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**HERING QUARTERLY**

Devoted to Hahnemannian Homeopathy.



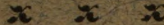
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Exchange Editors.



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# The Hering Quarterly,

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# The Hering Quarterly.

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## EDITORIAL.

THE HERING QUARTERLY is issued in response to an ever increasing demand for further knowledge of the true philosophy of Homeopathy. Many so-called homeopaths, whose honesty and sincerity are not doubted believe that they get better results by alternating two or more remedies, by using combination tablets, or by giving crude drugs in massive doses. This lamentable belief exists because they have never learned a better way; have never learned the use of the smallest possible dose of the single, similar remedy, accurately applied. To a limited degree, no doubt, they prescribe on the law of similars, which they not only believe, but know to be true. But they do not take the case as did Hahnemann and his earlier disciples, hence are unable to differentiate closely enough and dare not rely upon this single remedy. They do not commence at the beginning of the problem—the anamnesis—correctly, and, as a consequence, are always laboring under difficulties.

Furthermore, in giving crude drugs in this uncertain way several doses are usually necessary to obtain a curative result. If, however, the remedy were carefully selected, and one of the potencies given, the same curative result would be obtained more quickly, more gently, and the cure would be much more permanent, for the system would not be burdened with secondary drug effects which often cause much suffering during their elimination.

The aim of the QUARTERLY will be so to present this philosophy that the pathway in a more correct, scientific and successful application of the similar remedy may be made. It will aim to illustrate true Homeopathy, with actual clinical cases, and to enable those who are hesitating between a mixed and a better practice, who are weak in the faith of the pioneers to do better work; to strengthen and encourage those already at work, and help them to select the similimum.

The QUARTERLY will further serve as a means of communication among the practitioners of pure Homeopathy, as well as the members of the faculty, the alumni and the students of Hering Medical College, and give opportunity for reporting clinical experience, the proving of remedies, the verification of characteristic symptoms and the interchange of opinion. Articles and personal notes will be gladly welcomed.

## THE DOCTRINE OF HEREDITY: WHAT POSITION SHOULD IT TAKE IN THE ANAMNESIS?

BY E. O. RICHBERG.

A prominent place in the front row, we reply, among the nearest and dearest relatives—whether the medical affair promises to be a wedding anniversary of Health and Happiness or to precede a burial.

Are we not rightly taught that a physician should know all things within his reach, and, above all else should be able to recognize what is curable? We need not here quibble as to the possibility of such knowledge in all cases and under all conditions; but accept the general proposition as subject to a modicum of doubt. Admitted, then, that he should be able to recognize the incurable and to distinguish it from the curable; can we doubt that heredity is a potent factor in forming this opinion?

Is a physician not warranted in assuming a more hopeful attitude and extending more encouragement to the patient and his friends if, upon seeking the cause for severe lung, heart, brain or kidney affection, he find no probability of inheritance in that direction? And is he not justified in a more guarded prognosis if, lurking behind an apparently insignificant warning, inflammatory or otherwise, he discover a highly probable sowing of certain death-breeding seeds?

Again, "Removal of the Cause" should precede all other remedial efforts, and is not an inherited taint often, the entire background of our disease-picture? Its real origin? The "Fundamental cause" upon which the disease-structure is built and rests? (*Organon* ¶ 5.) As such it is certainly a most essential element not only in diagnosing and prognosing but also in making a suitable homeopathic prescription.

"Prescribe on the symptoms is still the rule," says the Great Teacher of Medicinal Cures; but, he also says (¶ 82 *Organon*) and very pointedly, "Although by the discovery of the *specific homeopathic remedies* for the Psora—inherited source of many chronic diseases—medicine has advanced some steps nearer to a knowledge of the nature of the majority of the cases it has to cure,"—then follow the usual directions as to individualization.

Does he not herein more than infer that psoric conditions are symptoms to be included as such and at their full value in the anamnesis; and that one may at least hope to find the desired similia among the antipsorics?

"A symptom is any deviation from the normal." Is a heart, skin or brain lesion less a symptom because of its being pathologic or inherited? If any abnormal condition exists, it is a symptom, whether it be inherited or acquired, pathologic or not; and through a recognition of its existence in a parent, its presence may be more readily traced in the off-spring, thus aiding in the selection of a remedial agent.

True it is that the last symptoms to manifest are the first to disappear in the natural order of a homeopathic cure; equally true that this cure is

always from within—from center to circumference. What has most violently disturbed this life-directing Dynamis—this central power? *The inherited taint!* The tone which violated the harmony of its vibrations at or before birth. Heredity to the front row by all means!

We will not question that heredity seems to be a more important factor in diagnosing than in prescribing—but is it?

Are we not, as homeopathic physicians, in some danger of swinging too far in the opposite direction, in the light of our later-day radicalism; of ignoring heredity and pathology rather than restricting them to their rightful places of power, as aids in prescribing as well as in diagnosis? Let us not be Cranks; but temper our enthusiasm with cool, reasonable consideration of all sides of every question, remembering that there is yet, much to be learned respecting the best application of this unequalled Law of Cure; and that we must continue to grow with it, not to cramp its sphere of usefulness. It cannot be killed; but it may be temporarily dwarfed by the too enthusiastic clutch of its lovers.

There may be other conditions which should also be weighed; but heredity often supplies the key which unlocks the medicine case to the benefit of both patient and doctor; for the less annoying heart or brain symptoms may indicate the better remedy, being suggested or re-inforced by a (probably) inherited taint, and we may thus have the satisfaction of seeing (apparently) Lachesis symptoms quickly subside before the advance of Nature's own forces, led and inspired by a constitutional remedy—Cactus, Apis, Digitalis, Helleborus, whatever it may happen to be.

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## THE ADMINISTRATION OF ANAESTHETICS.

BY JAMES A. BOFFIN.

In all major operative surgery, general anaesthesia is indispensable. The consideration, therefore, in a general way, of the administration of anaesthetics, cannot fail to be as interesting as it is important. The subject is one which should be approached soberly and thoughtfully as well as scientifically; for whatever the chances for or against the patient as a result of the operation, his life, before, during, and for some time after is primarily in the hands of the one who has shouldered the responsibility of anaesthetizing him. In view of this we should lay aside all levity, and bring home to ourselves, in order to appreciate it aright, that which we have now before us. He who is unable to take a serious view of the matter, or thinks it unnecessary so to do, would be wise to abandon at once its contemplation.

It is not the purpose of this paper to discuss the advantages or disadvantages of various anaesthetics, but rather to give a few cardinal points which should never be lost sight of in connection with their use—chloroform and ether, however, being chiefly in mind. As a preliminary pro-

cedure and one no less than imperative, the patient should be thoroughly examined. The heart, lungs, respiratory passages, and kidneys should receive special and most careful attention.

A urinalysis should always be made, the findings throughout, in most cases, determining the anaesthetic to be used. It is known, for instance, that ether affects the respiratory organs, producing no little irritation throughout the entire tract; therefore should these be diseased or in a questionable condition, other things being equal, chloroform should be chosen. Ether should be ruled out should this examination show an existing nephritis. It is, however, generally conceded that, whenever possible, ether should always be used, nitrous oxide or chloroform being selected to induce narcosis only. Laxity in making the initial examination is unpardonable.

Approach the task with the utmost coolness and deliberation. Prepare everything for the undertaking thoroughly and conscientiously, never losing sight of the fact that we are about to suspend by a mere thread the patient's life.

Provide suitable articles for the simple administration of the anaesthetic; e. g., mask, cone, or other suitable inhaler, and, if using chloroform, a reliable "dropper." Have at hand gauze sponges, a towel or two, and a small basin; in case of vomiting, which is very liable to occur, these things will be needed.

Never give an anaesthetic without having in perfect readiness means for resuscitating the patient—his condition may become critical at any time—it is criminal to neglect taking these precautions.

Provide, therefore, tongue forceps, mouth gag, rectal speculum, hypodermic syringe loaded with a suitable cardiac stimulant, amyl nitrite oxygen when and where it can be had. The timely and intelligent employment of such things may save a life.

Before being anaesthetized, the patient should be properly prepared. To this end, see that no food is allowed for at least six hours before the operation, induce evacuation of the bowels, and immediately prior to the operation see that the bladder is empty. Do not overlook the removal of artificial teeth or dental plate of any kind. Have the patient warmly clothed, but loosely, so that nothing interferes with the free circulation of the blood. Have nothing tight anywhere, remember that the heart will be laboring. Never anaesthetize the patient in a stuffy, vitiated atmosphere—provide adequate ventilation. When we first take charge of the patient it is essential that we should be left alone with him. Take him to a room or anteroom apart, having, however, within immediate summons the necessary assistance should help be required. On no account commence the anaesthetic in a crowded room or amphitheatre, or in any noise whatever; inevitable distraction of the patient will be the result, prolonging, in consequence, the first stage, and masking the true state present. For this

reason an effort should be made to ensure the proper environment in which to commence the work.

Never attempt general anaesthesia with the patient in any other position than the horizontal one—the head on a level with the body. If a pillow is allowed for the comfort of the patient, remove it at the earliest possible moment. Provision should be made for keeping the patient both day and warm, as the temperature of the body is always lowered during anaesthesia. Be careful to see that the position of the patient is such as will afford the necessary freedom of the air passages; to facilitate this, a small pad may be placed between the shoulders and underneath the neck. The arms should be loosely, but firmly secured; if the nature of the operation will permit, fold them across the chest and confine in this position. To prevent irritation of the face from the anaesthetic, anoint the lips, nose and surrounding parts with vaseline or cold cream, and, with a towel cover the eyes to protect the conjunctive. Finally, before commencing the anaesthetic, gain the patient's confidence and allay his fears.

Always commence giving the anaesthetic very slowly. The first few whiffs of the anaesthetic may be disagreeable to the patient. Reassure him, and instruct him to breath regularly and deeply and to relax generally; in addition he may be asked to count aloud slowly. At first allow a free admixture of atmospheric air with the anaesthetic; closely watch the character of the breathing; get the pulse at once, either at the facial or temporal artery, and note its pulsations throughout the whole period. Remember that irritation of the vagus nerve, through irritation of the respiratory tract, may cause inhibition of the heart's action; this is reflex, and may take place early, during the first stage. Very gradually concentrate the vapor, therefore, and carry your patient carefully and slowly into the second stage.

Should the patient struggle, slightly suspend the anaesthetic, for the exertion is an extra tax upon the heart, and should he hold his breath, remove it entirely on account of the deep inspiration which is about to follow. Use great judgement during the first stage; never hurry it.

Should mucus collect in the mouth or nose, take a piece of gauze and sponge it away. Bring the lower jaw forward keeping the lower teeth anterior to the upper ones; this prevents the tongue from falling upon the epiglottis. Should there be incoherent or foolish talking, remember that this is the first evidence we have of the paralysis taking place in the nerve centres in the cerebrum. With most patients, rigidity of the muscles follows and is a common symptom of chloroform narcosis, marking the moment when communication between the nerve centres and the muscles is about to be cut off as anaesthesia deepens. From here, the patient quickly reaches the second stage, which is characterized by relaxation and loss of tissue control, but with the reflexes still present. This is not surgical anaesthesia, but the stage of semi-consciousness, in which, remember, it is considered dangerous to operate.



The most important reflexes which are markedly present in the second stage are: the pharyngeal, or reflex deglutition; the conjunctival or reflex winking of the lower eyelid when the margin of the upper is touched; and the deep pupillary reflex, where the iris reacts upon the influence of light. These together with the respiration and the pulse and the color of the skin, are the all-important landmarks; any carelessness, therefore, or failure on the part of the anaesthetist to vigilantly and attentively observe their condition and behavior must be accounted as criminal negligence. Through this, the second stage, the patient should, however, be passed with reasonable dispatch. Crowd the anaesthetic, but with the greatest care, and bring him skillfully to the point of complete anaesthesia. This is the third stage where the reflexes are held suspended, and where the patient is ready for operation.

The condition now present should be understood. Extensive temporary paralysis has overtaken the cerebrum as evidenced by the succumbing, one after the other, of functional activities, which have their centres there. The inhibitory power over the reflex activity of the sympathetic nervous system, has also ceased to exert its function. The sympathetic nervous system, therefore, and the centres in the medulla oblongata must now be considered the chief, if not the only, caretakers of the patient. For this reason, all the senses of the anaesthetist must be keenly on the alert, and the most rigid watchfulness must be maintained. The sympathetic nervous system, together with the centres in the medulla oblongata, are the last to succumb; when they do, respiration ceases, blood stasis supervenes, and the inherent organic ganglia of the heart shares in the general paralysis. The skill of the anaesthetist is now to be tested. The patient is extremely nicely balanced. Maintain this equipoise. Do not plunge him into profound anaesthesia, nor on the other hand, let him drift out towards semi-consciousness. Watch everything connected with the work, nothing that may be going on around us. Listen to the breathing, satisfy ourselves as to its regularity. Mentally record every pulse beat. Note the capillary circulation, it should be good. The deep pupillary reflex, as all others, is in suspension, the iris contracted, mark its behavior very closely. Assistants should observe the temperature; if the patient becomes cold, warm blankets should be in readiness with which to cover him, also, if necessary, the temperature of the surrounding atmosphere should, at the same time, be properly raised.

Danger signs: Bearing in mind the temporary paralysis of nerve centres in the cerebrum, the signs of impending danger should be readily appreciated and a more correct estimate should be placed upon them. Stertorous breathing marks the ushering in of profound anaesthesia. The zone of cerebral paralysis is extending, for, through their centres which have hitherto been unreached, the ramifications of the large posterior palatine nerve are now becoming affected. The depth of anaesthesia thus indicated, though not exactly dangerous, is unnecessary, therefore, be governed accordingly.

Should the pupils dilate without the superficial reflexes returning, the patient is in imminent danger, stop the anaesthetic at once and be ready for action. If the capillary circulation is poor and the patient assuming a cyanotic appearance, this also is ominous. Irregular or intermittent breathing, with actual cessation of the respiratory function demands prompt attention; deliver at once a few sharp blows upon the chest or compress the epigastric region a few times, this will cause the patient to take a deep inspiration which will immediately improve his condition. An irregular, or very rapid pulse is a positive sign of danger. When it reaches 130-140 beats per minute, adopt measures to ensure the safety of the patient; the timely injection of hot normal salt solution may suffice.

Resuscitation: Again keeping in mind the process that has been going on in the cerebral nerve centres, the methods used to resuscitate a patient who has succumbed to the effects of an anaesthetic must be primarily adapted to the condition to be found there. In general anaesthesia, such as that produced by chloroform or ether, it seems clear that after the brief period of stimulation, the symptoms all point to a depression of the nervous system.

In successive steps one function after another is suspended, and these all have their centres in the cerebrum. It is further evident that the patient, although completely anaesthetized, is maintained in a condition occasioning no alarm by those functions which have their centres in the medulla oblongata.

The vaso-motor and respiratory systems, though doubtless taxed to their utmost, are still able to functionate normally. It is when their centres are reached that collapse of all the vital powers swiftly supervenes. The vaso-motor centres are the first to be affected and this is followed at once by the disorganization of the entire circulatory mechanism. The rhythmic contraction and dilatation of the vessels ceases, due to the paralysis which has overtaken the vaso-constrictor and vaso-dilator nerves. In consequence, we have an immediate blood stasis. The right heart is suddenly deprived of its normal volume of blood, and the left ventricle has discharged its last into the already unresisting aorta,—an ominous silence pervades the whole organism.

Respiration, however, may yet be feebly continued, for the respiratory centres, situated in the lower part of the medulla, are still resisting the paralyzing influence of their environment. Surely this is a moment imperatively calling for immediate, concerted, and intelligent action!

From the foregoing remarks, no difficulty ought to be encountered in comprehending the wisdom and aim and purpose of Nelaton's method of resuscitation. This consists in inverting the patient. It should be resorted to first and immediately.

Two theories exist as to what proves salutary from its procedure. The brain is suddenly flushed with gravitating blood. Whether this brings, as is asserted by some, relief to the devitalized nerve centres or not, is perhaps a debatable question. It is also true, that, by the same means, the

blood in the large veins below the diaphragm gravitates towards, and is emptied into the right heart. Whether this causes, as is claimed by others, a cardiac contraction may in its turn be open to discussion. Be this as it may, invert your patient. Simultaneously, Sylvester's method of artificial respiration should be diligently persisted in, having previously opened the mouth and drawn out the tongue to free the air passages. Amyl nitrite, whose sphere of action is especially the vaso-motor system of nerves, is here most appropriate, as it acts promptly and powerfully, calling into action the latent power of the vaso-motor centres, which, in turn, excite circulatory activity.

Success the heart through the chest walls, or endeavor to arouse it to activity by applying cloths wrung out of hot water to the precordia.

Promptly give a suitable cardiac stimulant hypodermically. Rectal injections of hot normal salt solution should also be resorted to. As previously stated, artificial respiration should at once be begun and perseveringly continued. By acting reflexly on the respiratory centres, stretching the sphincter ani may be followed by resumed breathing. Compressing the chest walls, or flicking the chest with a wet towel may also bring about the same result. Forced respiration and its superiority over the ordinary methods, has been recommended by Dr. H. C. Wood before the Berlin Congress of 1890. A special apparatus is required, but this being simple in arrangement, there is no reason why, in hospitals at least, it should not be on hand. A tank of oxygen should be in every operating room and ready for use. As an extreme measure, when every other means has failed, make an incision in the epigastric region and massage the heart directly through the diaphragm.

Should success attend these efforts and the patient be brought back to semi-consciousness, a further word of warning will be necessary. In recommencing the anaesthetic be more than ever, extremely careful. Administer the vapor well diluted with air, and very slowly, and on no account let the patient go on to profound anaesthesia. Throughout all the work, exercise every faculty and pay the strictest attention to the patient's condition every moment. Anticipate his needs. Absolute coolness and self-possession are necessary and, the power to think with precision and to act with dispatch. Finally let us see that we are in no wise lacking that finer instinct "regard for life," and remember, that through inattention or carelessness on our part, we may, in an unguarded moment, weigh out death to our patient. Let us take heed therefore to ourselves.

## THE DYNAMIC LABORATORY.

BY D. N. GUPTA.

Truth was, is, and shall ever be. In other words, what was found to be true in past ages, is just the same in our time, and shall certainly be so during the years to come. The peculiar thing is that nature always keeps it slightly covered so that it can only be reached by one's ever patient and unflinching effort. This has kept many an intellectual but impatient worker away from it. Failure always ends in either encouraging the party concerned to try once more or to render him dejected once for all, which is generally the case. Dejection leads us to various doubts and questions concerning the truth itself, some of which are as follows:—

I. If it is true, why are we not convinced of it?

II. Are we not intelligent enough to see it?

III. If it was true, why did it fail to stand our laboratory test? Do we not subject every new theory and discovery to our laboratory test and convince the world that whatever we claim to be true stands to reason?

IV. Well! If truth is truth, how is it that we find many a time the espousers of it making some modifications in it when they explain it?

Such and many other doubts are being raised by many of us who have not been lucky enough to get the light of truth.

Truth is to be sought for from within and with the greatest effort. Others can only guide one to the truth, but cannot uncover it. By way of illustration, a friend of mine, who is a graduate of the old school, once took Hahnemann's Organon and read it within twenty-four hours because he was quite familiar with the medical language, and began to pass judgement on Homeopathy. Intellectual as he is, he merely befooled himself by pretending to be a judge of a new principle without being fully conversant with it.

Hahnemann says: "If you want to have an ideal cure for your patients pick up the symptoms which might not be appearing strange to them." How are we to do this? Just by tracing the disease to its cause and removing it. Let us see, therefore, what made my friend commit this blunder.

Prejudice and egoism were the only things that kept him from seeing the truth. Heart, according to the Hindoo philosophy, is the mirror on which alone the spiritual light falls first and then is reflected to us. In my friend's case the first obstruction, prejudice, hung like a dark curtain before his mirror-heart, and disabled it from getting the light. He could, therefore, have got a very faint idea of what he read for 24 hours. Unfortunately this idea, faint as it was, could not remain there permanently because of the unsteady state of the mirror-heart, owing to the second obstruction, egoism. A few words by way of answer to the doubts of the dejected, mentioned above:

I. Truth is truth and must always be, yet many are not convinced of it either because they fail to see it or if they see it they cannot grasp it.

II. Some are, indeed, intelligent enough to see it but owing to some

disorder either on the physical or the dynamic ground they receive two images at a time from the same object.

III. Yes, the theories are being subjected to laboratories for examination. But since there are two kinds of objects, mechanical or material and dynamic or spiritual, there should necessarily be two kinds of laboratories, each having its own class of objects to examine.

The truth of Homeopathy is dynamic in nature and should, therefore, be subjected to the dynamic laboratory. Every laboratory has to fulfill two most important conditions in order to have a satisfactory result, first the measuring glasses, must be quite clear and transparent, and secondly the hands of the examiner must always be steady. In other words transparency and steadiness must always be the guides of those who are on the way to truth. In the dynamic laboratory nothing but the heart can represent the measuring glass and therefore, seekers of dynamic truth must have their hearts clear and steady before they proceed toward it. In ¶ 16 of the "Organon of the Art of Healing," the immortal homeopath says that it is the dynamic force of the disease-producing agent which alone can affect our vital force, and it is the dynamic power of disease-curing agent that alone can help the vital force to throw off the natural disease. Hence what we have to do, for achieving an ideal cure, is to determine the dynamic force of the disease-curing agents and there to apply the law. To have an ideal cure in its true sense, train the dynamic force, i.e. the spiritual side of him who has to use the disease-curing agents. Potentiating our dynamic force is nothing but making our hearts pure and steady

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### PYROGEN.

I have found this remedy invaluable in fevers of septic origin, all forms; when Bap., Ech., Rhus or the best selected remedy fails to relieve or permanently improve, study Pyrogen.

The bed feels hard (Arn.); parts lain on feel sore and bruised (Bapt.); rapid decubitis (Carb. ac.); of septic origin.

Chill:—begins in the back between scapula, severe general coldness of bones and extremities.

Heat: Sudden, skin dry and burning; pulse rapid, small, wiry, 140-170; temp. 103-106°.

Sweat: Cold, clammy, profuse, often offensive, generally exhausting.

Pulse abnormally rapid, out of all proportion to temperature (Lil.).

In septic fevers, especially puerperal, where foetus or secundines have been retained, decomposed; foetus dead for days, black; horribly offensive discharge.

When patient says: "Never been well" since septic fever, or abortion, or a bad confinement.

To arouse vital activity of uterus and enable it to expel its contents.

—Notes from lectures by H. C. Allen.

## THE EARLY POPULARITY OF HOMEOPATHY.

BY G. G. DORRELL, M. D.

President of the Southwestern Missouri Medical Society.

It may be remembered by some of our older members that the early popularity of Homeopathy was due to its presentation to the public. In fact, many physicians adopted the homeopathic methods and remedies, not because they desired to do so, but because they were compelled to do so by the public demand. Many an old school doctor became a homeopath simply because his patients would have it, they having ascertained that there was a method of treating disease by safe and not unpalatable remedies. Whether these were as effective as the older forms is not to the point; the fact remains that it was this public demand which gave general vogue to Homeopathy.

The promoters of the present movement, however, have shown themselves to be orthodox of the orthodox, going so far as to appeal to the subscribers of their medical journals that they shall not allow them to be seen in their waiting rooms where those outside of the profession may have the opportunity to see them. Nevertheless, despite these precautions, the method has spread until more than fifty thousand American physicians are using it to a greater or less extent; and if the matter once comes to the attention of the public it is possible that there may be such an interest aroused that the remainder will be compelled to fall in line and study and practice the new method or be forced into retirement.—*American Journal of Clinical Medicine.*

## HE WHO LAUGHS LAST, LAUGHS BEST.

BY D. N. BANERJEE.

This trite saying may be applied as well in the province of medicine as in any other walk of life.

The physician of the regular school laughs at the sugar-pill man at first. Then he comes across several cases which he pronounces incurable. These patients, as a last resource, try the man with the little pills. And so these incurable (?) cases get well under his treatment. How? Just by a dose or two of the indicated remedy. Who has the laugh now?

The allopathic practitioner will, of course, endeavor to cover all his failings by saying that it was a case of "mistaken diagnosis," and that the patient would have gotten well even if left alone. Undoubtedly it is rather difficult for the allopath to declare himself mistaken in his diagnosis; for if he does not know what is the matter with the patient, how will he be able to treat him? The disease must be named and classified before he can write out a prescription that will cure (?) the patient.

But sometimes it happens that even when there is a clear case, none of the medicines prescribed seem to do any good. This is often seen in the various clinics, one case of which will be sufficient as an illustration.

Mr. J., a man about 40 years of age, had had a constant hemicrania of about ten or twelve year's standing. He had made the rounds of all the clinics in Chicago; everybody had told him that he had hemicrania; but unfortunately none of the medicines given seemed to afford any relief from his sufferings. After he had been almost everywhere, his good angel prompted him to come to Hering, where the same diagnosis was made. He began improving from the first, and was discharged in about a year's time as cured. Three months later he came back again to say that he had been feeling fine, and that he had had *no return* of his pains.

How will the excuse of "mistaken diagnosis" hold good in this case or that the patient would have gotten well without any treatment? There was scarcely a chance of a "mistaken diagnosis" here; as many eminent men had pronounced the same diagnosis; nor is it at all probable that the patient would have gotten well without any treatment after so many years' constant suffering.

In such cases what will the allopaths say? Are not results good enough to convince them of the efficacy of the homeopathic remedies when administered according to the homeopathic law of cure? Yet these men pride themselves on their science and their being scientific men, who are open to conviction and correction.

It is said that doctors are like a flock of sheep, inasmuch as where one leads all the rest will blindly follow. They do not wish to be disturbed in the performance of their routine work, which has in its favor only the law of precedence and the stamp of antiquity.

But let us hope that a time will come in the near future when, in spite of all their blindness, their prejudices will be overborne and they will recognize the only law of cure "*Similia Similibus Curantur.*"

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### WHY?

BY R. H. FARLEY.

Why be a homeopath when you must study all branches taught in the regular schools plus the science of therapeutics?

When as a homeopath you must attend four hundred hours of materia medica lectures to the regular's eighty?

When in practice you must be able to differentiate from five hundred remedies to the regular's few score?

When you must not quiet your patient and your conscience with the hypodermic, but must labor to find the similitum?

When you must individualize, not treat a diagnosis?

When you will be looked down upon by the rank and file of the medical profession?

Why be a regular when your greatest physicians and teachers are avowed skeptics?

When your system changes every decade, and you must take a P. G. every so often in order to "keep up?"

When you must bend the knee in failure before the great array of chronic diseases?

When your lowest mortality rate in all acute diseases does not equal the record made by Homeopathy?

When such a thing as a specific for disease is an impossible dream?

When if your diagnosis be wrong your treatment may kill?

When Osler says, "No one ever claimed that the mortality rate in homeopathic practice was greater than that in the regular school?"

When you must treat diseases, not patients?

When you must often call in a surgeon to take charge of a strictly medicinal disease?

Why?

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A PSORINUM CURE.

Miss X., aged 20, had been suffering with itching of different parts of body without an eruption, every winter for three years. The itch always came on with the beginning of cold weather and disappeared as spring advanced. It was always worse on going to bed, whenever she became excited or overheated and from scratching. The skin was dry and the lower lip always rough and cracked. She had been treated by two practitioners of the regular school during this interval, and both said their remedies were too strong to do her any good.

She received one dose of Psorinum 50m in water, to be taken before supper and at bed time. The itching disappeared excepting when she became excited. Her feet developed chilblains, which she had cured the winter before the itch appeared, by holding them in a bucket of snow. Within a few days this disappeared under the influence of the same dose of medicine.

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**THE DYNAMIZATION OF DRUGS.**

BY E. EARL FREEMAN.

Why do we potentize? and what is gained by potentization?

At the very beginning of the Organon, we are told that the physician's high and only mission is to restore the sick to health.

In every living body, yes in every minute cell of that body we know there is a force which animates every vital function of that cell to action.

The properties of this force, how it animates the Organon, how it is transmitted or how it is exterminated is not known.

As far as known this force has no weight and occupies no space; it has quality but no quantity; it is not material but dynamic.

The harmonious working of this spirit-like or dynamic force within each cell of the body gives that condition known as health.

Disease is caused by a primary derangement of this vital force consequent upon the dynamic influence of some morbid agent which has the power of altering the harmonious working of the vital force.

Hahnemann says: "How the deranged vital force causes the organ-



ism to display morbid phenomena, that is: how the disease is produced it would be of no practical utility to the physician to know: and therefore it will forever remain concealed from him. Only what is necessary for him to know of the disease and what is fully sufficient for enabling him to cure it, has the Lord of life revealed to his senses."

Therefore it will be useless and altogether unnecessary to even try to explain how the dynamic vital force is deranged by the dynamic morbid force of some disease-producing agent. Knowing that the dynamic vital force is deranged and disease, therefore, produced by the action of a dynamic morbid force, does it not appeal to reason that the remedy which is capable of restoring order in the deranged organism must also be dynamic?

Hahnemann recognized this as a fact and discovered the dynamic force of remedies and the method of developing it by dry trituration and fluid succussions.

Homeopathic dynamizations are real awakenings of the medicinal properties that lie dormant in natural bodies during their crude state, which then become capable of acting in almost a spiritual manner upon our life.

Take for instance *Lycopodium* and *Silica*, two substances which in this crude state are inert as far as having any remedial action is concerned. These become, when treated according to the methods of dynamization, most valuable medicinal substances capable of curing diseases of the most chronic nature.

The ordinary black pepper which we use so plentifully to disguise the taste of our noonday lunch will produce the most violent symptoms when dynamized. Any one not knowing this is advised to continue in ignorance for there are times when ignorance is bliss.

The second topic is, why do we potentize our remedies.

The potency question has been and still continues to be the stumbling block in the way of the embracement of Homeopathy.

If homeopathic physicians could use the remedies in massive doses and crude forms and achieve the same results as with the potencies thousands would flock to their standard who now hold them up to scorn.

Why then is it necessary to potentize?

1. We potentize for the purpose of awakening life in the crude material.

2. To develop this awakened or dynamic force of the remedy and place it upon the plane of the dynamic force of the body.

3. In order to affect a cure in the most harmless way possible by eliminating all poisonous or drug effects consequent upon the administration of a remedy in the crude form.

4. In order to secure the minimum dose; for it is evident that the vital force, being deranged by an inconceivably small amount of the morbid agent, is consequently affected by an inconceivably small amount of the remedial substance.

Here we must remember, that no difference how small the amount of remedial agent contained in the potency, the quality is the same.

5. By potentizing we secure remedies reduced to such an extent that after their ingestion, they excite a scarcely observable homeopathic aggravation.

Now having considered why we potentize our remedies let us see what is gained by potentization.

1. By the use of potencies we are able to gain a gentle remedial effect of appropriate intensity to supplant and cure the original disease.

2. The dose of the homeopathically selected remedy cannot be made 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 able to cause some, though slight, preponderance of its own symptoms over those of the disease resembling it.

3. We gain by potentization a number of remedies which are inert in their crude form and by the use of these remedies are enabled to cure a number of diseases which heretofore baffled the medical world.

4. By the use of potentized drugs we are enabled to bring about the highest ideal of cure as set forth in the second paragraph of "the Organon"

5. After a cure brought about by means of the homeopathically selected remedy we find that our patient is spared that disagreeable stage which so often follows the treatment of other schools known as, "recovering from the cure."

#### BELLIS PERENNIS: THE DAISY BREUISWORT.

This member of our traumatic armamentarium holds the same place in domestic practice in England that Arnica did in Germany before it was placed in the list of our polychrests by Hahnemann and his drug-proving pioneers. Like Arnica, Hamamelis, Ruta and others it has in a marked degree:

*Bruised soreness of affected parts* (Arn. Ham.).

*Lameness as if sprained of parts affected* (Rhus.).

*Blueness and soreness of boils on nape* (Arn. j.).

*Sprains of joints with great soreness, sensitive to touch; ecchymosis and swelling* (Led.).

*Venous congestion due to mechanical causes.*

*During pregnancy inability to walk; lame, stiff, bruised sensation in abdominal muscles and pelvic organs, extending down the thighs.*

*The uterus feels sore, bruised; conscious of a womb; it is sore and sensitive* (Helon. Lys.); when Arnica fails to relieve.

*For the traumatism after labor, when Arnica though apparently well selected, fails to relieve the intolerable sensitiveness to touch.*

*Bruised, sore, pelvic nerves, and inability to walk after a difficult or instrumental labor.*

*Ailments from getting wet when overheated.* (Rhus).—Notes from lectures by H. C. Allen.

**THOUGHTS THAT FIT THE HAHNEMANNIAN.**

BY G. C. EMMERSON, M. D.

1. Make Homeopathy king of your professional life.
2. Look into the repertory and materia medica before you prescribe for the case.
3. Read a remedy every day, digest a part of it and grow.
4. The homeopath (?) who fools with combination tablets is fooled to begin with.
5. The philosophy of alternation is part fool-osophy and fall-osophy.
6. The homeopath who is faithful in his anamnesis will be sure to find the similimum.
7. Three things are necessary: Time to take the case, of which one man has as much as another; skill, of which every man has a little; and the similimum, which cures according to the law.
8. Some homeopaths sell their knowledge to the regular so-called scientific school, for a high price, expecting to buy it back at a great reduction.
9. The doctor who believes in getting all he can of anything that is free should get all he can of Homeopathy. It is free except for the time and labor.
10. It is just as easy to believe that tomorrow you will have health, wealth, happiness and knowledge of the indicated remedy as to believe that you will be puny, poor, discontent and ignorant of your combination tablets. What you believe will be easy of achievement.
11. Combination tablets must hunt the company they love. The indicated remedy draws unto itself desirable company without that affect.
12. Yes, there are homeopaths in the profession; but they have nothing of what the profession stands for in them.

**HARMONY.**

BY D. SHUNKER, B. A..

[Part of an Essay on "Homeopathy and the Study of Nature."]

It is equally interesting to be a child of Nature and play with Nature in its simplicity—making useful observations with the sagacity of a child and as Wordsworth expresses it, merely collecting marbles on the shore of the great ocean of Wisdom.

The striking feature seems to be the potent factor of Harmony. It is the one element pervading throughout nature. It is a difficult proposition to prove the why and wherefore of it. Nature came out of chaos and so did Harmony. The latter seems to be an inseparable constituent of the former.

Nature is the similitude of the different laws, which in view of their being subservient to each other, work in harmony. In other words, Harmony is the great balance between the different phases of the phys-

ico-dynamical manifestations of Nature in the universe. It is an element which lets no aspect of nature work quite in conjunction with the other under the appropriate conditions. The question necessarily arises whether Harmony is the causation which keeps Nature in equilibrium, or is it the Nature herself who, by the virtue of her intrinsic element, produces Harmony as a consequence. Whichever it may be, Nature is characterized by Harmony.

Harmony is the continuity of matter or spirit towards its generic element in suitable environments, attended with salutary results and without any physical or dynamical obstruction being shown in its flow. It is the perfect contiguity that knows no break. A re-echo of calmness and smoothness—the unity which binds the two together. It is the Harmony which makes a poet say: Nature is Harmony. The sweet melody of the Nightingale in spring, carried in vibrations by the fragrant breeze, stirs up the purple hue of the blooming rose and a harmonious reflex is the result, as shown in the uncontrollable æsthetical thrills of joy in the bird, being more sentient than the rose. The sound vibrations and the light waves join in unity, in consequence of Harmony, the full response of light towards sound merges along with the paramount Harmony of Nature.

The legends of the east oftentimes amuse us by tales of the great musicians of bygone ages. They used to stir up even inanimate objects by the instrumentality of their unique music. They struck that note of harmony which met with wonderful response from crude nature. The wild beasts of the jungle thronged at times around the music—the symbol of harmony, and enjoyed in their beastly capacity the sweet note which touched Nature's heart.

The advance of present science and civilization may turn its back and sneer at the idea, yet these are facts, as true as any other proven problems. There is no mystery about it. It is no myth. The vibrations of the sound produced are based on a scientific group of notes that are quite in harmony with Nature. Hence they brought forth stirring feelings in her objects, whether animate or inanimate. Yet with all this it is an every day experience in India to see the most deadly, horrible looking, poisonous snakes bowed down and charmed under the influence of the peculiar sweet note of a special instrument full of harmony. This is why Nature's harmony is best manifested in the art of music.

Throughout the universe atom works in harmony with atom and fibre with fibre. It is, in a way, the cement of the whole universe. If this cement of harmony were not present the whole universe would, in a twinkling, be a mere heap of confusion.

The human body is perfect in order when the different parts of its mechanism are working quite in harmony with each other. The stomach, spleen, liver, kidneys, heart, lungs, and last, but not the least, brain, are harmonious in their functions, and have equal regard for each other, and still each is subservient to the others. The lungs

should so oxygenize the blood as not to throw extra burdens upon the liver or the kidneys. The heart must keep pace with the supply for the whole system. The stomach and digestive tract should provide nutrition for the combustion going on throughout the body. The process of repair must go hand in hand with that of waste, and then again, every organ should not lose sight of its governor, the brain, and must obey orders issued therefrom, with only one condition, Harmony. The balance or equilibrium is kept up by the electricity of the vital force. The harmonious working of the vital force is health. In other words health is Harmony. The tissues which become diseased are those which lack the harmonious action of physico-dynamics. The vital force having been overcome by some morbid agent has not enough power by itself to keep those tissues in harmony with the rest of the body. This lack of harmony does not remain localized but extends until it involves the correlative organs, each in turn falling back on the other, with the evident consequence that the whole machinery suffers. That is due to lack of harmony, lack of health, that is, disease.

As Hahnemann says: "Restoration of health means the restoration of the Harmony of the vital force in the different departments of the mechanism of the body, as manifested in their normal functions." It is the Harmony of the body and the Harmony of the soul which again unite with the paramount Harmony of the Divine Essence!

### LAUROCERASUS.

By FRANK A. RODGERS.

This remedy is commonly known as Cherry Laurel. It is a beautiful evergreen shrub which grows to a height of eighteen feet or more, and is a native of Asia Minor. It is used extensively through many parts of Europe as an ornamental plant. The leaves of this shrub are alternate, simple, coriaceous, with shining upper surfaces, and vary in length from five to six inches, while in width they are about two inches; they are also oblong or ovate, and situated on thick petioles; their margins are sharp serrated or glandular dentated. The lower surface of the leaf is paler and more dull than the upper, and is marked by eight or ten lateral veins. The flowers are small and white, while the fruit is an oval red, almost black, drupe. The fresh leaves emit no odor until they are bruised, when they at once give off a peach-kernel odor. When chewed the leaves present a rough, aromatic and bitter taste.

The mental symptoms are very peculiar. There is a loss of consciousness with inability to speak or move. The patient cannot collect his ideas and has great fear and anxiety about imaginary evils, with weakness of mind.

The facial symptoms are sudden bloating of the face, with vertigo, distortion of the mouth, and twisting of the facial muscles. With this there may be loss of speech with perfect consciousness. There is often a strange kind of coma which looks more like a deep, quiet sleep. The

head symptoms are prominent and are as follows: Coolness on forehead as if from a draft of air: stitches or pulsations in head with heat or coldness. There is a stupefying pain in the whole head and the brain feels as if it were loose, and seems to fall into the forehead when stooping.

The eye symptoms are not prominent, but a very noticeable one is that objects appear larger to the individual than they really are.

The tongue is either rough and dry, dry and white, cold, or numb as if burnt. The left side in particular is stiff and swollen.

When the patient drinks water it may be heard rolling through the œsophagus, stomach and intestines. The throat and the œsophagus also contract spasmodically. A loss of appetite occurs with a clean tongue, and during pregnancy there is an utter disgust for food.

The only abdominal symptom worth mentioning is a sensation like the falling of a heavy lump from just above the umbilicus to the small of the back, and this sensation is < by talking or over-exertion, and is attended with a spasmodic pain in the cardiac region.

The patient may be constipated and the stools are hard and firm, and accompanied with much straining, owing to the complete paralysis of the sphincter ani. Two other kinds of stool are also found; first, there is a green, watery stool, and second, frequent, greenish, mucous stools, with entire loss of appetite, loss of thirst and characteristic rolling or gurgling. The most prominent urinary symptoms are: retention, with paralysis of bladder, or urine is voided slowly, or urination is involuntary.

An uncommon lung symptom is dyspnoea with the sensation as if the lung would not be sufficiently expanded, or as if it were pressed directly against the spine. The cough of this remedy is dry, almost constant, tickling, and accompanied by spitting a large amount of phlegm. The heart symptoms are the most prominent of any group. Cyanosis neonatorum, with blue face and gasping for breath is very characteristic. Stitches occur in the cardiac region with gasping for breath, < by sitting. The pulse can scarcely be perceived and the skin is cold and moist.

A sensation of pressure occurs in the nape of the neck, < in open air. Severe pains often occur in sacral region.

In the upper limbs the veins in the hands are distended, while in the lower limbs there is a cold, clammy feeling from the feet up to the knees. Stinging and tearing pains, with paralysis occur in both upper and lower extremities.

The affects produced upon the nervous system are rapid sinking of the vital forces, clonic spasms of the limbs, want of nervous reaction when a well chosen remedy does not act.

The sleep of the patient is deep, soporous and snoring.

The time of aggravation is in the afternoon with colicky pains; in the evening and in the night, with tearing on vertex, < on lying down.

The bad effects of this remedy are antidoted by either Camphor

Coffea, Ipecacuanha or Opium as the symptoms indicate. Such is a picture of a "Laurocerasus" or "Cherry Laurel" patient. Laurocerasus is indicated chiefly in cardiac, epileptic and apoplectic affections.

### **MEDORRHINUM IN PSORIASIS.**

BY CHAS. ALVIN GARDNER.

Among the members of the homeopathic profession, there have been and are still many who are prejudiced against the use of the nosodes because "they are such dirty things." Of course these do not represent the working body of homeopaths, as even the allopaths are using the same things in their modern serum therapy. Here is one of the many cases cured with a nosode as the result of the application of Hahnemann's law of similars; not because of any pre-existing infection of the disease from which the nosode is made.

J. S., colored, age 10, has been suffering for some time with psoriasis covering nearly the entire scalp and destroying the hair. After thorough and diligent questioning nothing distinctive was obtained until the mother said: "He always sleeps in the knee-chest position." This is a very peculiar and individualizing symptom, and Medorrhinum 1m was prescribed on Aug. 13th.

Aug. 27th.—Improvement slight; Medorrhinum was repeated, 10m.

Sept. 3rd.—Marked improvement. The eruption was very much better and the patient no longer slept in the knee-chest position. No medicine given.

Sept. 17th.—Still improving, hair coming in. Eruption only slight and scaly. No medicine. The patient was seen on Oct. 8, Nov. 22, and Dec. 6 with the continuing improvement. Patient discharged cured Dec. 6th.

This patient had but two doses of medicine, one Aug. 13th and the other Aug. 27th, and it is needless to add that no local application was used. In this case no history of previous gonorrhoeal infection could be found in father or mother.

### **ARTIST CURED BY HOMEOPATHY**

BY EDW. W. JOHANNES.

Mr. O. D., age 40, height 5 ft. 10 in., occupation artist; was taken sick fourteen years ago with a stomach trouble which some of the best men in the old school failed to help. When I met him he had gone the rounds of twenty-six physicians, including one mongrel homeopath. The last doctor was washing his stomach three times a week, and giving him Fowler's solution, beginning with a one-drop dose and gradually going up to thirty-five drops; then going down the scale to one. This stomach trouble had come or after the suppression of an eczema on the right elbow.

The symptoms were as follows:

Had not eaten a square meal in twelve years; appetite poor; after eating he had eructations of gas followed by a burning sensation in the throat which lasted only a short time. He drank quite a little water during meals.

On going to bed he would toss restlessly about for a time, finally falling asleep and awakening at one a. m. with bitter belchings, which continued for an hour or more. Awakened in the morning feeling apparently well.

I gave him *Ars. 200*, but with no relief; repeated the 200th and then gave a *1m* and even a *cm*, still with no relief. After two months of repeating the various potencies I showed the symptoms to a good homeopathic physician who said *Arsenicum* seemed to be indicated. I then obtained two powders of the *dmm*, and gave him one powder at 12:30 p. m. and the other at bedtime.

When I saw him three days later he was in bed complaining that his stomach felt very sore, and that his eczema was returning and itching intensely. His stomach improved rapidly while the eczema grew worse; but I did not repeat or change the remedy. In six months his eczema was cured and he complained only of occasionally waking at one a. m. or of a weak feeling in his stomach. He keeps a bottle of *Placebo* for such occasions, and it always effects prompt relief.

### THE SCEPTICISM OF A BEGINNER.

By S. M. JAFFER.

Everybody has more or less the experience of the peculiar condition of the mind when he ventures to try something new. A harder task for one who being half the way through the old thing skips over to the new one. A fine subject for an artist to draw out in the picture of his imagination. The firm hold of the ideas, the entire grasp of the theories of the old, the shaking belief, the unstable faith of the new, a push of reason from behind, the block of ignorance in front, a feeling as if doomed to attempt something which would not bring in favorable results.

To tell the truth, I received a wrong interpretation of the true healing art. Having had the education of the so-called "Regulars" I never thought for a moment that there could possibly be any truth outside the old system. I was so conservative as to despise even the talk about the new science of Homeopathy. In my usual way, I worked under the impression that Homeopathy consisted only of two simple principles; first, similar symptoms, and second, the drop dose. I found everybody talking the same way about Homeopathy, and that at times formed a topic of amusement among our friends.

It will not be out of place to mention how the so-called most rational people sneer at the possibility of the truth in Homeopathy, under the impression that this mode of treatment is childish in picking up the similar symptoms and putting some potentized pellets on the tongue. They wondered how pellets could remove the trouble of a person weigh-



ing 200lbs. That amuses them for awhile. It seemed strange to me, too, till my new associates of the new world exercised their influence and wanted me to try Homeopathy rather than the old chum—Allopathy. I got scared to death as usual. They prevailed upon me after all with the result that I was brought in close contact with the present condition, and now I wonder at the great mistake I had been laboring under so long. I have come to know what a profound philosophy and deep significance that pellet contains. Undoubtedly the art has for its basis the law of similars and the homeopath has to pick up the right remedy for the group of similar symptoms. It is simple enough to be understood by one with the green shoulders, yet to be worked out by one with the gray head. The whole theory is simple in its teaching yet complex in its working—what of that? That is the test of rationality and wisdom. The true art of healing, an art which makes the practitioner exclaim with sincerity that he was at least true to his fellow men, faithful to his cause.

Reasonable endurance and persistent working will be ever useful in everybody's case. It is the duty of rational practitioners of the true art to reach the populace by their admirable capacities and explain to them in theory and practice what Hahnemann left as his legacy. The leaders of the profession should be more liberal minded and explain to their patients what truth lies in the healing art, so that they may get rid of the false fabric and adopt what is truth. Truth is universal and will always conquer. The truth of the healing art is Homeopathy, which is unchangeable and at last shall conquer.

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### MALARIA OFFICINALIS.

This new candidate for febrile honors bids fair to become the most valuable addition to our *Materia Medica* which the present decade has furnished. So far as the provings and verifications go, it seems to hold the same relation to suppressed chronic malaria that *Cinchona* does to acute.

It is in the constitution impregnated with miasms of psora, sycosis, tuberculosis or syphilis that drug suppression is so fatal, and here the records show this remedy to be very effective. Where hitherto we have had to zigzag a cure with sulphur and other antipsoric remedies this appears to go to the bottom and removes the cause *de nova*. Psoric or tubercular chills and fever—outburst of psora or tuberculosis under the so-called popular name *La Grippe*, when the attendant is hard pressed for a diagnosis—may here find its similar. Also those occasional epidemics of fever in dry seasons, where, as in Kansas and Missouri in 1898, this remedy appeared to be the genius epidemicus. The symptomatology may be found in the transactions of the International Hahnemannian Association.—Notes from Lectures by H. C. Allen.

**PSORINUM.**

Hahnemann calls this remedy "a homeopathic antipsoric." From many years of study and the successful use of it in both acute and chronic diseases, I think it justly takes the rank of the King of Antipsorics. There are many cases of psora, scrofula, or other forms of constitutional dyscrasiæ—which can never be cured without this great constitutional remedy—and yet there are hundreds of homeopathic physicians who have never used it. I have found the following indications guiding, when the patient reveals a personal or family history of:

Suppressed eruptions, especially which Sulphur, though well selected, fails to develop.

The patient or some member of the family has, or has had eczema.

Quinsy in the patient or some other member of the family.

Patient had typhoid or continued fever years ago from which he has never fully recovered; never sick before, always ailing since.

Hay fever or asthma, appearing regularly every year, same day of month.

Feels unusually well the day before attack.

Body has a filthy smell, even after bathing.

All excretions have a carrion-like odor.

Want of vital reaction after an acute disease; tongue is clean, but is weak and appetite will not return.

General debility and weakness, without any apparent cause or any organic lesion.

Severe ailments from slight exertion or trifling emotions, without any apparent cause; joints easily sprained or injured.

When the best selected remedy fails to relieve or permanently improve; when Sulphur, Calcarea or Iodine seem well indicated but fail to act, study Psorinum.

A Case. Miss I., aged 30. Brown hair, dark eyes.

Had continued fever when young; never well since.

Hopeless; sad; weeping mood.

Dislikes to have illness known.

Has never seen with right eye since she can remember.

Frequent attacks of severe pain in sound teeth.

Large ringworm-like moth patch on forehead.

Fats or rich food disagree; breath very offensive at times.

Always chilly; wet or changeable weather aggravates.

Extremes of heat or cold aggravate.

Menses at 11; very painful; abdomen very sensitive.

Flow always late; intermittent; clotted; offensive.

April 3, 1900. Psorinum m, one dose daily for a week and Placebo.

May 12th. Reports: menses one week late, less pain than for years; feels better in every way; was greatly astonished, at first could not believe it; but can see with the right eye.—Notes from lecture by H. C. Allen.

## PERSONALS.

Dr. Geo. M. Thompson, Rochester, N. Y., has recently joined the benedicts.

Dr. Chas. E. Alliume, Utica, N. Y., was married a few weeks ago. The doctor is reported as doing a large practice.

Dr. A. W. Vincent has had a series of able papers in the *Medical World*.

Dr. Vincent. W. Wijetunge, Hering, '07, after spending a year in Europe, has just reached home in Colombo, Ceylon, prepared to cure the sick in his native land.

Dr. H. P. Fairlie, Hering '07, Glasgow, has entered on his professional labors.

Dr. V. R. Rattan is located at Hotel Cecil, George St., Brisbane, Queensland, Australia.

The production of the little booklet, "Hering College Homeopathic Happenings," by members of the Senior class is very creditable, and above all reflects an *esprit de corps*, which I regret to say is generally decadent.

R. F. RABE, M. D.

The doctor telephoned for a senior student to assist him in an operation and this is his response:

Chicago, Ill., March 31st, 1908.

Dear Doctor Allen:—The young man you sent to assist me in a surgical operation March 16, I found to be thoroughly proficient in giving the anesthetic and in every other detail of the operation. If he is as well up in other things as in surgery, Hering College may well be proud to graduate such as he. No doubt he will be an honor to his Alma Mater. I thank you very much for sending such good help.

Respectfully yours,

J. ASENBAUGH, M. D.

**Notice**—With this issue of THE HERING QUARTERLY the *Crusader* will be discontinued and the QUARTERLY will complete all unexpired subscriptions.

The propagandism of the *Crusader* and the use of clubbing rates resulted in a large subscription list which practically has been ruled out by a recent decision of the postal department, hence the change.

As editor and publisher I am under many obligations to the true friends of Homeopathy who have so generously and faithfully supported the effort to draw the line between the true and so-called homeopathic practice. As the QUARTERLY will continue this missionary work, I shall be glad to co-operate in every way possible to make the efforts of the students a success in the new publication.

G. P. WARING.

# Clinical Reports

Selected from large numbers. Names of Physicians omitted for ethical reasons.

## FEEDING IN ADULT CASES.

### Indigestion

"I prescribed Eskay's Food for a young lady who was suffering from a severe case of indigestion, and she took it in warm water and milk in the morning as she had not been able to eat any breakfast in several weeks. She tells me she is still using the food and takes a cup at bed time. She has gained eleven pounds in six weeks, the time she has been using the food." Dr. ———, N. Y.

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"I find Eskay's Food preferable to any other food I have tried for breakfast, and of late have been taking nothing else. My stomach digests it without any difficulty and I speedily feel its nourishing effect with no feeling of weight or distress of any kind, which has so often followed some other foods." Dr. ———, Mass.

### Chronic Gastritis and Vomiting

"I have used Eskay's Food in chronic Gastritis when no other food could be used. The patient has used nothing else for over a week until yesterday, when the stomach was strong enough to retain soft boiled eggs and toast, which he was unable to do a week ago. I have also used the food in obstinate vomiting with satisfactory results."

Dr. ———, Cal.

### Quickly Prepared, Palatable, Nourishing

"Eskay's Albumenized Food is quickly and easily prepared, and very palatable and nourishing."

Dr. ———, Ill.

### Gastric Troubles of the Aged

"Eskay's Albumenized Food is a superior product, being one of the few foods on the market that gives satisfaction in the treatment of gastric ailments of old people."

Dr. ———, Ill.

### Anaemia and Chlorosis, Gastric Abscess, Palatability

"I wish to mention several advanced cases of Anaemia and Chlorosis in which Eskay's food gave the happiest of results. It furnished nourishment and strength to the system. For convalescents it has also proved excellent. In the case of one patient suffering from an old gastric ulcer its administration not only gave no distress or pain, but the food was retained. Patients all praise the taste of the Food." Dr. Edel,

Physician at the watering place and leading physician at the "Bethanien" Hospital, Wyk on the Island of Fohr, Germany.

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The course is intended to enable a physician to review the *Materia Medica*, to analyze the symptoms and to estimate their comparative value and relative importance in the anamnesis; how to take the case, how to find the similar remedy and how to use it when found; how to select the correct potency and how often to repeat it; all illustrated in the clinic.

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on Monday, Tuesday, Friday and Saturday of the week May 11th to May 16th, 1908, Lectures and Demonstrations will be given at the College from 1 P. M. to 6 P. M., by professors of the faculty. These Lectures will be devoted entirely to Therapeutics in its broadest sense. They will include, besides the Homeopathic Therapeutics of some of the more common important diseases, their general treatment, management, hygiene, dirt, sanitary precautions, care of convalescence, hydro therapy and electricity. In other words, A SYMPOSIUM OF THE TREATMENT OF DISEASES.

On Wednesday of this week those present will visit the Metropolitan Hospital, where all forms of Therapeutic Measures will be demonstrated.

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All are invited. Try to come.

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**J. W. DOWLING, Secretary of the Faculty.**

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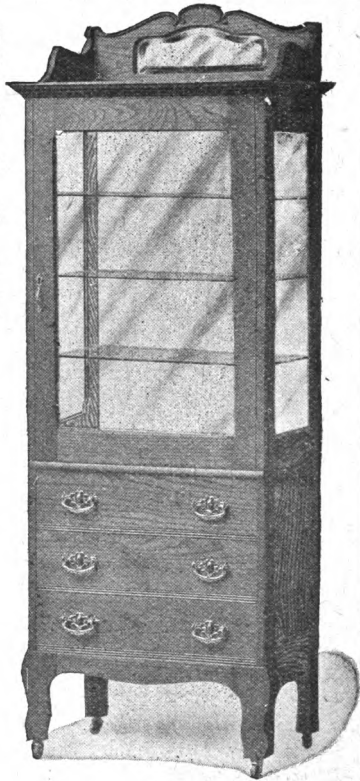
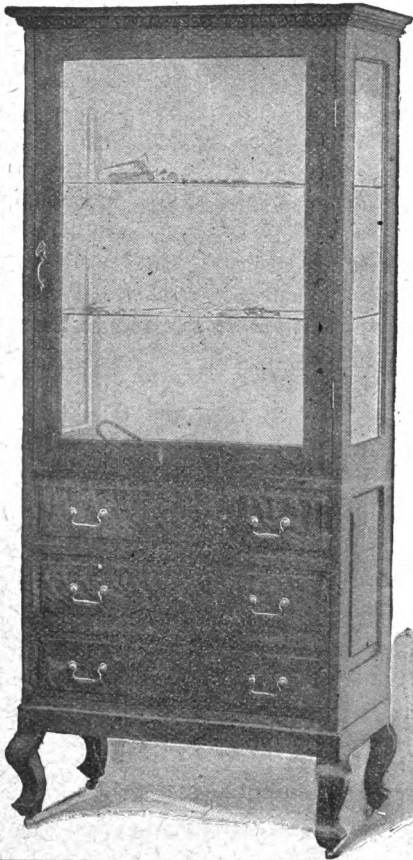
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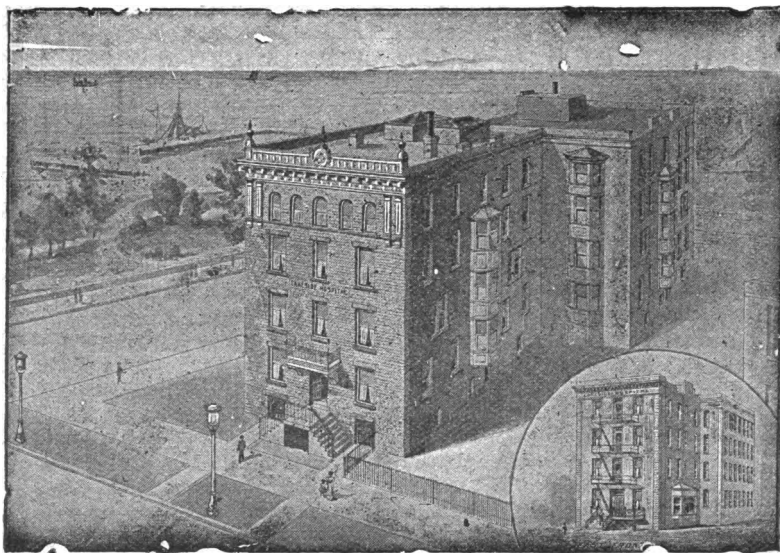
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Dr. William Jefferson Guernsey arranged this scheme for using Bönninghausen so as to avoid the writing of the remedies in every case, and the consequent cancellation necessary. This is by having all the remedies printed on separate slips, to which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

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

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

This work is now in press, and we hope to have it completed by mid-summer, at least. It will cost from \$10 to \$15 and no more will be printed than are wanted. Each set of slips (with the Index) will be arranged in a box, with compartments of fifty or a hundred in each. The work will be made as complete as possible, but on account of expense in publishing, no publisher caring to assume the responsibility, all subscriptions may be addressed to the author, 5142 Washington Ave., Chicago.



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"Three years ago I was attracted by an article on Grape-Nuts and decided to try it.

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"Soon I was able to take Grape-Nuts and cream for breakfast, and lunch at night, with an egg and Grape-Nuts for dinner.

"I am now able to eat fruit, meat and nearly all vegetables for dinner, but fondly continue Grape-Nuts for breakfast and supper.

"At the time of beginning Grape-Nuts I could scarcely speak a sentence without changing words around or 'talking crooked' in some way, but my brain and nerves have become so strengthened that I no longer have that trouble." "There's a Reason." Name given by Postum Co., Battle Creek, Mich. Read "The Road to Wellville," in pkgs.

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A lady doctor writes:

"Though busy hourly with my own affairs, I will not deny myself the pleasure of taking a few minutes to tell of my enjoyment daily obtained from my morning cup of Postum. It is a food beverage, not a stimulant like coffee.

"I began to use Postum 8 years ago, not because I wanted to, but because coffee which I dearly loved, made my nights long weary periods to be dreaded and unfitting me for business during the day.

"On advice of a friend, I first tried Postum, making it carefully as suggested on the package. As I had always used "cream and no sugar," I mixed my Postum so. It looked good, was clear and fragrant, and it was pleasure to see the cream color it as my Kentucky friend always wanted her coffee to look—"like a new saddle."

"Then I tasted it critically, for I had tried many "substitutes" for coffee. I was pleased, yes, satisfied with my Postum in taste and effect, and am yet, being a constant user of it all these years. I continually assure my friends and acquaintances that they will like it in place of coffee, and receive benefit from its use. I have gained weight, can sleep and am not nervous." "There's a Reason." Name given by Postum Co., Battle Creek, Mich. "Read The Road to Wellville," in pkgs.