninety days previous to the meeting of the current year. The chairman of the committee is Dr. E. L. Mann, German Life Building, St. Paul, Minn.



SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION.

To the Editor:

New Orleans, La., Oct. 7, 1910.

We again wish to call your attention to the next session of the "Southern," which will be held in Jacksonville, Fla., December 6th, 7th and 8th, 1910.

The officers and bureau chairmen are making an earnest and determined effort to make this the most profitable meeting ever held, and, with this object in view, it is essential that you should contribute papers and take part in the discussions, and, above all, that you should be present. You will greatly assist the officers if you will let the secretary know if you will attend.

If you are not already a member, fill out the application previously enclosed and return the same. The dues are only two dollars. If this application has been mislaid, we will be pleased to forward another.

If you have not paid, please send dues to the treasurer, Dr. W. L. McCreary, No. 421 Clinch Avenue West, Knoxville, Tenn.

All information regarding hotel arrangements and transportation will be found in the program which will be sent out in advance of the meeting. Anyone desiring the above before, may obtain the same from Chairman Dr. H. R. Stout, Jacksonville, Fla.

Again urging attendance, we beg to remain,

Fraternally yours,

JNO. T. CREBBIN, *Secretary.*



DENVER HOMEOPATHIC CLUB.

Denver's Homeopathic Club held a thoroughly enjoyable meeting in the Ordinary of the Brown Palace Hotel, Thursday evening, November 10th, 1910, on which occasion Dr. E. B. Swerdfeger presided and a goodly number of members participated in an unusually interesting and instructive program.

This event was advertised as a "rally" but taking the general acceptance of this term as a standard, the gathering, so far as numbers was concerned resembled something much less demonstrative. Notwithstanding the apparent apathy on part of the profession at large, those who did attend were amply repaid for their presence by the high character of the discussions, the scientific spirit of the paper and other characteristic features; it was generally conceded that this was one of the most thoroughly creditable meetings the Club has held in many years.

Dr. J. B. Brown's paper on "Internal Vaccination" was a particularly well written and logical production and showed considerable study and research. THE CRITIQUE hopes to present this document in its January issue.

After considerable discussion as to the feasibility of foresaking the present organization, it was decided to continue the Club, or "something just as good," and it is hoped the next meeting will see a very general turn out of homeopathic physicians.

Dr. Strickler was appointed presiding officer of the next meeting, which will be held at call of this official, and he has already laid plans for a thoroughly homeopathic event.

CHICAGO LETTER.

CHICAGO, Nov. 17th, 1910.

Dr. M. L. Puffer, Hahn, '07, is now located at Christmas, Arizona.

Dr. Donald Renton, of Glasgow, Scotland, is doing post-graduate work at Hering Medical College.

Dr. Hugh Beals, Hahn, '08, was a visitor in Chicago recently. The doctor is located in Minneapolis, Minn.

Dr. C. E. Clark, a former student in the Atlantic Medical College, is now in Hahnemann Medical College, Chicago.

Dr. Pratt's clinic in "Orificial Surgery," held at Hering Medical College, November 8th, 9th and 10th was well attended.

Dr. Geo. G. Starkey, Hahn, '10, has located at 5412 Madison Ave., Chicago. Dr. Starkey will be associated with Dr. Harvey Farrington.

The Phi Alpha Gamma fraternity of Hahnemann College gave a dancing party on Thursday, November 10. A large attendance of faculty, students and friends were present.

The sessions of the North American Surgical Society held in Chicago, have been well attended by many out of town physicians. Clinics have been held daily for their benefit.

The November meeting of the Regular Homeopathic Medical Society was held Tuesday, November 1st. A talk on "Natrum Muriaticum," by Dr. J. T. Kent and a paper by Dr. E. T. White on the "Etiology of Diseases of the Rectum," were presented.

The November meeting of the Englewood Homeopathic Medical Society was held on the 8th, at the home of Dr. Harris. Dr. Harry Farrington presented a paper on "Mercurius Vivus" which was followed by interesting discussion.

The October meeting of the Chicago Homeopathic Medical Society was held on Thursday evening, October 20th. The evening was given to papers regarding the Typhoid Gland as follows: "The Pathology," Dr. Tenney; "The Surgery," Dr. Chislitt; "The Medical Treatment," Dr. Gordon; The Electro-Therapeutics, Dr. Grubbe. Discussions followed by Doctors Kahlke, Pratt, Bruce, Foster, Mitchell, Fitzpatrick and others.



PENNSYLVANIA NEWS.

THE WEST BRANCH HOMEOPATHIC MEDICAL SOCIETY held its regular bi-monthly meeting at the office of Dr. E. F. Harpel, Shamokin, Pa., on Thursday, November 3rd, 1910, at 3 p. m. The subject for discussion consisted of a paper on "Constipation" by Dr. Harpel.

LYDIA REINHILD BAKER, M. D., SECY.

THE HOMEOPATHIC MEDICAL SOCIETY OF ERIE COUNTY, PA., held its regular monthly meeting on November 2nd, at 8:30 p. m., at the Erie Public Library. The subject for discussion was "The Tubercular Infection through the Tonsils and Adenoids," by Dr. G. B. Osborne.

C. A. MITCHELL, M. D., SECY.

THE PHILADELPHIA ACADEMY OF MEDICINE held its regular monthly meeting at the Colonnade Hotel, 15th and Chestnut Sts., on Thursday evening, November 3rd, at 9 p. m., President Dr. G. Harlan Wells in the chair. In accordance with the custom recently adopted the scientific portion of the program was held first, and consisted of a Symposium on

Arterio-sclerosis. The following papers were presented: "The Clinical Manifestations of Arterio-sclerosis," by Dr. G. Morris Golden; "The Treatment of Arterio-sclerosis," by Dr. W. H. Yeager. The meeting was well attended and hearty discussion entered into.

RALPH BERNSTEIN, SECY.

THE WOMEN'S HOMEOPATHIC MEDICAL CLUB OF PHILADELPHIA held its regular meeting at the office of Dr. Mary Branson, No. 1504 Locust street, on Thursday evening, Nov. 8th, at 8:30 p. m., at which papers of an interesting scientific nature were presented and freely discussed.

E. W. HOWELL, M. D., SECY.

THE LACKAWANNA COUNTY HOMEOPATHIC MEDICAL SOCIETY held its regular monthly meeting at the office of Dr. Horace B. Ware, Board of Trade Building, Scranton, Pa., on October 13th at 8:30 p. m. The scientific program of the evening consisted of a Symposium on Typhoid Fever.

H. L. VAIL, M. D., SECY.

THE WOMEN'S HOMEOPATHIC MEDICAL ASSOCIATION OF PITTSBURG held its regular meeting at the office of Dr. Anna Johnston, No. 5016 Liberty Ave., Pittsburg, on Thursday, November 3rd, 1910, at 8 p. m. A paper was presented by Dr. W. B. Boggs on "The Methods of Studying the Repertory."

ELLA D. GOFF, M. D., SECY.

THE ENTERTAINMENT BOARD OF THE GERMANTOWN HOMEOPATHIC MEDICAL SOCIETY met at the office of Dr. Richard Larer, No. 1407 E. Columbia Ave., Philadelphia, Pa., on Wednesday, October 26th, 1910, at 9 p. m., and at this meeting arrangements for the program for the next meeting of the Society were completed.

WALTER C. BARKER, M. D., SECY.

THE GERMANTOWN HOMEOPATHIC MEDICAL SOCIETY held its regular monthly meeting on Monday evening, October 17th, at nine o'clock, at the Union League, Philadelphia. Dr. Theo. L. Chase presented a paper for consideration on "Dyspepsia, Its Relation to Surgical Diagnosis." The scientific program was followed by a collation.

LANDRETH W. THOMPSON, M. D., SECY.

THE CLINICO-PATHOLOGICAL SOCIETY OF PHILADELPHIA held its regular monthly meeting in the Hahnemann Medical College on Saturday evening, October 15th, 1910, at 8:30 p. m. Papers were presented by Dr. N. S. Betts—"The Menstrual Cycle of Normal Endometrium;" Dr. G. W. Mackenzie—"Anatomy of the Ear." Drs. Geo. A. Hopp and Benj. K. Fletcher were nominated for membership.

JOHN H. REDMOND, M. D., SECY.

THE HOMEOPATHIC MEDICAL SOCIETY OF CHESTER, DELAWARE AND MONTGOMERY COUNTIES held its regular bi-monthly meeting at the Turk's Head Inn, West Chester, Pa., on Tuesday, October 11th, 1910, at 2:30 p. m. A timely and important paper on "Poliomyelitis Acuta" was read by Weston D. Bayley, M. D. The annual election of officers took place at this meeting, which was followed by a banquet. The meeting was well attended and hearty discussion entered into.

ISAAC CROWTHER, M. D., SECY.

THE HOMEOPATHIC MEDICAL SOCIETY OF PHILADELPHIA COUNTY held its regular monthly meeting on Thursday evening, October 13th, 1910, at 9 p. m., at Hahnemann Medical College. The scientific program of the evening consisted of a paper on "The Treatment of Chronic Diseases According to Homeopathic Philosophy," by Dr. W. H. Schwartz, of Houston, Texas; a paper on "Insanity," by Dr. Weston D. Bayley, of Philadelphia, and a "Report of the Delegate to the American Institute of

Homeopathy," by Dr. Thomas H. Carmichael, of Philadelphia. The Committee on the President's address reported with definite recommendations on all the vital suggestions made in the address, and especially so regarding the legal protection of members. The meeting was unusually well attended, and hearty discussion entered into.

PERCY A. TINDALL, M. D., SECY.

THE HOMEOPATHIC MEDICAL SOCIETY OF THE 23RD WARD, PHILADELPHIA, held its regular monthly meeting at the office of Dr. Richard E. Tomlin, No. 2057 N. 8th Street, Philadelphia, on Wednesday, October 19th. The scientific portion of the program was presented by Dr. Tomlin who read a very able paper entitled "Sex," and every member of the society practically entered into a discussion of the same. Dr. Tomlin acting as host served a sumptuous repast at the close of the meeting.

JOHN D. BOILEAU, M. D., SECY.

THE PHILADELPHIA SOCIETY FOR CLINICAL RESEARCH held its regular monthly meeting on Wednesday evening, October 19th, 1910, at the office of Dr. M. W. Sloan, No. 4825 Baltimore Ave., at nine o'clock. Papers were read by Drs. Percy A. Tindall and M. W. Sloan, which was followed by the annual election of officers. Dr. Warren Mercer having been elected president, Dr. Walter Snyder, vice-president; Dr. W. M. Hillegas, treasurer, and Dr. John F. Rowland, secretary.

JOHN F. ROWLAND, M. D., SECY.

THE ALLEGHENY COUNTY HOMEOPATHIC MEDICAL SOCIETY held a special meeting at the Fort Pitt Hotel on the evening of October 19th, at 7 p. m., the occasion being a banquet tendered to Dr. John Edwin James, Professor of Obstetrics at the Hahnemann Medical College, Philadelphia, and Dr. H. R. Arndt, of Cleveland, Ohio, representing the American Institute of Homeopathy. Dr. James gave an address after the banquet on the subject of "The Significance of Gonorrhoeal Infection in Pregnancy," and Dr. Arndt made an address on "Propagandizing Homeopathy."

EDWARD P. CLARK, M. D., SECY.

THE HAHNEMANN MEDICAL COLLEGE OF PHILADELPHIA. Things are now in full swing at the College, and after a month's trial of the new routine and order of things, everything is working smoothly and harmoniously. The radical change which has been made in the methods of teaching, especially in the junior and senior years, seems to be more than admirable. The didactic lectures have been reduced to a minimum, and the advanced students of the junior and senior years devote most of their time to practical clinical work and in the out-patient department. Particular pains are being given in the thorough drilling of the homeopathic materia medica and therapeutics to the students in their clinical and hospital work, the teachers being especially enthusiastic in this branch of their science, pointing out to the students the possible indicated remedies, their indications, why the indicated remedy is selected, and why those which have been rejected have not been selected, thereby giving the student a very keen and critical knowledge in the administration of the homeopathic remedy. The senior students are occupied daily from nine to twelve in the medical, surgical and gynaecological wards of the hospital. The first portion of this time is devoted to the taking of histories, laboratory and clinical examinations. The last hour and a half is devoted to ward classes which are conducted by instructors in the various departments. The members of the junior class spend an hour and a half in the afternoon in the out-patient department where they examine, diagnose and treat the cases under the supervision of competent clinical teachers. The course in medicine and surgery as being given at the Hahnemann Medical College to-day is second to none, and competes more than favor-

ably with that given by any of the most progressive medical schools in America. The Hahnemann Hospital and Dispensary fortunately being located in the heart of the city has a larger percentage of cases to treat than any other hospital and dispensary in the entire city, of which the student is given due advantage. Dr. W. B. Van Lennep, the new "working dean," is more than interested in his work, making the rounds daily from department to department, encouraging the men in their work and giving a helping hand wherever he can.

THE HAHNEMANN INSTITUTE OF THE HAHNEMANN MEDICAL COLLEGE, Philadelphia. The Under-graduate Society of the Hahnemann Medical College met on the evening of November 2nd in the auditorium of the main college building, with President M. H. Dinsmore in the chair. The meeting was addressed by Prof. Oliver S. Haines, the title of whose subject was "Homeopathy from the Practitioner's View-point." A further paper was presented by W. H. Kirkpatrick on "The Practical Side of Homeopathy." The meeting was well addressed by the Dean of the College, Dr. W. B. Van Lennep, and Dr. John J. Tuller. The meeting was well attended, quite a number of the members of the teaching staff being present as guests.

PERSONALS: Dr. Leon T. Ashcroft, of Philadelphia, representing the Hahnemann Medical College of Philadelphia, delivered an address on "The Management of Prostatic Hypertrophy" at the meeting of the interstate Homeopathy Medical Society held at Binghamton, N. Y., on October 27th, 1910.

Drs. Clarence Bartlett and O. H. Paxson, clinical professors of medicine respectively, entertained the medical teaching and dispensary staff of the Hahnemann Medical College, Philadelphia, at the Union League on Saturday evening, October 15th, at 9 p. m., some thirty members of the teaching staff being present. Each department in its turn responded to the invitation of Dr. Bartlett who acted as toast-master. Dean of the College, Dr. W. B. Van Lennep, and Prof. O. S. Haines and Dr. W. W. Van Baun, who were guests of honor, responded with addresses as well.

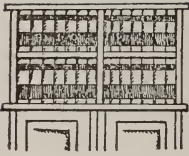
Dr. W. W. Speakman delivered the graduation address at the School for Nurses at the J. Lewis Crozer Homeopathic Hospital and Home for Incurables, at Chester, Pa., on October 27th, 1910.

Dr. Edward M. Gramm, of Philadelphia, it is present confined at the Hahnemann Hospital with an attack of acute rheumatism. It is hoped that in the course of a few days he will again be able to resume his office practice.

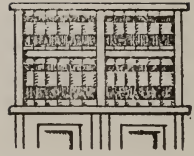
Dr. Ralph Bernstein delivered the graduating address to the School of Nurses of the Wilmington Homeopathic Hospital, at Wilmington, Del., on the evening of October 25th, 1910.

Drs. Joseph H. Smith, John H. Sterner and John S. Herkness, resident physicians at the Hahnemann Hospital, Philadelphia, distinguished themselves by their acts of heroism and bravery at the recent fire close in the neighborhood of the Hospital by having respectively rescued firemen and others from burning buildings which as well threatened to fire the Hospital. Their demonstrations of heroism thrilled thousands of the onlookers to cheers and electrified the crowds upon the streets. The doctors, after rescuing the individuals in question, carried their patients upon their shoulders to the hospital building a quarter of a block away because of the fact that the ambulances were not within easy reach. The Hahnemann Hospital is surely proud to have such men upon its staff, again demonstrating that physicians as well can do heroic work outside of their medical profession.

RALPH BERNSTEIN.



NEW MEDICAL BOOKS



CONTAGIOUS, .CONSTITUTIONAL AND BLOOD DISEASES. By A. L. Blackwood, M. D., Professor Clinical Medicine and Materia Medica in the Hahnemann College and Hospital, Chicago. Author of "A Manual of Materia Medica, Therapeutics and Pharmacology," "Diseases of the Heart," "Diseases of the Lungs," "Diseases of the Liver, Pancreas and Ductless Glands" and "The Food Tract, Its Ailments and Diseases of the Peritoneum." 367 pages. Cloth, \$1.75. Postage, 10 cents. Philadelphia, Boericke & Tafel. 1910.

The foregoing is, characteristically, a Blackwood book and what we mean by that is, it covers the subject of its title in a concise and comprehensive manner. Dr. Blackwood's contribution to medical literature comprises a number of valuable if not overly voluminous volumes and in the little work under consideration has undertaken the task of outlining the most advanced methods of managing contagious, constitutional and blood diseases.

Treatment, both prophylactic and medicinal, etiology, pathology, symptoms, with differential diagnosis of the different disease under consideration, have all received due attention in a very practical and progressive manner by the author. The book will prove valuable as an additional unit to the best selected library.



AN EXPOSITION OF THE HOMEOPATHIC LAW OF CURE, by D. N. Ray, M. D., L. S. A. (London). Formerly attending physician to the dispensary of New York Homeopathic Medical College and Wilson Mission Dispensary, New York; author of "A Treatise on Cholera and Its Kindred Diseases;" "Plague and Its Preventive and Curative Treatment;" Member of the American Institute of Homeopathy. The Elm Press, 63 Beadon Street, Calcutta, India, 1910.

* In this work the author has assigned himself the task of reviewing Hahnemann's Organon, and while this of itself is somewhat of an undertaking, yet a careful perusal of its pages will reveal to the reader a work remarkably well done and will amply repay one the trouble and time taken in looking over its pages.

Unfortunately the book abounds in typographical and other errors which would not be tolerated in this country, inasmuch, however, as these

are collected under the convenient heading of "Errata" in the back of the book, this drawback is overcome to a considerable extent.

Taken altogether, however, the book is a delightful piece of literature, and we thank the author for his courtesy in sending us a copy direct from his own hands.



DIAGNOSIS OF SYPHILIS, by George R. Marlsby, M. D. Professor of Medicine, Cincinnati Polyclinic and Post Graduate School; author of a "Text Book on the Practice of Medicine," and monographs on "Treatment of Tuberculosis," "The Rheumatisms," "The Septic Infections," "Meningitis," (in Wood's "Reference Handbook of the Medical Sciences"), member of the Academy of Sciences, Cincinnati, The American Medical Association, the Cincinnati Obstetrical Society, etc., etc. Cincinnati. Harvey Publishing Co., 1911.

In his preface the author concludes as follows: "In this work the subject is considered from various standpoints. First, attention is paid to laboratory diagnosis, special stress being placed upon the methods of recognition of the spirochete pallida, and the technic and relative value of the Wassermann and other serum tests. Second, hereditary syphilis has received ample consideration. Third, the acquired form of syphilis is discussed in its various stages. Fourth, the syphilitic affections of the various organs has received detailed description. Fifth, there is appended an extensive recent bibliography bearing upon the subject."



HANDBOOK ON REGIONAL ANATOMY, by Francis C. Ford, A. B., M. D. University of Michigan; Professor Anatomy, Head of the Department of Anatomy and Senior Demonstrator of Anatomy in the Hahnemann Medical College and Hospital, of Chicago, and in the Littlejohn College and Hospital; Member of the Chicago Anatomical Association, etc. Francis C. Ford, Chicago, 1910

READING NOTICES

AN INTERESTING CHART. Battle & Co. of St. Louis have just issued No. 14 of their series of Charts on Dislocations. This series forms a most valuable and interesting addition to any physician's library. They will be sent free of charge on application, and back numbers will also be supplied. If you have missed any of these numbers, write Battle & Co. for them.

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ANTIPHLOGISTINE. Pope said: "The learn'd reflect on what before they knew." As the winter approaches, conditions prevalent with the season will present themselves for the consideration of the physician. At this time it might be well to recall that Antiphlogistine, applied thick and hot, will offer unmeasurable relief in those cases of bronchitis, tonsillitis, laryngitis, pleurisy and other throat and chest affections you will be called upon to treat. Satisfactory therapeutic results invariably follow the application of Antiphlogistine and to guard against substitution, it is well to specify an original package, thus protecting your patient as well as yourself.

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THROW BACK THE INVADING HOST. Tubercular processes generally seize the favorable opportunity of reduced resistance following a pneumonia or other acute lung disease, to fasten themselves on the patient. In these instances the value of prevention is inestimable. It lies in so charging the tissues with added powers of resistance that tubercular infection is successfully combatted. Not alone by good feeding and right living is this done. The requisite is the selection of a *suitable tissue food*, a food that is taken up quickly and that adds tone and strength to tissues. Cord. Ext. Ol. Morrhuæ Comp. (Hagee) for this purpose is not approached. It contains in easily assimilated form the very nutritious elements urgently needed by the depleted tissues to enhance their powers of resistance and give them strength "to throw back the invading host."

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THE HYPODERMATIC TABLET AS AN EMERGENCY AGENT.

If there is one class of therapeutic agents which more than another should be chosen with discretion and judgment, the hypodermatic tablet represents that class. When he administers a preparation hypodermatically the physician wants prompt action, and he wants to be certain that he is going to get it. To have that assurance he must use a tablet that is active, that has definite strength, that dissolves promptly and wholly. Cheap tablets, poorly made tablets, tablets concerning which there is the slightest doubt as to medicinal quality, may well be left alone. And there is no need to err in the matter of selection. Hypodermatic tablets of the better sort are easily obtainable. Perhaps the brand which comes most readily to mind is the brand which is exploited so extensively to physicians under the familiar caption of "Five Seconds by the Watch." The makers, it is hardly necessary to add, are Messrs. Parke, Davis & Co., who guarantee their hypodermatic tablets unequivocally as to purity, solubility, activity and stability.

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A THERAPEUTIC MANSTAY. The distinct and definite therapeutic value of iron, in anemic and chlorotic conditions and as a general tonic in systemic devitalization from whatever cause, is one of the cer-

tainties of medicine that modern scepticism and therapeutic nihilism cannot deny or controvert. The only difference of opinion is as to the best method of administering this metal and as to the most generally eligible preparation of same. Modern pharmaceutical skill has replaced the tincture of the olden times, prepared from iron filings, with the non-irritant and thoroughly tolerable combinations with organic substances. None of these products have proved as generally acceptable, promptly assimilable or therapeutically efficient as Pepto-Mangan (Gude), the first and best preparation of the peptonates of iron and manganese in organo-plastic form. Its remedial value is unquestioned and unquestionable. It is suitable for administration to patients of all ages. It is thoroughly palatable and acceptable. It does not irritate the gastric mucous membrane or disturb the digestion. It does not induce constipation. Pepto-Mangan (Gude) rapidly restores oxygenating power to the circulating fluid and fulfils every possible therapeutic indication that can reasonably be expected of it.

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AN UNCONVENTIONAL COUGH SYRUP. There are "cough syrups" without end. Some of them, it is needless to say, have little or no therapeutic value. Conversely, there are some that no physician need hesitate to prescribe. One of these—Syrup Cocillana Compound (P. D. & Co.)—is so exceptional in many particulars as to be worthy of special mention just now, when coughs are so plentifully in evidence. By its name no one would recognize it as a preparation for "coughs" and "colds," and this, in connection with its general efficiency, constitutes one of its chief claims to distinction. It is a product which the layman knows nothing about. It does not encourage counter-prescription or self-medication. It was designed especially with reference to the needs of the prescriptionist.

The formula of Syrup Cocillana Compound, which, of course, is plainly printed on the label, is quite unusual. Let us briefly consider its components: Euphorbia pulifera—serviceable in the treatment of chronic bronchitis and emphyseata; wild lettuce—a mild and harmless narcotic, useful in spasmodic and irritable coughs; cocillana—valuable expectorant, tonic and laxative; exerts an influence on the respiratory organs similar to that of ipecac; syrup squill compound—serviceable in subacute or chronic bronchitis, as an expectorant; and as an emetic in croup; cascara—the bitter glucoside of cascara sagrada, useful for its laxative action; heroin hydrochloride—a derivative of morphine and extensively prescribed in the treatment of cough, especially of bronchial origin; menthol—stimulant, refrigerant, carminative and antiseptic, serviceable in coughs and pharyngeal origin.

Syrup Cocillana Compound would seem to be worthy of extensive prescription.

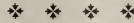
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A TRIUMPH IN PILL-MAKING. Parke, Davis & Co. confess that their soft-mass pill, which is now receiving so much favorable attention from the medical world, was for a long time a "hard nut" to crack. They had set out to produce by the soft-mass process a pill that should be a credit to their house and to manufacturing pharmacy. The task at first seemed simple enough. Here, as elsewhere, theory and practice were at variance. As a matter of fact, a good deal of experimentation had to be done. Time was consumed. Money was expended. In the end, of course, ingenuity triumphed.

In structure the soft-mass pill, as manufactured by Parke, Davis & Co., consists of a plastic mass encompassed by a thin, soluble chocolate coating. It may be flattened between the thumb and finger like a piece of putty. An important advantage of the soft-mass pill is the readiness with which it dissolves or disintegrates in the digestive tract. Another

commendable feature is that, no heat being applied in the process, such volatile substances as camphor, the valerianates, the essential oils, etc., are not dissipated, so that any pill embodying one or more of these substances may be depended upon to contain just what the label says it contains.

Parke, Davis & Co. are putting out close to thirty formulas by the soft-mass process—all of them listed, we believe, in advertisements now appearing quite generally in the medical press. Practitioners under whose eyes these announcements do not happen to fall may profitably write the company, at its home offices in Detroit, for a copy of a recently issued folder on "Soft-Mass Pills," which contains titles and complete formulas of all the pills now manufactured by Parke, Davis & Co. under the process referred to, together with some other important information.



THE DIFFERENCE BETWEEN MORPHINE AND CODEINE AND HEROIN. A short time ago the Board of Health of the city of New York promulgated an ordinance providing that "No cocaine or salt of cocaine, and no morphine or salt of morphine, either alone or in combination with other substances, shall be sold at retail by any person in the city of New York, except upon the prescription of a physician." Immediately every druggist in the city stopped the sale of all preparations containing any derivative of opium and raised such a furore that the Acting Commissioner of the Board of Health felt called upon to explain what every druggist ought to have known, viz: that "Heroin and Codeine are not salts of morphine, and therefore are not included in the proscribed list."

In order to make this matter perfectly clear, the following on the subject of opium is submitted for the information of the many who have been laboring under the misapprehension that Codeine and Heroin are salts of opium or of morphine:

Opium, besides wax, fat, glucose, gum, pectin, resin, etc., contains about 20 alkaloids, among them being Morphine, Codeine, Thebaine, Narceine, Papaverine, Pseudo-morphine, Narcotine, etc., all occurring in varying amounts according to the grade of opium. While Morphine is an analgesic, it does not follow that Thebaine is an analgesic simply because it is also derived from opium. One might equally as well say that Acetanilid and Diamond Dyes have similar therapeutic effects, because both are derived from coal tar. Heroin, as is well known to every druggist, is a synthetic preparation and is not an alkaloid of opium. There are no salts of opium; there are active principles or alkaloids from which, by the addition of acids, salts are formed, which become, not salts of opium, but salts of morphine, salts of codeine, etc. All chemists know this and all druggists probably know it, but fear of transgressing the law made the New York druggists take a position contrary to that which their knowledge of chemistry would indicate to be the correct one. Codeine and Heroin are not salts, either of opium or of morphine, the one being an active principle, and the other a synthetic compound. Furthermore, Morphine and Codeine have widely different properties; Codeine being entirely devoid of the evil effects of Morphine, not locking up the secretions or causing constipation; and the Codeine habit is a thing unknown in medical literature. In fact, all authorities agree that Codeine does not create habit.

From all the above we glean the following facts:

1. Opium and derivatives of Opium, except Morphine and its salts, are not in the proscribed list under the regulation of the New York Board of Health.
2. Codeine and Heroin are not salts of Opium.
3. Codeine and Heroin are not salts of Morphine.—*Apothecary and New England Druggist*, October, 1910.

