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THE
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OF
MEDICINE:

A MONTHLY RECORD OF THE MEDICAL AND AUXILIARY SCIENCES.

तदेव युक्तं भैषज्यं यदारोग्याय कल्पते ।
सचैव भिषजां श्रेष्ठो रोगेभ्यो यः प्रसोचयेत् ॥
चक्रसंहिता ।

That alone is the right medicine which can remove disease :
He alone is the true physician who can restore health.

Charaka Samhitā.

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CONTENTS OF No. 4, Vol. XXV, 1906.

	PAGE.
THE HAHNEMANN ANNIVERSARY	130
THE EARLY HISTORY OF HOMOEOPATHY IN CALCUTTA AND THE SANITATION OF THE CITY. By Dr. Girish Chunder Dutt, L.M.S.	131
COMMON DISEASES AND THEIR TREATMENT	137
EDITOR'S NOTES : —	
Kissing	142
Aberrant Vaccinia... ..	<i>ib</i>
A Case of Marked Intolerance of Belladonna	143
Laryngeal Tuberculosis	144
Native Pharmacologies	<i>ib</i>
Fatal Blood Poisoning following a wound by the <i>Primula Obconica</i>	145
The Sale of Narcotics in the United States	146
Ricinus in Gallstone Colic	147
Personal Experience with Small-Pox	<i>ib</i>
"Max" on Destruction of Rats	148
"Medical Practitioner" or "Doctor"	150
Onosmodium in Muscular Asthenopia	152
Obituary. Dr. Hurro Nath Roy, L.M.S.	154
CLINICAL RECORD :—	
A Case of Suppressed Small-Pox. By Dr. Hem Chandra Ray Chaudhuri, L. M. S.	155
Tuberculinum and Arsenicum Iodatum in Albuminuria. By Dr. A. Lambrechts, of Antwerp	157
Cases Illustrating the action of Sulphur, Ignatia, and Sepia. By Dr. Stonham	160
GLEANINGS FROM CONTEMPORARY LITERATURE :—	
Adulteration of Foods and Drugs, their relation to the Public Health. By Amanda C. Bray, M.D.	163
ACKNOWLEDGMENTS	172

THE
CALCUTTA JOURNAL
OF
MEDICINE

Vol. xxv.]

April 1906.

[No. 4.

THE HAHNEMANN ANNIVERSARY.

The Hahnemann anniversary and the annual meeting of the Hahnemann Society were celebrated on the 10th April. We had a sprinkling of the regular and irregular practitioners and friends. Cards of invitation were issued to all our colleagues. Their paucity of attendance was a marked feature. Perhaps an ill-will prevented them from the national ovation to our Great Master. The bond of adhesion was wanting. It is an ill-wind that does no body good. An ill-feeling creates greater disaster than the passive negation. We wanted all our friends to muster strong to do justice to the cause. It was a hopeless task to tune the discordant notes. We live in wonderful days of self-assertion. Harmony and peace are generally wanting. Arrogance has taken the place of humility. For all this degeneration, we are not without the hope of regeneration. The rainbow of peace is prospective.

The Chair was taken by Dr. H. C. Ray Chaudhuri. Dr. A. K. Datta, the Honorary Secretary announced the sad news of the death of Dr. Hurrnath Roy, who as a Vice-President was a great supporter of the Society. All the members felt deep sorrow on account of the loss.

Dr. Ray Chaudhuri then asked Dr. Girish Chunder Dutt to read his paper on the Sanitation of Calcutta. It is our custom to hear the subject dealt with without any discussion, lest any

acrimonious debate destroys the kindly feeling pervading among the members. Dr. A. K. Datta proposed the following office bearers for the ensuing year :

President :

Dr. H. C. Ray Chaudhuri.

Vice-Presidents :

Dr. W. Younan,

Dr. P. C. Mazumdar,

Dr. C. S. Kali.

Secretary :

Dr. A. K. Datta.

Assistant Secretary :

Dr. P. L. Kumar.

The happy occasion ended with a social gathering.

THE EARLY HISTORY OF HOMŒOPATHY IN
CALCUTTA AND THE SANITATION
OF THE CITY.

By Dr. Girish Chunder Dutt, L. M. S.

(Read at the Hahnemann Anniversary.)

Mr. President and Gentlemen,—We have assembled to-day to commemorate the birthday of the great Hahnemann, the man of thought and work, who sacrificed himself for the cause of humanity. Such men are born before their time and their life-work is appreciated by a grateful posterity. Christ sacrificed himself on the cross, and his burning words and exemplary life serve as a beacon-light, shedding a hallowed lustre which vivifies prince and peasant alike. The sacrifice of Hahnemann is no less noble. He had no thought for dear life which he consecrated to suffering humanity. Hahnemann is the father of Homœopathy which is now effecting so much good all over the world. We practise homœopathy, and it is opportune that we should bow down our heads in gratefulness and love, before that living figure, who towers head and shoulders over his contemporaries, whilst burning incense to the great redeemer of homœopathy, it is meet, we should offer our tribute to the

memory of the man, who was mainly instrumental in introducing homoeopathy in Calcutta. He spared no pains to foster the sacred cult which he advocated in and out of season, with all the strength of his character.

Half a century ago, homoeopathy was openly ridiculed in this metropolis and there was hardly a practitioner who could avow his belief in it. There was no homoeopathic dispensary, no practitioner, and it was by precept and example that the late Babu Rajendra Dutt tried to introduce the system in Calcutta. He brought out the late Dr. Berigny, opened the first homoeopathic dispensary, at his own cost and expense, and day and night moved about the town, treating hundreds of patients without the least remuneration. On the contrary, he always opened his purse-strings to his indigent patients. Such men like Pandit Iswar Chandra Vidyasagar, Raja Digambar Mitter, Peary Charan Sircar, Rai Bahadur Juggodish Nath Roy, Peary Charan Mitter and others were brought over to the side of homoeopathy by him alone. Is it not therefore our duty to commemorate the work of such a man? My poor self and Dr. H. G. Ray Chaudhuri must hold his memory in grateful remembrance for the many difficulties he smoothed away from our path. Rajendra Dutt deserves a public memorial for the sacrifices he made for homoeopathy. I leave it to you to settle the nature of the memorial but it is meet and proper that in an assembly of homoeopaths of the town, we should offer our humble tribute to the man who laboured and died in the interest of homoeopathy. Had Dr. Sircar been still living, he would have joined us in paying tribute to the memory of Rajendra Dutt.

I will, with your permission, say a few words about the sanitation of Calcutta. I regret I have not been able, on account of my poor health and professional engagements, to devote much time and attention on the subject. I will only point out to you the landmarks, and it would be for you to chalk out the routes.

Calcutta is not particularly healthy during this season of the year. Diseases of sorts are ravaging the town, and it would not be unprofitable, if we discuss the sanitation of our surroundings

and some of the causes affecting health in a friendly way before an assemblage of qualified medical men. I will first turn my attention to the food-stuffs which are offered for sale. Are they kept in such a way as to prevent outside-contamination? Who has not seen sweet meats and perishable food-stuffs exposed for sale with no safeguards worth the name to protect them from dust, flies and bacilli, and disease-germs which float about in the air? Adulteration on a large scale, in ghee, milk and other substances and necessaries of life is openly carried on under the very nose of the gentlemen who are called upon to look after our health. I will be the last person to say anything behind one's back but taking into account the extensive adulteration carried on and the putrid meat and fish offered for sale in the light of the day in the most open manner happening almost every day in most of the markets of the town, one would be apt to think that these sanitary officers are not alive to a sense of their duty. The Health Officer of the Corporation is not seen where he should be. He confines himself within the four walls of his laboratory intent upon gaining bacteriological experience which may benefit him in diverse ways. He should freely move about, and without depending upon the subordinates for his facts and figures look to the sanitation of the town himself. If one of our Municipal Commissioners with a bit of waggery in him should fix upon a most insanitary hole, and ask the Health Officer about the site and its surroundings then he would, I am afraid, be on the horns of a dilemma.

The drainage of the town is defective; the flushing operations are not up to the mark. Vitiating gas from the manholes is freely and constantly issuing and circulating in the town. This decomposed gaseous matter, which is heavier and denser than the surrounding air, circulating below a height of ten feet, is poisonous, and causes the deaths of coolies, entering the manholes. These effluvia, unhealthy emanations create acute and chronic diseases of various sorts and foster the hordes of bacilli which like ravenous greedy vultures float about ready to enter the human system. The cumulative action of sewer gas on the

human system gradually debilitates and weakens the conservative power of the vital force, which when unable to resist the action of the gaseous poison gives way to the generation of acute diseases, which may with lapse of time become chronic. The constant breathing of this vitiated atmosphere produces gradually general malaise, depression of health and more or less anæmia. To stop the mischief which is brewing and which may assume serious proportions any day, it is better now to nip the evil in the bud by not allowing privy connections. Night-soil should be removed by methars and should not be allowed to pass through the drains reeking as they are with contamination of sorts. Night-soil will make the contamination more powerful and dangerous to health. Who has not noticed gas emanating from the manholes, while they are kept open in the morning before flushing? The manhole trap is not air-tight and there is constant issue of deleterious gas from it. Pedestrians, taking a constitutional walk in the morning, should beware instead of inhaling the salubrious morning air, they are likely to inhale the most subtle poisonous effluvia, which may dangerously affect their health and safety. Cases of typhoid fever were rare before the drainage system came into vogue, now they are met with almost in every part of Calcutta. You are all familiar with the name of Dr. Mouat whose academical distinctions and practical work raised him to a high position of trust and responsibility under Government. He emphatically said that Calcutta would be at sometime or other ruined on account of the underground drainage system, which will give birth to the worst and most virulent form of epidemic diseases. His sage and prophetic utterances are almost going to be verified. There is another patent fact about the drainage which I would like to point out to you. The drainage pipes may carry contagion from one house to another. If that occurrence is possible the look-out is dark and dangerous. Who has not noticed the fact that during the time of flushing, bad deleterious gas forces out of the sewers and contaminates the surrounding atmosphere. Now, please turn your attention to our drinking water. The

taste of filtered water has of late changed; at times a peculiar smell is noticed. Whence these changes? I have no hesitation to attribute them to the impurities, animalculæ and deposits formed up, germinated and accumulated in the water-mains and pipes which have never been cleaned since they have been laid under the soil. Decomposed matter and animalculæ have often come out through the hydrants. Leech and snake stories are extant in the town. These water-pipes have been left uncleaned for years together. Does not common-sense say that it is a source of danger to public health? The Ganges water if kept for a long time, would never generate animal life, but purified pipe-water would do so and contaminate under certain conditions. I have hurriedly and imperfectly laid before you the plain facts which have come under my personal observation in the hope that you may look out for yourselves and devise schemes which will improve the sanitation of Calcutta, and obliterate dangerous conditions under which we all live. Another fact which I lay before you is that when there is a fall of rain, the streets and lanes especially in the native quarters of the town, are submerged and the water remains on the surface for a considerable period. This stagnation of water is one of the principal causes for the generation of the malarial poison and diseases of the digestive system. Is there no remedy for the accumulation? The drainage is defective or else why will the water remain for such a length of time on the surface? It is the duty of the Health Officer to take notice of this fact and prevent the stagnation of water.

Another matter affecting our health is the promiscuous use of foreign patent medicines and many other indigenous patent medicines, the ingredients of which are not always known to us.

A pushing, bustling speculator desirous of reaping a golden harvest within the shortest possible time, blows his own trumpet lustily; his words are believed in like Gospel truths, and we have not the least scruple to prescribe those nostrums for the benefit of our patients with results which may be better imagined than described. I do not go so far as to assert that all patent

medicines are worthless, and they should not be used by medical men. What I most emphatically protest against is the use of patent medicines when their composition is not known to us, and when we most innocently, it may be, repose our confidence in the word of the advertiser. I am a believer in the influence of stars, planets, &c., on the world. We live under this influence is perceptible on animal, vegetable and mineral kingdoms in a greater or less degree on account of the positions of the planets which according to their strength and capacity are beneficial or malefic in character. Swadeshi medicines obtained under given conditions, bring about beneficial results not to be obtained from foreign medicines grown and prepared under circumstances which vary considerably on account of the planetary and climatic causes. I throw out an idea and it is for you to reject or work upon it, as you may think best. The use of patent food, imported from Europe, should be brought into account. We do not know what chemical change this food undergoes when kept for a long time in a hot country. Is it not necessary to examine it before prescribing to patients?

A great controversy is going on about the cause of malaria. It is attributed to the bite of that ferocious blood-sucker the terrible mosquito whose eternal buzz behind our ears on sultry nights is more dreaded than the presence of the royal animal in the shape of a tiger. Water stagnating under the soil and defective drainage are favourite theories. But does it not strike you that ever since the use of quinine as antidote for malarial fever, the fell disease has increased in undue dimensions? A healthy man, partaking of quinine would show the identical symptoms developed in malarial fever. What I contend for is that quinine may have been an antidote for malarial fever which never existed in this country before the introduction of this drug. There are and were many excellent febrifuges which may be or might have been prescribed in fevers other than malarial, but instead of this, we use quinine in such fever, and malarial fever intervenes. I, therefore, assert that quinine is responsible for generating malarial symptoms.

COMMON DISEASES AND THEIR TREATMENT.

(Continued from page 99.)

Sabina has a few symptoms indicating its use in inflammatory swellings. They are *sprained pain in shoulder joint; stinging pain extending inward near elbows; sticking in outer condyles of elbows; pain in radius worse from motion or touch; bruised pain in middle of anterior surfaces of lower extremities on motion; sticking in heels extending outward; heaviness and indolence of body, forcing him to lie down.*

Allen says: "Chronic arthritis and gout better from open air, worse from warmth, with general depression; the pains involve the shoulders, elbows, hips and knees; often accompanied by pulsation in different blood-vessels". What remains useful for rheumatism and gout may also serve to allay inflammatory tension. It seems that *Sabina* may help in those cases where the sensation of pulsation is felt in the blood-vessels.

Saccharum lactis is Lactose or Milk-sugar. The use of Milk-sugar in medicine proves that there is no substance which has not some kind of medicinal property or other. Clarke says: "Hahnemann chosen globules of *Saccharum lactis* as the chief vehicle of his remedies, because he considered it the most inert substance he could find. But his method of attenuating remedies had shown that no substance is inert in attenuations, and experience shows that no substance is *absolutely* inert in any form."

Without taking into consideration its diuretic and purgative properties, we would see whether it has any action on inflammation. It produces hot flashes all over the back of neck and shoulders; pain and soreness at the upper vertebral border of scapula; pain in back from scapula to sacrum; pain in lumbar region; pain in shoulder, axilla, elbow, wrist and hand; soreness in gluteal muscles, knee, and foot; (great physical exhaustion caused by over-work, completely relieved; repeatedly verified by Swan and others.); pains are worse in a damp room or basement, but better if there was a fire.

Saccharum lactis can be useful in slight pains attended with inflammation of any joint. It is an undeniable fact that Milk-sugar helps as a sequel in curing inflammations when other powerful medicines have been administered.

Salicylicum acidum is found rarely in nature. The artificial preparation is the source of supply. Like all pharmaceutical preparations, the product of laboratory-experiment, it has generally proved a source of mischief with the Old School. Homœopathy has taken the advantage of its poisonous symptoms to apply it in infinitesimal doses for a few brilliant cures. It can be applied in inflammation. The symptoms are: Heat, redness, soreness, and swelling about joints, worse in knees with acute piercing pains, worse on motion, better from dry heat; pain in fingers and little toes; drawing in calf extending into thigh, then transferred to arm; soreness and pain in deltoid and gastrocnemius, changing to wrist and forearm, with soreness to touch and soreness on moving limb; strained pain in shoulder.

The changing character of the pain of Salicylic acid is most marked. It is said to be useful in any kind of swelling caused after suppression of foot-sweat. Its another peculiarity is the pain in the deltoid and gastrocnemius muscles. It has been used in rheumatic pains. In other kinds of inflammation the medicine can be tried where the pains are of sifting nature.

Sanguinaria canadensis or the Bloodroot has: Pain in the upper part of left side of head, worse in eye; pain on touch in head; pain on breast, loin, nape of neck, shoulder and arm; nervous thrill through system; pulsation through whole body; pain in shoulders; from shoulder down to scapula; pain in hip extending into leg; pain in limbs, especially in shoulders, arms, and thighs, and worse at night; pain in right deltoid; bruised like pain in thigh, alternating with burning and pressure in chest; an uncomfortable prickling sensation of warmth spreading over whole body; pain rising from back of neck over top of head, running down into forehead; weakness and palpitation of heart; redness and burning of hand; bruised pain in hip; swelling of leg and foot with inward burning and external coldness;

sharp and severe pains in ankles and foot; pain in superficial bony parts; most of the symptoms aggravate during evenings and mornings. Sangninarria has cured many cases of rheumatism. No case has been recorded signifying its usefulness in ordinary inflammation. It may be serviceable in inflammation of the shoulder joint or nape of the neck.

Sarsaparilla produces: Lightning-like tensive pains here and there in body and about head; sensation in all bones as if breaking; drawing pain in scapulae and legs; inflammation of thumb, worse at night with throbbing and burning; pain in tips on pressure, as from ulceration or as from salt in a wound; shooting, tearing, pressive pains; darting, pricking sensation in bones; arthritic pains, from suppressed gonorrhoea, with diminished secretion of urine; rigidity and immobility of limbs; hot and tense swellings; redness and burning of hand; pain in tips of fingers (bruised and sore); swelling and stiffness of knees, with shootings; breast-bone as if bruised; face as if bruised; jaw as if broken; as if tips of fingers ulcerated, or as if salt were put on a wound.

Allen remarks: "Bone pains following gonorrhoea, or after the use of mercury, worse in dampness." Pereira says: "Its continued use is often attended with improvement of appetite and digestion, augmentation of strength, increase of flesh, the production of a more healthy tone of mind, and the palliation, or, in some cases, the complete disappearance of various morbid symptoms—as eruptions, ulcerations, pains of a rheumatic character, etc. It is not adapted for the cure of intermittents or of simple debility. But its effects are seen in those depraved conditions of the system, which the public, and even some medical men, ascribe to the presence of a morbid poison, or to a deranged condition of the fluids. Hence, it is frequently denominated a purifier of blood. Those who do not adopt the pathological notion here referred to, call it an alterative."

By the Old School the following use of *Sarsaparilla*, which is to our present purpose, has been recommended:

"In chronic abscesses, attended with profuse discharge,

diseases of the bones, obstinate ulcers, chronic pulmonary affections accompanied with great wasting of the body, enlarged glands, and various other maladies connected with a depraved state of the system, Sarsaparilla is often a very useful medicine."

Great difference exists as to the quality of Smilax. The officinal *Sarsae radix* comes from Jamaica. It is a non-mealy Sarsaparilla. The mealy Sarsaparillas are not preferred for medicinal action. The non-mealy varieties are Jamaica and Lean Vera Cruz. The mealy are Brazilian, Honduras, Gouty Vera Cruz, and Caracas. The non-mealy contain more smilacin, are more acrid, and they yield the largest quantity of extract. Among them, that coming from Jamaica is the best.

Scrophularia has proved curative in threatened abscesses that show no sign of disappearing; in recurrent periostitis of lower jaw in a syphilitic; and as a local remedy in appendicitis. These facts are collected by Clarke. He remarks: "Cooper gave it to a patient who had been poisoned by an Indian arrow-poison which produced inflammation and suppuration of the glands. 'Nodosities in the breast' is another indication of Cooper's. Cooper has seen *Scroph.* in the form of a poultice relieve peritonitis affecting the lower abdomen."

Secale cornutum produced Gangrene of stomach, lungs and liver, preceded by inflammation; *limbs painful, cold, rigid, almost insensible with internal pain, worse from heat, somewhat better from cool air, the pain gradually extended from toes to legs and thighs and from fingers to arms and shoulders, till sphacelus supervened, the affected parts dead, black and dropped off; extremities pale, cold and wrinkled, as if they had been long in water; insensibility of fingers and toes; fuzzy feeling (Phos); sensation of sleep with formication; contractions of hand, feet, fingers and toes; sudden periodic contraction with tensive pain; swelling and pain without inflammation, then coldness, blue color, cold gangrene and death of the limb; swelling of hands and feet with gangrene, black and suppurating eruption; discolored skin on fingers and toes, then gangrene, then dropping off of limbs; gangrene of fingers and toes; of limbs, then suddenly become cold,*

lead colored and insensible; of limbs without pain when pricked or cut, though often motion is not entirely lost; with separation of the part from the body; the dead part separated at the joint; cold gangrene of limbs; cold and painless, so that fingers and toes drop off; formication; burning associated with coldness; black gangrenous pustules; subcutaneous tingling; ulcer turn black; sanguineous vesicles which turn to gangrene in the limbs; dry gangrene, particularly on right side, beginning in toes and running up the limbs.

We are not at present interested in the phenomenon of gangrene. Clarke remarks: "The boils in which *Sec.* is indicated are small and painful, with green contents, mature very slowly, heal slowly, and are very weakening." No experience has been recorded with regard to the stage of inflammation which precedes gangrene. It seems that *Secale* may be of service in inflammation with coldness, numbness and swelling. Absence of heat is the predominating character. The swelling is worse by external heat. There is internal burning in the affected part which disallows covering.

The other prominent symptoms are thus described by Clarke: "For *Sec.* lessens the coagulating power of the blood, and produces a hæmorrhagic diathesis; persistent offensive bleeding. Small wounds bleed persistently In spite of burning in all parts of the body as if sparks were falling on the patient. Another characteristic sensation is numbness; tingling as if ants crawling all over, better from rubbing. This may accompany hæmorrhages, loss of other fluids, debility, or skin affections. In the later stages of ergotism there is anaesthesia." These symptoms indicate its use in many diseases including inflammation.

To be continued.

EDITOR'S NOTES.

Kissing.

We take the following from *Matthewson's Exchange and Bureau Advertiser*, Nov. 14, 1905.

"We should have more faith in the anti-kissing crusade if it were conducted by men of a kissable type.

It is all very well for a man to suddenly discover at the age of seventy that kissing involves danger from germs. Why did he not discover it when he was twenty five?

It is not fair. These dry-as-dust professors have no romance.

Once upon a time a fox lost his tail. "I will make it the fashion for foxes to have no tails," said he, and he called a general meeting and used all his eloquence to induce the other foxes to part with thier tails. But in vain.

Once upon a time there was a solemn old bore of a professor whom no one would kiss. "I will abolish kissing" said he, and he called a tuberculosis congress, consisting, like himself, chiefly of old fogies. They were delighted at the suggestion that kissing should be stopped, for no one ever kissed them, and it made them angry to see kissing going on elsewhere. So they passed the resolution.

And it was obeyed, but only as far as the old fogies were concerned. People who had heretofore refrained from kissing the old fogies read the resolution and continued to refrain."

Aberrant Vaccinia.

The following letter from the *Lancet*, February 3, shows how vaccinia can be transferred from the child to the mother:

"A VACCINATION vesicle in an anomalous situation is perhaps no very great rarity; they are always worthy of report as awkward questions of diagnosis may be raised by them. I was fortunate enough to secure an excellent photograph of a case of this kind that came under my observation last summer. The woman applied for treatment at the Bourne Valley Dispensary. The appearance of the "sore" of which she complained was that of a large mature vaccine vesicle and on inquiry I learned that her baby had been vaccinated a fortnight before and that the arm had "taken" well. The exact manner in which the virus had been transferred could not be as-

certained. The baby's finger-nail seems the most probable instrument of inoculation. The lip, as the illustration shows, was much swollen and it was very painful; there was considerable constitutional disturbance—pyrexia, headache, &c. These symptoms subsided in a few days and the vesicle ran the usual course."

The case shows that vaccination-pustules are capable of producing infectious sores to others. The transference depends on the health of the person. In this case, it may be presumed that the mother who was infected by the vaccination pustule of her child, was susceptible to its influence. It is an indirect form of vaccination.

A Case of Marked Intolerance of Belladonna.

We take from the *Lancet*, March 3, the following :

"The following case is remarkable as showing a very marked idiosyncrasy with respect to belladonna. The patient, who was a nurse suffering from cellulitis of the leg unattended with any abrasion of the skin, was ordered an application of "glycerine and belladonna." 40 minims of this mixture, that is approximately 20 grains of extract of belladonna, were applied to the inner side of the foot. Within half an hour the patient complained of great swelling of the leg and a sensation as if the skin would burst. Dryness of the throat and lips, a feeling as if the nipples were being forcibly retracted, and difficulty of speech quickly followed. The patient now became delirious, the pupils were widely dilated and insensible to light, the hands were kept in perpetual motion groping for imaginary objects, and efforts were made to tear the bedclothes. This delirium lasted for some hours, after which she gradually became more composed but felt as if she had passed through a severe illness. In 48 hours the dryness of the throat and the pain in the breasts had disappeared, though the pupils remained dilated and only resumed their normal condition on the fourth day. The treatment consisted in the administration of hot coffee and a quarter of a grain of morphine, together with the use of continuous hot applications."

This case of Belladonna poisoning illustrates the danger even in local application. The Old School should take a note of this case before ordering such use.

Laryngeal Tuberculosis.

In the *North American Journal of Homœopathy* for March, we have the following note :

“Differentiation must be made between malignant, syphilitic and tubercular laryngitis. Severe pain is absent (practically) only in syphilis. Ulceration is shallow in malignant and tubercular cases; deep and jagged in syphilis. In tubercular infection the tubercles may be seen below the epithelial covering even before they break down, and the ulcers may be seen merging into each other. A club-shaped enlargement of the arytenoids is almost diagnostic; also a tumefaction in the posterior commissure of the vocal chords, while a general anemia of laryngeal mucosa is always suspicious.

In diet, fresh, raw eggs, fertilized, i. e., from flocks of fowls in which there are a sufficient number of efficient male birds, and milk warm from the cow, i. e., with the animal heat and vitality unimpaired, are particularly commended. Operative measures are inadvisable, useless, cruel.”

Laryngeal tuberculosis is of unfrequent occurrence. The cases under our treatment were observed to get hypertrophy of the arytenoid cartilages, mixed with the emission of large quantity of sticky sputa. In syphilitic laryngitis the expectoration is not so profuse and the hypertrophy of the cartilages is absent.

Native Pharmacologies.

In the March number of the *North American Journal of Medicine* we read :

“*The Calcutta Journal of Medicine* suggests the advisability of India having a pharmacology of its own, as it has so many native drug substances. As an instance it notes that the native quinine has proven itself as efficacious as the imported Peruvian bark. Tinctures are much more reliable as well as more potent when made from fresh vegetables. Therefore, it is an advantage to have them “home-made” rather than from foreign dried plants. They are also cheaper. It is a wise provision of Nature that each country seems to contain the drugs which are best fitted for the ailments of that country. It is therefore the part of wisdom to develop the native resources. By all means let our Indian brethren, as well as our brothers in other countries, construct native pharmacologies. Not

only they, but the whole brotherhood of practitioners will gain thereby."

We thank our colleague for the appreciation of our service in the cause of an Indian Homœopathic Pharmacology. It was always the earnest endeavour of Dr. Mahendra Lal Sircar to prepare tinctures from fresh plants. We followed him in his foot-steps in that cause. Our first desire is to avail of those medicinal plants which have already been so well proved and then to add others which are only found in India.

Fatal Blood Poisoning following a wound by the Primula Obconica.

The Lancet, of the 24th March, has the following :

"The patient, a woman aged 29 years, was recovering from an attack of influenza when she accidentally scratched her nose whilst smelling at a plant of the variety referred to. The nose rapidly swelled up, became a deep plum colour, with many points of suppuration similar in appearance to a carbuncle. Under an anæsthetic the diseased portions of the nose were scraped away. Œdema of both eyelids followed, the same destructive process taking place in the soft tissues, a diffuse cellulitis of the forehead and scalp then supervened, and despite incisions continued to spread. No discharge came from the wounds. The patient died at the end of the week with symptoms of pneumonia. At the post-mortem examination acute congestion of both lungs with many foci of suppuration were found. Cultivations discovered the streptococci and staphylococci present. This is the third case of acute inflammation of the skin and subcutaneous tissues I have met with after infection by the primula obconica. Two died and one recovered after a very prolonged illness. These infections were all on the face. I learn that a species of eczema of the hands often affects gardeners when tending this plant. These facts hardly encourage one to add the primula obconica to one's floral possessions."

The poisoning symptom of *Primula obconica* is interesting, as much as it produces diffuse cellulites of the face. The danger of erysipelas in the face can not be under estimated. For this reason, it is an additional help to our list of medicines in that kind of disease.

The Sale of Narcotics in the United States.

The Lancet, April 14, writes :

“UPON the invitation of the legislative committee of the American Pharmaceutical Association a conference of delegates from the various pharmaceutical associations in the United States has met to consider what steps might be taken to check the sale of narcotics in the United States. As a result of this conference a draft Bill has been formulated to provide against the evils resulting from the traffic in certain narcotic drugs, including cocaine, alpha and beta eucaine, opium, morphine, heroin, chloral hydrate, or any salt or compound of these substances. Section 1 makes it unlawful for any person to sell, to furnish, or to give away any of these substances or their preparations, except upon the original written prescription of a medical, dental, or veterinary practitioner. The prescription must contain the name of the patient or in the case of a veterinary prescription the kind of animal that it is intended for and must be signed by the prescriber. It must be permanently filed by the pharmacist who dispenses it and must only be repeated upon the written order of the prescriber. No duplicate copy may be made or delivered to any person but the original must at all times be open to inspection by the prescriber and by authorised officers of the law. Provision is made for the sale without these restrictions of minimum stated quantities of preparations of these drugs—e.g., preparations containing two grains of opium or one-eighth of a grain of cocaine in one fluid ounce. Exceptions are made also in the case of preparations containing opium when recommended and sold in good faith for diarrhoea and cholera and when the label bears specific directions and a caution against habitual use; other exceptions include Dover's powder and ointments and liniments plainly labelled “for external use.” Section 2 makes it unlawful for a qualified practitioner to supply or to prescribe any of these substances for the use of any habitual user of the same. But the provisions of this section would not prevent any medical practitioner from supplying or prescribing these drugs for a habitual user of narcotic drugs under his professional care, provided that the administration of the same was considered by him to be a necessary part of the treatment. Section 3 provides that any person who shall violate any of the provisions of the Act shall be deemed guilty of a misdemeanour and shall be fined upon conviction for the first offence not less than 25 dollars or more than 50 dollars; for a second offence not less than 50 or more than 100 dollars; and for a subsequent offence not less than 100 or more than 200 dollars, and shall be imprisoned in the country gaol for not more than six months, and if the misdemeanant be a qualified physician, dentist, veterinary surgeon, or pharmacist his licence shall be revoked. The remainder of the bill deals with the machinery whereby prosecutions shall be set in motion.”

The necessity of a similar bill has become imperative in India. As far as we know the Government of India being an excise trader cannot venture to make the law.

Ricinus in Gallstone Colic.

The North American Journal of Homœopathy of February, takes from Dr. Bernay's note, in *Homœopathische Monatsblätter*, the following remarks:

"The pathogenic and toxic symptom of ricinus show striking similarity to an attack (with the sequelæ) of gall-stone colic. Experience has taught ricinus in alternation with belladonna exercises even in the 3 dil. a most favorable influence, rapid and almost as analgesic as a hypodermic of morphine and much more enduring and without the ill-effects of the latter. This amelioration is especially striking if there be great nausea, greenish diarrhœa. Vertigo and anxiety with a sensation of epigastric pressure. The alternation with belladonna is particularly indicated if the attack be accompanied by much flatulence, an alternation of pallor and flushing in the face and violent pains compelling the patient to bend double. The ricinus acts upon intestine and liver, aided by the vaso-motor specificity of belladonna. Ricinus 3, belladonna 3, gtt x of each in two glasses of distilled water (200 grams), a spoonful in alternation every 10 minutes. If the vomiting persist the remedies may be given in cold water or the menstruum frozen and given as cracked ice. Ricinus is not only efficacious in the acute attack but pre-eminently so in the sequelæ, e. g.:

1. It cures the sequent jaundice.
2. It hinders and delays a recurrent attack or materially lessens its violence.
3. It acts potently upon the digestive disturbances which accompany the colic disease and which are exhibited as heaviness and flatulence several hours after a meal, especially after fatty or starchy food. Here experience has taught the value of ricinus, dil. 6 to 10, gtt. iii-iv or a few pellets a half-hour before meals. Marked improvement soon follows."

The experience of Ricinus in curing gallstone colic is a new feature. Ricinus creates violent colic and yellowish vomiting. The remedy is worth a trial in other cases.

Personal Experience with Small-Pox.

The *Homœopathic Envoy* of March writes:

"My husband and I left San Francisco November 1, 1901, on board a government transport, for Manilla. After leaving Guam, about November 18, all passengers were vaccinated. I was quite ill for two or three days, from the effects of the contagion, having considerable fever. The surgeon pronounced the scab a healthy one. My husband's vaccination was not successful on this or two later attempts.

We lived in a provincial city that was suffering from a scourge of small-pox. The death rate per day would have scared people at home. We were exposed continually in and out of our schools.

On November 16, 1902, I took the small-pox; fortunately an American physician was there to advise and help. He had seen us

high as one hundred and fifty people in a pest-house at one time and said that my case was far worse than any of them.

There were no nurses to be had, and my husband took care of me through the illness, and did not contract the disease. He was vaccinated successfully when a child, but none has been successful since.

I was sick in bed with the small-pox just four weeks, and was about two months longer in recovering fully. I was broken out from head to foot, alike, and the eruptions were so close together that they would break open and the virus would run down the doctor's hand when he took hold of my wrist to take my pulse. My fever was very high, remaining between one hundred and three and one hundred and four and a half for ten days, and I was conscious all of the time. My pulse was very rapid most of the time, reaching one hundred and forty-eight."

The danger of vaccination generally remains unreported to show the success of vaccination. Recently, we had the chance to see a few such cases. Three children were revaccinated from the same virus contained in one tube at almost the same time, by a municipal vaccinator. Two of them had moderate attacks of the disease. One, a girl of twelve had a half suppressed type of smallpox with high fever and delirium. The girl could be saved by the administration of homoeopathic medicines. Many cases have occurred like the mentioned incident ending fatally in a few. By observing the present epidemic, we have entirely lost faith on the fad of vaccination.

"Max" on Destruction of Rats.

"Max" writes in *Capital*:—

"Rats! Rats! The plague is again upon us trying to burn into our minds the lesson that unless we exterminate the evil, of which this pestilence is the visible and outward sign at its very root the city will simply shelter in plague and small-pox and all other diseases brought on by filthy men and filthy houses and filthy districts until all the non-immune amongst the inhabitants are killed off. We have resolved over and over again to improve and cleanse Calcutta for years past and again the execution of the scheme has been relegated to the lotus land of "put-it-off" for one year more. The Municipal Plague Department seeing that the root of the evil remains untouched have been doing all they can at the other end, viz., recording and tabulating the number of the seizures and deaths and seeing to the

proper disposal of the dead and to the disinfecting of the houses. This year they have been doing more.

Believing that rats are in some way connected with the spread of plague the Department have been conducting a crusade against these animals, and have been paying two annas per head for every live rat brought to the several District Stations. The results for the past 90 days ending 31st March last are as follows:—

		Total number Caught.		per day	Average.
District No. 1	...	20,218	...		225
Do. " 2	...	1,628	...		18
Do. " 3	...	3,784	...		41
Do. " 4	...	1,067	...		12

Even at the Head Office an average of a little 4 rats per day were tendered during the period referred to. The total number of live rats secured at a cost to the rate-payers of Rs. 8,379 was 27,038. The reward is now reduced to one anna per live rat. It will be interesting to watch the result of the reduction of the rate on the number that will now be tendered.

Besides these 27,038 live rats there were 11,700 dead rats picked up during the 90 days, or an average of 130 per day. There must be at all times a considerable normal death rate amongst the huge community of rats living in Calcutta and these 130 are of course part of the daily mortality. According to an eminent authority, the ratio of rats to human beings in a community is as 1 to 2. This would give the rat population of Calcutta at about 500,000. Now the natural fecundity of rats is something appalling, and the catching of 300 live ones every day does not in the slightest degree reduce the population. But the Plague Department mean well, and if the daily sacrifice of 300 live rats can even by the gift of faith, be connected with a corresponding decline in plague, it is surely folly on the part of the municipal believers to lower the rate of remuneration to the rat-catchers. Surely not a smaller but a greater inducement ought to be held out to them. If according to the Health Officer's opinion the catching of 300 per day causes a sensible diminution of the plague what would the catching of 600 or even of 6,000 not do. But whatever happens, be ye sure of this the natural and virulent fecundity of the species will baffle all your efforts to reduce the rat population of Calcutta. We will have to begin at the root if the plague tree is to be destroyed."

Kill the rats is the cry in India of the modern sanitarians. They seem to have lost their senses in this matter.

"Medical Practitioner" or "Doctor."

The British Medical Journal of March 31, says :

"BYRON sang, 'I want a hero—an uncommon want.' We want something much less uncommon—that is, a single word that shall denote a person who practises medicine, without reference to any special department or province of the art of healing. All other nations have such a word. The latin races have their "medicin" or their "medico"; the Germans their "Arzt"—a relic, we believe, of the title borne by high functionaries of imperial Rome; the Russians their "vratch"; the Swedes their "lakare"; the Danes and Norwegians their "læge." The last term reminds us of the old English word "leech," as to which Dr. Payne, in his FitzPatrick lectures, says: "It seems a pity that we have lost this useful word 'leech,' which survived through the Middle Ages (and, according to Archbishop Trench, much later in Ireland). At the present day we much need a collective expression for physician, surgeon, apothecary, doctor, medical man, all of them either partial or ambiguous in meaning; and in place of the seven syllables 'medical practitioner' it would be a great convenience to use the one syllable 'leech.'" It would certainly be a convenience, but we are inclined to think that the convenience would be too dearly purchased. To modern ears the term "leech" connotes only a blood-sucking creature which has medicinal uses, and its application to medical practitioners would simply invite every witling to devise fresh matter for laughter against our noble profession. This would soon come to be a serious addition to the dullness of a country on which the New Humour already weighs heavily. By what name, then, are we to be called? The Americans, with their practical sense, use "physician" as a generic term; this, however, is open to the objection that it must often be ambiguous. "Medical man," or the snobbish variant, "medical gentleman," is not comprehensive enough for the present day, unless we apply the grammatical rule that the masculine embraces the female. It is probable, however, that this would be objected to by lady doctors. The same objection lies to "medico," which, besides, has a smack of vulgarity. "Surgeon" and "apothecary," both of which were used by people in comparatively recent years to designate the general practitioner, are now obsolete in that sense. If a lady in society were to speak of "using the potticary," no one would understand her; yet Mr. George Russell, who is still in vigorous middle life, says he is just old enough to remember a great grandmother who used that expression when she meant sending for

the doctor. Mr. Richard Grant White, in his book *Words and their Uses*, sniffs disparagingly at "practitioner" as "an unlovely intruder who has slipped into the English language through the physician's gate." The fact appears to be that it is the lawyer's gate through which it has gained admission. It is formed from the old French "practicien," which is defined by Cotgrave in his *Dictionary of the French and English Tongues* (1632) as "a practiser, or practitioner in law, a pleader, etc." Another seventeenth-century writer who says the word was originally "pragmatitioner," applies it exclusively to lawyers. If a phrase of old Bishop Latimer in his sermon on the Lord's prayer, "Consider how long he (to wit, Satan) hath been a practitioner," be quoted in disproof there are many who would not accept this as a rebuttal. A word of more correct formation would be "practiser," and for this we might quote the authority of Chaucer, who says of his "doctour of physik" that he was "a verray parfit practisour." But why should we not gracefully bow to the force of usage, and adopt the designation already given us by the voice of the people, which has been called the voice of god? We venture to think it is mere pedantry that finds fault with "doctor" as the English equivalent of "medecin." There is the highest authority for this use of the word. Falstaff asks his page, "What said the doctor to my water?" In the *Merry Wives of Windsor*, mine host of the Garter Inn says: "Shall I lose my doctor? No; he gives me the potions and the motions." Dryden—whom we quote with regret on account of the rudeness of his speech—says, "So liv'd our sires ere doctors learned to kill." Defoe, in his *Voyage Round the world*, says, "Our doctors themselves (so we call the surgeons at sea)." A word which was good enough for Shakespeare and Dryden is surely good enough for us, more particularly as it conveys an implied compliment, that we are *par excellence*, the depositaries of learning and the distributors of its fruits."

In India the term doctor is applied to all medical practitioners, either lay, half-fledged, or full-fledged. The use of the word is so very loose here that it often causes irritation for making no distinction. The strict application requires it to be placed before the names of medical practitioners who are only M. D. To avoid all difficulty, it is now the custom to call Doctors all those persons who are properly qualified medical men. The modern use is to write Dr. Mati Lal Ghose M.D., Dr. Prem Chand Das, M.B., Dr. Kishari Mohan Banerjee L.M.S., It avoids also the confusion with Dsc., L.L.D., D.L., etc., which are non-medical epithets.

The next question of importance is whether the lay practitioners and apothecaries will be allowed the use of the term Doctor. They are called by their patients as such and they use the word as Dr. Anup Chand Datta, without any subsequent designation. In law courts they are not recognised as Doctors. The list of medical practitioners published by the Government of Bengal do not contain their names. We think it would be safe to exclude them from the category of Doctors.

Onosmodium in Muscular Asthenopia.

In the *British Homœopathic Society*, Mr. C. Knox Shaw read the following paper :

" SOME years ago, when the late Dr. Hughes was at work upon the "Cyclopædia of Drug Pathogenesis," he drew my attention to the probable value of onosmodium in muscular asthenopia. Since then, I have prescribed the drug frequently, and with marked benefit. But I have been much surprised to find to what a number the name and action of the drug is quite unknown. I have therefore ventured to bring a short notice of it before the members of the Society.

Onosmodium is a plant of the natural order *Boraginaceae*, growing wild in America. According to Clarke's "Dictionary of Materia Medica," it is commonly known as "false gromwell," a tincture of which is made from the entire fresh plant, including the root.

It was first proved by Dr. W. E. Green, who published his results in the *Hahnemannian Monthly* in June, 1885.

He appears to have proved the drug three times upon himself and twice on Mrs. C.

The head and eye symptoms are marked and characteristic. I give them in the order of frequency of occurrence.

Dull occipito-frontal headache. Dull heavy pain in frontal regions and in both temples, also in mastoid region, the temporal headaches being most markedly left-sided. Headache over both eyes. Dull pain on the top of the eye-balls. Feeling of tension in the eyes. Wants to look at things very far away. The eyes feel tired, as if they were stretched wide open. The eyes feel tired. The lids feel heavy.

The vision is blurred. During the proving visual acuity was reduced from $\frac{10}{10}$ to $\frac{8}{10}$, and remained so for several days, returning to $\frac{10}{10}$, when the drug was left off.

Ophthalmoscopically it was noted that the optic discs were hyperæmic and the retinal vessels engorged.

Associated with the head and eye symptoms there were certain other frequently recurring ones: numbness and weakness in the legs, tired, weary feeling in the limbs, weariness, very tired.

Another marked symptom is rawness and dryness of the throat. The drug is a sexual depressant in both the male and female, and in women excites uterine and ovarian pain, as well as aching and pain in the breasts.

When studying the drug one is struck with the marked association of the head and eye symptoms with those of great muscular tiredness and weariness, especially of the lower limbs.

The cases in which I have found the curative sphere to be most marked are those with dull, aching occipito-frontal headache, or left-sided headache, with heavy lids and tired, weary eyes, with inability to use them for any length of time, general lassitude and weariness, especially of the limbs, a feeling of tiredness all over.

We meet with this condition very frequently in cases of asthenopia, when the symptoms are out of all proportion to the amount of the error of refraction discovered.

I am convinced that it is not wise to ignore these small errors of refraction, and that it is necessary to correct them optically, especially in astigmatism, when the asthenopic symptoms are marked, so that I almost invariably give the patient a prescription for glasses, even when ordering the indicated remedy. As the prescribing of glasses in a great many cases is all that is needed, and all symptoms will disappear under their use, it not infrequently happens that no prescription for medicine is given unless the patient continues to complain at a subsequent visit. In many cases of errors of refraction we have not only to correct the optical error, but to treat the temperament of the patient in whom we find the error, and it is in such cases that we find drugs like *onosmodium* so useful. Similar acting drugs are *actea*, *ruta*, *kalmia*, *gelsemium*.

Onosmodium has been used in all dilutions from the mother tincture to the *cm*. I have prescribed it most frequently in the *2x* or *3x*.

Mr. KNOX SHAW, in reply, said he wrote the paper with a very definite object. It had been so often said that from the surgical section no therapeutical work was ever presented. It had been his desire to write a short paper which would convey a certain amount

of information, which he trusted would be valuable, and to set an example which might be followed by others. It was a complete omission on his part not to have added *natrum muriaticum* as one of the remedies for asthenopia, because he had found it of extreme value, and had found it helpful even in such a material dose as 6x. He had used it occasionally in the thirtieth dilution. He had used *lillium*, but it had never been a drug that had "caught on" with him. He had used it in cases where he thought the astigmatism was due to ciliary muscle spasm, and now and then he had obtained benefit from its use. He would give *actea* where asthenopia was associated with some pelvic disturbance. It was extraordinary what a number of people with a pelvic disturbance had muscular asthenopia, and in such cases he prescribed *actea* or *macrotin*."

The remedies for Muscular asthenopia are few in number. *Natrum Muriaticum* is a valuable medicine, and the addition of *Onosmodium* imparts valuable help.

OBITUARY.

DR HURRO NATH ROY, L.M.S.

Dr. Hurro Nath Roy was an inhabitant of Mahiarhi about twelve miles south of Calcutta. Being born in a Piral Brahman family he had many friends among them in Calcutta. He graduated from the Calcutta Medical College in 1867 and shortly after, selected Allahabad for his field of activity. After showing his skill in the orthodox system, he gradually leaned towards homœopathy, observing the immense superiority of the new system. Subsequently Calcutta drew his attraction as the premier town of India where homœopathy was preferred. He wrote a few books on the practice of medicine and other subjects and was among us about two decades manifesting the success of his achievements, till he was ruthlessly taken away by the great annihilating force, leaving an old mother, a devoted wife and children to mourn his loss. About seventy he was when the sad occurrence took place. He had diarrhœa for some time but being always busy with practice he could not think of rest, till eternal rest and peace was forced on him after an active work of thirty-nine years. As a Vice-President of the Hahnemann Society, he always evinced an ardent zeal for professional status. We mourn the loss of a friend and colleague. Our sincere condolence to the bereaved family.

CLINICAL RECORD.

Indian.

A CASE OF SUPPRESSED SMALL POX.

By Dr. Hem Chandra Ray Chaudhuri, L. M. S.

S——— a boy aged 15, residing in Jadu Nath Srimany's Lane was first seen on the 3rd February, 1906. He was suffering from fever and eruptions which seemed to be small pox, from the morning of the 30th January. I saw two matured pocks, one on the left cheek and another on the right chest near the right axilla. The face and body were covered with raised papules. They were more than erythemata and less than pocks, having blackish tops. The nature of the eruptions gave fright to the family. A few medical practitioners pronounced an unfavourable prognosis and they retired without administering any medicine. The Medical Inspector employed to look after Smallpox cases and Vaccination was of the same view with others. The father of the boy though not being in favour of homœopathy was yet obliged to call me as a last resort, for he had horror of quacks who pretend to cure small pox cases, I mean the so-called *Sitala-Pandits*.

I saw the boy at 9 a. m. He had then the temperature 101·4 F., with thirst and restlessness. He had no delirium. *Bell.* 30 was prescribed. In the evening the temperature rose to 102·6.

4th February. Temp. at 7 a. m. 101.

The same medicine was continued. Evening temp. 103.

5th. The eruptions have risen up and assumed suppuration.

In other respects he was almost the same. Morning Temp. 101·6. *Variolinum* 12 dec. Evening temp. 103.

6th. Morning temp. 101·6 *Variolinum* 12 dec. Evening temp. 103·2.

7th. The pocks have taken the confluent type. Morning temp. 102. The face was considerably swollen as well as the body. *Ant. t.* 6 dec. Evening temp. 103·4.

8th. Morning temp. 102·4. Was delirious and restless at night. No change for the better. *Ant. t.* 6 dec. Evening temp. 103·4.

9th. Was delirious and restless at night. Burning sensation was accompanied with thirst. *Placebo*.

10th. The condition was almost the same. Morning temp. 103. Was very restless and delirious at night; had great thirst. *Melandrin* 30. Evening temp. 104.

11th. The morning temperature came down to 102. The other complaints were rather less than yesterday. *Melandrin* 30. Evening temp. 101.

12th. The temperature has come down 100 in the morning. The accompanying complaints were far less. Evening temp. 99.4. The same medicine.

13th. He was doing much better. The confluent pocks were drying up and forming masses of scabs. The swelling of the face and limbs has considerably lessened. Morning temp. 98. *Melandrin* 30. Evening temp. 98.

The patient gradually recovered and only *Placebo* was given after this. He could come out of the room about three weeks after the 13th February. The last difficulty was with his eyelids which could be opened gradually and with great difficulty. The conjunctivae were affected. The cornae were without any touch of ulceration. The boy being my neighbour I could see him now and then. Rice and fish soup were given about three weeks after the first appearance of the pocks which were first observed on the 30th January.

Remarks.

In this case the unfavourable symptoms were so many that they yielded under the influence of our medicines. *Bell.* helped the issuing out of the suppressed eruptions. The administrations of *Hep. sulph.* was not necessary to work against suppression. The severe confluent type yielded to *Melandrin*, after the failure of *Ant. t.* The high character of the suppurative fever was an index to its severity. The use of thermometer could demonstrate the morbid nature of the changes undertaken by the pocks. The gradual subsidence of the temperature showed the success of *Melandrin*, as the fever never yielded to *Ant. t.* The case proves the usefulness, of thermometer in such cases, without which any rational treatment would have been impossible. The use of *Melandrin* becomes manifest in this case of confluent small pox on the failure of *Ant. t.*

Foreign.

TUBERCULINUM AND ARSENICUM IODATUM IN ALBUMINURIA.

By DR. A. LAMBREGHTS, of Antwerp.

Tuberculinum.—I was led to experiment with this medicine in nephritis because I had been struck with the constancy and intensity of the kidney symptoms in tuberculous patients undergoing treatment with Koch's tuberculin. I found, in fact, that if a relatively feeble dose of tuberculin be injected under the skin of a phthisical patient whose kidneys are sound, sharp pains are soon experienced in the region of the kidneys; the urine becomes albuminous and at times contains a notable quantity of blood. Tuberculin is therefore capable of producing well-marked acute nephritis, and the three symptoms, renal pain, albuminuria, and hæmaturia, are included in the pathogenesis of *tuberculinum* published by Dr. Mersch in the first volume of the *Journal Belge d'Homœopathie*.

Since that time I have had the opportunity of trying the effect of the drug in different varieties of nephritis, and I have observed that it is especially efficacious in infectious nephritis, such as the nephritis supervening upon scarlatina, upon influenza, or upon erysipelas. Tuberculin would be specially indicated if the patient showed any disposition to tuberculosis or to catarrhal pneumonia. Dr. Jousset fully confirms the beneficent action of tuberculin in post-scarlatinal nephritis.

The remedy appears less efficacious in chronic nephritis; nevertheless I believe it may render important service in the treatment of Bright's disease associated with tuberculosis or pulmonary hepatisation.

Clinical observation :—

CASE I.—Marie H., aged 9 years, of lymphatic temperament, and without tuberculous antecedents. Was attacked with scarlatina on March 10th, 1904. The malady pursued a normal course under the influence of the usual homœopathic remedies, when about the eighteenth day symptoms of acute nephritis showed themselves. The eyelids were puffy, there was slight œdema of the ankles, and the urine contained 3 per 1000 of albumin (Esbach). R. Tuberculinum 6 and milk diet. After ten days of this treatment the urine contain-

ed only half the quantity of albumin, and the œdema of the ankles had totally disappeared. At the end of the fourth week there was no trace of albumin remaining.

CASE II.—Auguste V., aged 58, brewer, seen Nov. 14, 1903. The patient had had some weeks previously a violent attack of influenza, the respiratory and digestive symptoms predominating. This was followed by acute nephritis with well-marked uræmic complications. When I first saw the patient he was delirious; there were vomiting and convulsions; the pupils were dilated; the urine was sanguinolent and contained about 8 per 1000 of albumin. At the right base there were dullness and some fine dry rales. The tongue was coated, bowels constipated, temperature 38 C.; there was no œdema of the lower extremities. I prescribed cupr. acet. and cantharis to combat the uræmic complications. Under the influence of these two drugs the head-symptoms improved considerably, and the patient recovered consciousness the very first day. Nevertheless the urine remained red and strongly charged with albumin, I then tried tuberculinum 6, which appeared indicated by both kidney and lung symptoms. The patient used the remedy for a month, and by Dec. 14th he had completely recovered, not a trace of albumin remaining in the urine.

CASE III.—A woman of 40, of lymphatic temperament, showing old cicatrices on the neck, and two of whose children had died tuberculous, was seized with erysipelas, which commenced with the *ala nasi* and invaded face and scalp; then these symptoms disappeared suddenly, and she complained of vague pains in the loins. The urine contained blood and about 1 part per 1000 of albumin. There was but slight œdema. The tuberculous constitution of the patient led me to prescribe tuberculinum 6, which answered perfectly. At the end of ten days the patient was completely cured.

Arsenicum Iodatum.—This is one of the most important drugs in chronic albuminuria. Its homœopathicity is undoubted; in fact in toxic doses it completely disorganizes the kidneys, and we find in the urine albumin and the formed elements from the renal gland. In exceedingly minute doses it acts as a re-constituent of the kidney, and under its influence the albumin diminishes in a marked and constant manner even in the gravest cases, as I have often had occasion to testify. Iodide of arsenic is specially efficacious in the

lower triturations (third or second decimal). The high dilutions seem to have a less certain and prompt action. It is especially indicated in the chronic nephritis of anæmic patients, in parenchymatous nephritis, and in the interstitial nephritis of arteriosclerosis.

CASE I.—The patient was a farmer, aged 47, suffering for several years from parenchymatous nephritis. In consequence of a chill the malady became aggravated; œdema showed itself in the lower extremities and made rapid progress. Sudorifics, purgatives, and diuretics were exhibited, but without success. *Paracentesis abdominis* was performed on three different occasions, but each time the ascitic fluid collected again within three or four days, and the medical attendants gave a hopeless prognosis. It was then that the patient's wife came to me begging me to examine the urine and to tell her if there were still some chance of a cure. A rapid examination of the urine showed that it contained a large proportion of albumin. On a more careful analysis it was found to amount to 15 grams per litre; it contained numerous hyaline and fatty casts and was deficient in urea. I commenced treatment with cantharis, but without result. I then administered first arsen. iod. 3x, and soon afterwards arsen. iod. 2x, under the influence of which drug considerable amelioration took place; the urine became more abundant and the anasarca disappeared insensibly.

After six months' treatment the urine still contained about 2.5 grams of albumin, but the patient believed himself cured and left off medicines. I had occasion to see him lately, after an interval of five years, and though the urine still contains about 2 grams of albumin, the patient has been able to follow his out-door occupation without experiencing very much fatigue.

CASE II.—On Jan. 28, 1903, I saw a young girl of 14 who had never menstruated, and who had suffered from chronic nephritis for more than a year. She presented all the symptoms of anæmia, pale tint, blanched lips, palpitation, oppression on the least exertion, neuralgia, leucorrhœa, etc. The urine contained 2 grams of albumin. The treatment hitherto had been entirely unsuccessful. Arsen. iod. 3x had completely removed the albuminuria at the end of three weeks and the general condition had very markedly improved.

CASE III.—I am at present treating a young man of 23 suffering from chronic nephritis for the last two years. When I first saw him

his urine contained 5.5 grams of albumin and numerous hyaline cylinders. The different allopathic drugs to which he had been subjected had had no influence upon the quantity of albumin. I prescribed arsen. iod. at first in the 3x and then in the 2x trit., with a diet consisting of milk, vegetables, and fruit. When next examined the urine contained only 1.5 grams, and the hyaline cylinders had completely disappeared.—*Monthly Homœopathic Review*, February 1, 1906.

CASES ILLUSTRATING THE ACTION OF *SULPHUR*
IGNATIA, AND. *SEPIA*.

BY DR. STONHAM.

CASE 1.—H. K., aged 33, a fur-skin dresser. Admitted to the London Homeopathic Hospital on July 22, 1903, as an out-patient.

Five years ago the patient had pleurisy. Previously he had very perspiring feet, but after the pleurisy the feet became dry; and there was also left behind from the pleurisy a burning pain at the base of the right lung—the seat of the pleurisy—not constant, but frequent.

He expectorates much bluish phlegm in the mornings only. He smokes a good deal in the evenings, and takes six to eight glasses of ale daily.

Nine months ago an eruption started, at the bases of the toes of both feet, consisting of watery vesicles which are very irritating, and when they burst the fluid from them is very acrid, and the surrounding epidermic areas are inflamed by it and destroyed, the dead epidermis then peeling off, leaving a raw, red surface. This heals up in from eight to ten days, but a day or two later the whole process recommences, so that his feet are never really free from eruption.

He feels in good general health when the eruption is fully out, but just before it comes out he feels "out of sorts." There has been no burning pain at the site of the old pleurisy since the eruption commenced nine months ago. There are no physical signs of abnormal character to be detected in the chest. He has attended the London Hospital, the Westminster Hospital, and nine different doctors, but gets no better.

July 22, 1903.—*Sulph.* 30 m v. *nocte manequa*.

August 5th.—The feet have gone through their cycle of eruptive changes one since he was here. The eruption is now in the healing stage. The burning pain has returned in the back. *Sp. Vin. Rect. nocte maneque.*

August 19th.—Has gone through another but shorter and less severe cycle. Is now practically well again, and has been so for nearly a week. The feet are in better condition now than they have been in for months. Hardly any burning pain in the lung. *Rep. S. V. R.*

September 16th.—The eruption has not broken out again, and the foot is well. There is only a dusky discolouration of the skin over the formerly affected area. A slight, dull pain under the right scapula, which comes soon after rising and lasts till 7 p.m. *Sulph 30 m.v.* alternate mornings for 14 days.

October 14th.—No return of symptoms. *Rep. Sulph.*

November 11th.—Feet still quite well. Burning in spot over base of right lung comes on at 2 p.m. and lasts till 8 or 9 p.m. He is sitting at work all that time; When he gets up and walks about the pain goes. It does not come on Sunday when he is not at work. His employment is to dress all kinds of skins, and this involves much use of the right arm. *Ars 30 m.v. om. mane.*

December 5th.—Feet remain well. Burning pain under right scapula gone.

CASE 2.—Miss B., aged 20, in September, 1903, had a bicycle accident, running unexpectedly when on her bicycle against the shaft of a cart, which struck her over the left eye. She met the cart and ran straight between the horse's legs; she was not run over. She was taken into a shop and given restoratives, as she nearly fainted, but did not actually lose consciousness. There was not much loss of blood, and no great injury to bone or tissues. At first little effect seemed to result from the accident, but a fortnight later it was noticed that she was more childish and had foolish notions and actions, and these increased. She feels she can take no interest in her work, and does not care whether it is done or not, but goes on doing her household duties mechanically and without thinking about them, and consequently very slowly and inefficiently. She has a constant desire to watch other people and windows of the opposite house, and is under the dominant idea that they are all watching her. She

laughs at trifles, and in a silly manner, and also easily sheds tears. Wishes she had not long to live. Feels she is "giving way to the devil" and does not care. Cannot think steadily on any subject. Appetite and sleep are good; physical health good; pulse 80. No menstrual irregularity. She is not at all timid, and rides her bicycle as before the accident, perfectly fearlessly.

November 3rd.—*Ign.* 30 pil. ii. t.d.s.

November 7th.—Less melancholy the last few days; less inclined to cry. Is now quite conscious that her ideas and notions were silly, but said she could not help them. There is a general want of mental tone, and a childishness which is unnatural to her. Cont. *Ign.* 30.

November 21st.—Very much better. Still a little childish, but all melancholy has gone, and she takes an interest in work and amusements.

December 19th.—Is now quite well, and has lost her childishness. She has since nursed her mother through a long and fatal illness without the least sign of return of mental indisposition.

CASE 3.—Miss E. Y., aged 13, had for over twelve months suffered from strumous ophthalmia with ulceration of both corneae, conjunctival injection, and extreme photophobia. She had been under skilled homeopathic treatment all this time, with occasional ameliorations and repeated relapses. After coming under my treatment she fared no better, though she was given all the usual eye medicines—*Merc. cor.*, *Bell.*, *Euphrasia*, *Aconite*, *Conium*, &c., and had various local treatment as well.

At last it was decided to prescribe entirely on the general condition of the patient, and to use a repertory. There were no very marked symptoms beyond the state of the bowels, which were constipated. The feces were small and hard, and passed with difficulty; there was frequent urging with the passage of nothing but flatus on stool being attempted. This characteristic symptom of *Sepia*, together with the eye symptoms of *Sepia*—great sensitiveness of the eyes to the light of day, inflammation in the eyes, burning in the eyes, lachrymation—caused the selection of *Sepia*, which was given in the 12th centesimal dilution night and morning.

Under this treatment rapid improvement both to the eyes and general health took place. The bowels began to act regularly and sufficiently; she became less timid; got to sleep better (she had lain

long awake before). The corneal ulcers healed and the eyes lost all inflammation, but the healed ulcers left behind them corneal opacities.

A certain degree of astigmatism resulted, which was partially corrected by glasses; but it took two to three years for the opacities to clear off, during which time there was occasional slight relapse of the ophthalmia, always immediately checked and improved by a few doses of *Sepia*. For the last two years she has had no trouble with the eyes at all, and the corneal opacities have quite cleared away; and she sees to do a large amount of clerking work without spectacles and without eye strain.—*Homeopathic World*, April 2, 1906.

Gleanings from Contemporary Literature.

ADULTERATION OF FOODS AND DRUGS, THEIR RELATION TO THE PUBLIC HEALTH.

BY AMANDA C. BRAY, M.D.

Worcester, Mass.

The conservation of the public health is a duty not wholly belonging to the medical profession, although the world looks to those who have received medical training and have earned medical degrees for instruction in hygiene and the rules which should govern and regulate life. It has been the custom to turn to the physician when health has broken and disease seized upon the vital organs, but now, more and more the world is turning to the physician for information upon all subjects pertaining to longevity and robust health. The effort to live to a "green old age" free from disease and suffering is the goal toward which all are turning—for the ideal life is the one which results in work accomplished, in progress achieved, and all things equal, that life must be a healthy one. The physician need not be deterred from teaching the laws of health for fear that he may diminish his professional income because it takes a certain amount of sickness to exhaust an invalid, and if this is extended over a period of eighty years he will make as much out of it as he could have done in forty years, so that from a business point of view there is no reason why a physician should not be a teacher of hygiene.

One of the many and largest factors which influence the health of the people is food—because eating is the chief industry of the race. There are thirty million wage earners in this country drawing twenty-five million dollars a day—and of this amount, three-fourths are applied to the purchase of food and its preparation. A subject that monopolizes 3-4 of the

energies of the people is surely one well worthy of discussion and one worthy the attention of a body of physicians whose duty is not wholly the curing of disease but whose vocation has extended to the larger purpose of conserving the public health.

No reading man or woman is now ignorant of the appalling extent of adulteration of food and drugs, and of the disgraceful laxness of the Senate which allowed the pure food bill to die in its last session. The fact that nearly every State in the Union has enacted laws more or less stringent against the sale of adulterated foods containing harmful adulterants, and against false articles of food and medicine, shows conclusively that the conditions of the market are such that these measures are a necessity. There is not a single enlightened nation of the earth that does not attempt to protect its people from the injury of poisons and destructive agents in foods and drinks and also against misbranded articles. We are living in an artificial age, consequently we must employ artificial means to sustain life. The average business man cannot devote ten hours a day to confined labor and at the same time retain his health, yet that is what is expected of the average clerk and several hours additional to the successful man because business demands it and they are compelled to meet those conditions. A hurried life—without leisure, without sunshine without exercise in the open air, with indiscriminate and hastily eaten diet, must necessarily carry with it a long train of nervous conditions making the victim of these irregularities an easy prey to disease and broken health.

By artificial means and scientific methods the average life of man has been prolonged in the last fifty years, and it has become a known fact that proper diet varied to meet the wants of each individual is not only the greatest preventive of disease but the most potent panacea of the ills of the day.

The nation is unable to prescribe a dietary course for each individual—it cannot say what each one shall or shall not consume, but it can and should be morally responsible in its protection of the people from fraud and imposition, so that acting intelligently a man may procure such foods and drugs necessary for his physical condition and be assured that he is buying the article that he desires. It is a duty that the government owes each citizen, to shield him from the greed, rapacity and the dishonesty of those on whom he is obliged to depend and to protect his rights.

The Secretary of Agriculture a few years ago estimated the sale of adulterated foods in the U. S. in a single year at \$1,175,000,000,00, or about 15% of our entire commerce in foods. This estimate was made from the reports of the food commissioners of several states and such other sources as he could command and to be conservative he adopted but 50% of the total result shown. When one thinks that the great bulk of our food products consists of flour, potatoes, vegetables which are seldom adulterated, we can see that the percentage of adulterated articles must be enormously increased. I quote from the commissioners' report :

"One might suppose that the meats offered for sale would be generally pure and true to name, but of potted chicken and potted turkey, which are common products, there is really not a can found which contains in determinable quantity either chicken or turkey." "More than 90 per cent. of the meat markets use chemical preservatives, and in nearly every butcher's shop could be found a bottle of Frezsem, Preservaline or Iceine as well as Bull Meat Flour. The amount of boracic acid employed in these meats varied to a considerable extent and expressed in terms of boracic acid in sausages and Hamburg steak would probably range from 20 grains to 45 grains per pound. Scarcely a ham can be found that does not contain borax, and in dried beef, smoked meats, canned bacon, in canned chip beef, boracic acid or borates is a common ingredient." "Ninety percent of the so-called French peas are found to contain copper salts in varying quantities, and in a few, samples of aluminum salts were found in addition."

"Eighty-five per cent of the canned mushrooms were found to be bleached by the use of sulphites, and apparently no definite rule was followed by the canners, and in many instances the contents of the can proved to be nothing better than discarded stems of mushrooms—but there was nothing to show this on the label."

When the food law went into effect in North Dakota there was but one brand of catsup which was pure—that is—free from chemical preservatives and coal tar coloring matters. Many of the catsups offered for sale were made from the waste products of canners' pulp, skins, ripe and green tomatoes, starch paste in large quantities, coal tar colors, chemical preservatives, usually benzoate of soda or salicylic acid, the whole highly spiced and not always free from saccharin. In many instances the base was largely pumpkin."

"Seventy per cent of cocoa and chocolate were found to be adulterated, the cheaper grades having some flavoring matter such as synthetic vanilla added to improve the quality, some so badly adulterated that the beverage made from them would never be suspected of having been produced from the cocoa bean."

I quote from an article by Senator M'Cumber :

"Glucose, the king of personators, does duty in a thousand ways. Colored and flavored with a little Timothy seed, it forms the great bulk of our strawberry jellies. A dash of different flavoring and it is by magic transformed into raspberry, apple, or any other kind of jelly; it constitutes the greater part of our strained honey; even the bees themselves are readily deceived and empty readily barrels full of it when near their hives. It has driven much of the pure cane molasses and syrups out of the market. There is more Vermont maple sugar sold every year than that State can produce in ten years. Glucose, burnt sugar, and a very little poor molasses, with flavoring, feeling the demand. Hake or any other kind of fish cured and put up in packages, comes to our table as codfish."

A great proportion of our ground spices are mere imitations. Vanilla beans and nutmegs have their oils extracted and are then put upon the market. Apple parings, apple cores and rotten apples go into a vat, and from that extraction every known kind of jelly is made."

"All kinds of wine are made from a cheap basis, flavored and colored to imitate the genuine article. Dozens of brands are drawn from the same cask, priced in the market according to the value of the brand imitated. Cotton seed

oil and other oils, with the importer's brand showing a French or Italian source, are palmed off for olive oil. The filling has been driven out of cheese, but it has lodged in other articles of food. This cheese was manufactured by first removing the butter fat from the milk by an ordinary separator. This was made into butter and sold, and an amount equal to the weight of the butter in deodorized lard was substituted for the butter fat. Now the same thing is done with condensed milk—the butter fat is extracted from the milk and an equal amount of hog fat substituted for it.

"Ice cream is made without any cream at all, condensed skim milk, condensed until it is as thick as cream and mixed with neutral lard. Even cream purchased for our table is manufactured from skimmed milk with condensed milk added to thicken it to the proper consistency. Chocolate cream candies are filled with this same emulsion.

"Cider vinegars are for the most part manufactured articles without a drop of apple juice. Drugs prescribed for the sick are adulterated and misbranded."

Last year the New Orleans paper printed the following :

"The surgeons of the New Orleans Eye, Ear, Nose and throat Hospital have noted the great number of patients entering that institution from the country around New Orleans suffering from partial or total blindness. An investigation disclosed the fact that a cheap antiseptic containing a large amount of wood alcohol has been used throughout Louisiana. The city chemists found 30 per cent. at least, of methyl alcohol in one of these specimens, rendering them totally unfit for internal administration, as methyl alcohol when taken internally acts directly upon the optic nerve. The majority of persons affected will not fully recover their eye sight."

An article from the New York *Evening Post* of January last is along the same lines :

"Of 375 samples of phenacetin bought from as many retail druggists in the City of New York, 315 were found to be adulterated with acetanilid a drug having a depressing action on the heart. Of these adulterated samples 267 were mixtures of phenacetine and acetanilid, while others were pure acetanilid."

The paper states :

"The seriousness of the adulteration will be comprehended when it is recollected that phenacetin is an antipyretic so commonly used that it may be practically considered a household remedy. Furthermore it is almost universally dispensed by druggists all over the country without a physician's prescription, the usual dose being from five to ten grains. The wholesale price of phenacetin is approximately \$1 per ounce, while that of the adulterant—the substituted acetanilid—is 25 cents per pound. Hence the financial inducement to make the substitution is consequently great."

There is absolutely no reason why those who buy food or any other commodity should be cheated into purchasing something different from what is purported to be sold to them.

There are a large number of materials which have come into existence in recent years, that serve in their way an admirable purpose, yet are not desirable from the standpoint of food supplies. Formaldehyde is an excellent preservative as any undertaker will be willing to affirm, but when fish, meat, milk, or cream or any other substance is prevented from

undergoing deterioration by an infusion of formaldehyde, it is very likely that the food thus treated cannot pass through the process of human digestion without harm to the person who eats it. Beer may be kept from decomposing by using salicylic acid, but those who drink it thus treated subject their physical system to a strain better avoided. No one would knowingly purchase for his own use a beverage or a food which he knew contained some harmful ingredient and the brewer would be the last person in the world to comply with the law by advertising the fact in plain English on the label of each bottle that he sold.

There are many adulterants that are harmless but used to give an attractive appearance to the article in which they are blended. There is hardly any butter sold that is not colored and it is exceedingly inconsistent on the part of those engaged in the dairy business to insist that the makers of oleomargarine shall be prohibited from using coloring in the making of their goods, while coloring matter is freely used in the dairies to imitate June made butter, in that made any month of the year and often dyed a deep saffron totally unlike the delicate yellow it should be. The coal tar products are freely used in coloring sausages and preserving meats, the addition of nitrate of soda, nitrate of potash besides preserving the meats also intensifies the color. Potassium nitrate is so uniformly employed by all packers of meat as to be considered a normal constituent of the meat.

These conditions open up a vast field for discussion. Sophistication is an art and while it may only cheapen and may not be injurious to the health, it is a fraud. Milk diluted is not dangerous, but it lacks nourishment, hence it is a fraud, but when it is preserved by acid, it then becomes a menace to health. Jellies and jams manufactured by gelatin, vegetable dyes, and natural acids are simply frauds, but when made of acids are a menace to health. When any article is mixed or blended with another so that it reduces the nutritive strength of that article the consumer does not get what he pays for. The same is true of spices, the adulteration of which has become most scientific, wheat corn, ground bark, ground cocoa shells, mixed with ginger, clove, allspice, in fact, in all spices to a large per cent.

On examination canned goods are found to contain salts of tin and lead, the inside of the can often corroded. Dried and old peas are canned and labelled early June peas. The law provides that these goods shall be labelled "Soaked Goods" but many are found not so marked and if marked so illegible as not to be apparent. Tripe, oysters, salt fish are preserved with boracic acid. Bologna colored with aniline dyes (Bismark brown the most common). Even nuts do not escape the beautifying process, last year's pecans are colored a rich reddish brown to look like the fresh nut. A preparation called preservaline sold in boxes is advertised as an excellent preservative for cider, vegetables, fruits, jellies, jams, mince meat and on examination is found to be salicylic acid. According to directions three measures of the preservative added to one quart of water is all that is needed to preserve the article with no necessity to cook the

fruit at all. An example of commercial fraud pure and simple is egg substitute called N^oegg. The package contains two little boxes, one of white the other of yellow powder, advertised to contain nutritive value equivalent to the white and yolks of one dozen fresh eggs, alleged to differ in composition as whites and yolks of eggs, but consisting solely of tapioca starch in the white box and the same ingredient in the yellow box with the addition of Victoria yellow coloring matter.

There are so many drugs below the standard that the physician does not know, when his remedy fails, whether it is the person who does not respond to the action of the drug or if the drug is not what he supposes it is : aqua ammonia, powdered opium, opium tincture, iodine tincture, the precipitate of sulphur, with innumerable others.

The law is that all poisons used for external use, especially the mercuries, shall bear the red label marked poison with the antidote on the label. The law is evaded by placing the red label on the bottom of the bottle. Purely vegetable tonics recommended for inebriates are found to contain 41.500 of alcohol. Sulphur bitters advertised as having no alcohol contains twenty five per cent and no sulphur. Opium cures contain morphine, fig syrup is innocent of figs, prune extract has no prunes but aloes and so on down the list.

Brands of clam bouillon are invariably nothing but preparations of salicylic acid. Santiago West India Lime juice is a mixture of hydrochloric and salicylic acid with no lime juice at all.

When the German Government four years ago applied a new set of restrictions to the American meat products, one of these was based on the theory that borax was unhealthful. A great protest went up from packers and their sympathizers, saying, the excuse was a mere pretence, the real object was to hurt our foreign trade. Now, after careful investigation our Government vindicates the German contention. The law went into effect last June and great good has been accomplished based in part on the retaliatory theory that, "no country shall export to us any article of food or drink under ban of their law. What they let their people eat they may send to us." The Department of Agriculture was authorized by an act of Congress for the year ending June, 1903, to make an investigation to determine the effect of certain preservatives upon digestion and health.

The necessity for the investigation was found in the very general use of certain chemical compounds for preserving foods and of coloring matters for imparting to foods a tint resembling nature, or for producing colors pleasing the eye of the consumer. The use of preservatives is as old as civilization, the more important being sugar, salt, vinegar, wood smoke and alcohol. One of the chief characteristics of modern chemical preservatives is that it is often almost without taste or odor and for this reason its presence would not be noticed by the consumer in the quantity used, while nearly all in a concentrated form would reveal themselves by either odor or taste, as sulphurous acid, or salicylic acid.

The Secretary of Agriculture was deemed the proper official to make the investigation as the interests over his department are associated alike with the producer, manufacturer and consumer and any favoritism toward either quarter would be eliminated. The investigations were carried out upon volunteers since no one could be forced to undergo experimental treatment, the great disadvantage being the absolute control of "the experimentee." The young men were placed upon their honor, neither watched nor confined, were men of approved character, of college training and many of them engaged in scientific pursuits, and it was provided that during periods of observation they should continue in their usual vocations. Each applicant was required to fill out a blank describing the usual conduct of his daily life, name, address, age, any sickness within a year, condition of digestion, use of tea and coffee, use of tobacco, use of wines, beer, or alcoholic beverages, condition of bowels, the hours for defecation and urination, the hours of retiring and average hours of sleeping, the kind and amount of physical exercise. The applicant was selected from this data and the ability to do long and continued work was determined by this and his physical condition. All had passed the civil service examinations so that their moral character, sobriety, reliability, truthfulness and honesty, were vouched for. The kitchen, laboratory and dining room facilities made it necessary that twelve persons should be the maximum number under observation at a time. The hours for meals were breakfast 8 a. m., lunch 12 a. m., dinner 5.30 p. m., these hours conforming more nearly to their usual meal times. As the men were kept under observation from thirty to seventy days it was best to make the bill of fare as varied as possible, meats, beefsteak, beef, lamb, veal chops, pork, chicken, turkey, eggs twice a week, butter, milk, cream, all of the best quality, coffee and tea in moderate quantities. Desserts of custards, rice puddings, ice cream, with liberal supply of fruits. The bill of fare was changed every day but recurred regularly in seven day periods, making work uniform for the cook and steward both in the preparation of food and quantity used and supplied. The experiments with borax and boric acid were divided into five series of observations, three divisions of each the fore period, the after period. The fore period determined the quantity of food required to maintain the normal weight at constant figures, and normal metabolism as a basis of comparison, the quantity being so varied that by ten days there was no marked change in weight. Borax was selected as the first preservative to be experimented with as being most commonly used.

In the first part of the experiment it was mixed with the butter, but later it was given in capsules for when it was learned that a certain article of food contained it a natural dislike was developed for that thing, due to the mental attitude, and as it was known it was to be administered there was no reason why it should not be given in capsules and thus not interfere with any article of food. Small quantities were given in the beginning and increased to the limit of toleration and for each variation of

quantity a separate study of the digestive processes was made. During the entire time the food was weighed, measured and analyzed, the excreta weighed and analyzed. The Surgeon General of the Public Health and Marine Hospital detailed a physician to make physical and medical examinations once a week with symptoms noted, and if they fell ill incidentally or independently of their work, he prescribed for them. The examination of the blood was made regularly, temperature taken before and after dinner each day, pulse rate noted, the weight of the body made on platform scales with agate bearings, so that any slight difference, of even 10 grams, could be noted. All food analyzed, potatoes cooked, without seasoning, bread purchased of one baker and made of one variety during the entire period. The determinations were made of water, nitrogen, phosphoric acid, fat, heat of combustion and analyses made of the urine and excreta; also the effect of regular habits and the mental attitude noted. The preservative was given in quantity of one-half a gram at the beginning and increased to five grams a day, the quantity given during the whole period being 607.4 grams and of this quantity 468.6 grams were recovered in the urine. The after period was devoted to getting or putting the person back to his normal condition.

The general conclusions based upon the data show that borax and boric acid taken in the quantity stated tend to produce slight loss of body weight, and in the after period the majority continued the loss of weight, only a few showing a slight tendency toward recovery of normal weight. The tables showing the effect upon hemoglobin, number of red corpuscles, the calories, quantity of nitrogen, phosphoric acid, specific gravity, total solids, fats and volume of urine eliminated were very interesting. The medical symptoms of the cases show in most of them a tendency to a diminished appetite, feeling of fullness and uneasiness in stomach, often resulting in nausea, a dull persistent headache, some sharp, well defined pains not persistent. If administered continuously some time 4 or 5 grams a day there is total loss of appetite, with inability for work of any kind. Four grams a day was found to be the limit beyond which the normal man may not go, 3 grams a day can be tolerated by many and while injurious effects were felt they were able to continue work. While on the whole 1-2 gram a day is too much to receive regularly for it does create disturbance of appetite, of digestion and of health.

The sole objects of adulteration are to sell an inferior article at the price of a superior one; to preserve an article so that it may be sold after preservation as a fresh article and at as high a price, if not higher. The federal nation must recognize the existence of the evil of food adulteration throughout the land. It cannot shut its eyes and conscience to the fact, and strenuous exertions must be made to stamp out the food frauds.

If the nation will strike at the source of the evil by prohibiting commerce in adulterated and falsely branded foods in every state of the United States, there would be little difficulty in freeing our commercial field of counterfeit foods and drugs. The Government of the U. S. has

passed several laws to protect the integrity of its currency and coin. If the Government compels me to pay every purchase and obligation with coin of full weight and value, is it not the concurrent duty of that Government to protect me against fraud and imposition and see that I have in return what I am paying for and not a spurious article worth less than my money value, and what is worse, may also be detrimental to my health and also of those dependent upon me. The duty of the Government is not fulfilled so long as it does not protect me from these frauds. The national law should reach the manufacturers and the importers. It should deprive no man of what he desires to purchase, but it should compel all goods to unmask and simply compel all articles of food to be bought and sold for what they actually are. Such a law could easily be put into effect the result upon the morals and health of the people would be beyond computation and all business would be made legitimate.

THE COAL TAR LEMON PIE.

(*Baltimore American.*)

(A pure food commission in Chicago recently dissected a lemon pie bought out of stock, and found it to contain neither lemon, butter nor sugar. The principle ingredients were various forms of coal-tar and glucose.—News Item.)

They're making cotton clothes from wool,
 And iron things from wood ;
 They're making goodies out of scraps,
 And nasty things from good ;
 They're making paper things from rags,
 And money out of "sky ;"
 But this is sure the worst as yet,
 A coal-tar lemon pie.

They're making combs from kerosine,
 And pearls from olive oil ;
 They're making Belgian hares of cats,
 And syrup out of soil ;
 They're making buckwheat cakes from paste,
 And pumice stone—O, my ;
 But this is sure the time to kick—
 A coal-tar lemon pie.

They're making clothing out of glass,
 And butter out of grease ;
 While maple sugar, made from sand ;
 Is commoner than geese ;
 They make from scraps and chicken-bones
 Most terrapin you buy ;
 But anything we'll stand except
 A coal-tar lemon pie.

The North American Journal of Homœopathy February, 1906.

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