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CONSUMPTION

BY

A. C. ECKER M. D.

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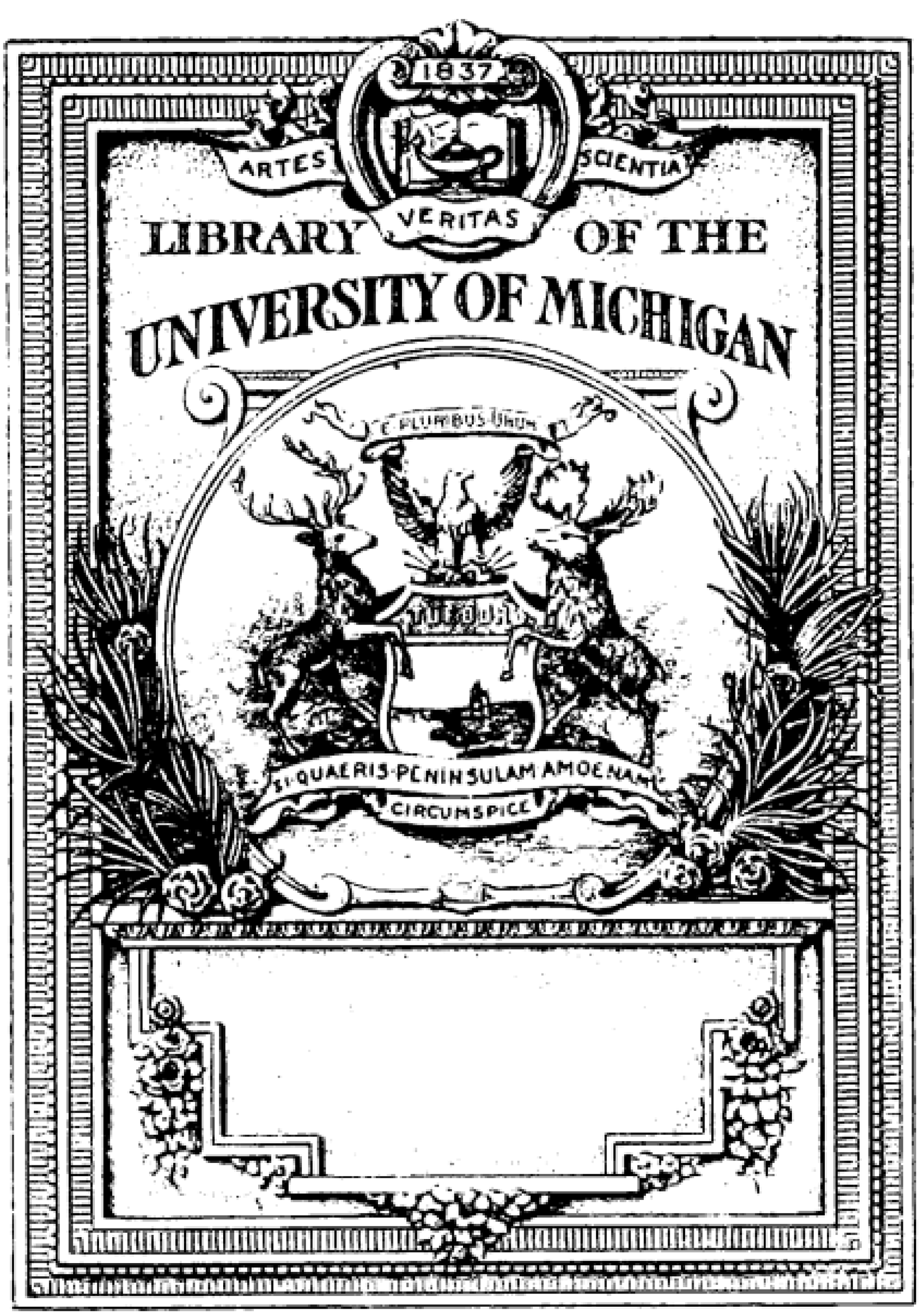

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CONSUMPTION

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TREATED HOMŒOPATHICALLY.

FROM THE GERMAN,

Ernst Ferd. Rückert.

BY

A. C. BECKER, M.D.

NEW-YORK:

WILLIAM RADDE, 322 BROADWAY.

1847.

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PREFACE.

THE number of medicines which have been tested for the purposes of homœopathic cure, is already very large, and in consequence of the rapid growth of the new school, we may fairly expect that many more will yet be added.

It is highly desirable to have abundance of well-tested drugs at hand at the bedside, the pathogenetic effects of which have been investigated not by a few, but many enquirers, according to a certain and well-approved method.

The larger, however, the number of remedies, the greater the difficulty in selecting the *right one* at the bedside.

Aware of this, many distinguished men have sought in various ways to obviate this difficulty. Not one has been entirely successful: some have individualized the groups of symptoms too much; others again, who presented a shorter totality, were deficient in special particulars.

In consequence of this, Dr. Hartmann wrote his admirable work on "Acute Diseases," which, however, includes a few of a chronic character. According to my opinion, more works of this kind should appear, which would be for the future more valuable than additions to the Materia Medica. I may be permitted to submit to the beginners in homœopathy my ideas regarding the manner in

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which a homœopathic therapia ought to be modelled, if it is to correspond with the spirit of this mode of treatment, i. e. if everything is to be based on facts, if every conclusion is to be drawn from observations before us, enabling the reader to search for the truth of such conclusions.

To carry out this idea, I have chosen a chronic disease: consumption of the respiratory organs.

I have omitted the pathology of this species of disease, because it is to be found in all the therapeutical works of the old school. I, therefore, submit fragments only.

In so far I would bespeak the leniency of critics, as to remind them that a physician, in full practice, must steal the time for literary labors; while I would also desire that they should faithfully expose whatever they may find deviating from pure experience. Bandying words is worse than useless; but pointing out errors can only be productive of good, both to the author and to science.

DR. RÜCKERT.

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INTRODUCTION.

No disease *more frequently undermines* the young life in its first bloom; no disease is so generally diffused amongst mankind—amongst all nations, ranks, and ages, as consumption in its various forms, which is more destructive and fatal than the much-dreaded Asiatic cholera. *The fifth part of mankind is sacrificed to it!*

There is hardly a disease against which more remedies, more different modes of treatment have been invented, and in none has the result been less favorable than in this; and yet, what disease is the young physician more frequently called upon to treat than consumption?

Hardly has he had time to select the field of his labors, and settle down, when those wretched objects, who could find relief nowhere, approach to seek it of him. It is very discouraging to him that he should have to build up his professional reputation on the treatment of such patients, knowing, as he does beforehand, that he will reap very little glory for his labors.

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It should, therefore, be the constant endeavor of practitioners to elevate the present standard of the therapeutics of this disease.

With this view, I herewith attempt to contribute a few stones towards the erection of the future great edifice, in the hope of possibly rendering assistance to practical beginners in their new career.

But I am disposed to shrink from the undertaking, when I consider what eminent men in ancient and modern times have worked at this edifice, and when I look back at the experience and investigations of such men as Bayle, Lorinser, Louis, Berends, Laennec, Autenrieth, Philipp and many others.

A Laennec dares to form an accurate diagnosis of the abnormal condition of the thoracic viscera, by examining the voice, respiration, and circulation in a small compass; dares to declare, by means of his stethoscope, whether tubercles or ulcers exist in the lungs, and even determines their form and size, and whether they are on the increase or decrease.

Laennec has, also, attempted to render more complete and practical the means of diagnozing by percussion.

How invaluable to pathological anatomy are the labors of Bayle, Laennec, Hastings, Louis, etc.!

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As manifold as these pathologico-anatomical results, are the views entertained respecting the formation of tubercles in the lungs, the origin of the various forms of pulmonary consumption, and their nosological order. Amongst the many writers on the subject, every one entertains his own views with regard to those points.

The majority of physicians agree as to the existence of a phthisical disposition in the system, and the possibility of its transmission in a family, from generation to generation, yet some deny this; Louis and Denis, for instance.

Gœden is of opinion, that the respiratory organs are by no means the only seat of pulmonary phthisis; they are merely its hot-bed, the scene of the development of its higher grades, and of the climax of its growth. The organic seat of its formation is in the arterial system.

Some observers lay a great stress on the occult, partial inflammations of the respiratory organs in the formation of tubercles and evolution of phthisis; others, again, doubt this.

We must all acknowledge the laborious research on the part of so many great men, for the immediate and remote causes of consumption, but, unfortunately, we find no unity in the results, although every one of

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them has abundance of proofs to adduce in support of his views.

I think it important to allude, in particular, to that form which is called by Philipp, phthisis dyspeptica. According to him, it commences with imperfect digestion, which is followed by symptoms of disease in the respiratory organs, and finally succeeded by ascites abdominalis. Alcohol-drinkers are frequently subject to this form of consumption. In these cases, we find, after death, the liver and spleen diseased, and only those parts of the lungs which are nearest the liver, in a state of suppuration.

Not Philipp only, but previously to him, Stoll, Portal, and others, have expressed their opinions, that consumption, originating in previous disorders of the digestive organs, is much more frequent than it is usually supposed to be.

Autenrieth attributed the origin of some consumptions to suppressed eruptions of the skin, and mentions positive signs by which he thinks he can easily distinguish this from others, which is disputed by other writers.

Many have endeavored to gain a firmer foundation for the diagnosis, from close examinations of the sputa—called pus proof—but the results have not been satisfactory.

It is not my intention to allude any farther to the opinions and experience of writers on

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consumption, but it remains for me to answer the question, What have the therapeutics of this disease gained thereby?

As regards auscultation and percussion, it is very desirable that they should be more generally resorted to in diagnosis, which frequently is so difficult. But will this be of any benefit to the treatment?

We may be ever so certain that the tubercles have softened, and to what degree; or that a vomica has formed, and that this is empty or full of pus, and we may yet remain as ignorant as we were before with regard to the means to be employed against those various conditions. At least, from France, where the stethoscope is mostly used, we have heard of no improvements in the treatment.

The prognosis can derive most benefit from all the latest observations and experience. Richter* says: "Pathological anatomy has given us the means of correctly diagnozing pulmonary diseases, but it is to be regretted, that it has had no influence on the treatment, which is about the same since as it was before." He says, again: "The treatment of suppuration in the lungs has gained nothing by the late careful pathological investigations. How meagre in this respect are the works of Laennec and Louis.

* A distinguished allopathic writer.

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At the best, they have led us to the conclusion, that the large array of medicines, recommended now and of old, are not only powerless in the treatment of these diseases, but do even more harm than good."

These are, certainly, confessions humiliating to suffering mankind, as well as to the practitioner, and especially so to the young physician.

Thus by this means—the endeavor to penetrate into the interior of nature, and to discover the character, the origin, and development of disease—we cannot reach the main object in view: *the cure.*

This has been the fate of the old school from time immemorial.

What means does homœopathy rely on? She looks at the outward appearance of the disease, directs her attention to all the recognizable symptoms, weighs well all ætiological circumstances, for the purpose of forming a correct view of the commencement, progress and development of the disease, without entering into any further investigations respecting its nature and character. She tries all drugs, which the Creator has given us, on the healthy system, for the purpose of becoming acquainted with their action and effects, in order then to administer them at the bedside of the patient in conformity with the immutable law of nature:

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"Similia similibus curantur." This is a different way, a laborious one, and totally opposed to that of the old school.

But since the means adopted by the latter have been unproductive of any benefit to the treatment, it is the bounden duty of the profession to investigate, and very seriously too, not in their closet, but at the bedside, whether homœopathy presents better results of treatment than allopathy, or not.

I will attempt to answer the following questions: "What can homœopathy accomplish against pulmonary phthisis? What has she accomplished? and What does she promise to accomplish in future?"

In reply, I shall: 1. relate cases from my own experience and that of others; 2. attempt to draw conclusions from them. and to find out indications for the remedies employed; 3. present a general view of pulmonary phthisis in separate groups of symptoms, and name the medicines which cover each group.

In what order shall I relate the cases? Shall I speak separately of phthisis tuberculosa, pituitosa, purulenta, etc.? If I did, I should give rise to critical objections. first, because many modern writers* do not view some of the above forms of phthisis as distinctive, but merely as changes of one and

* For instance, Laennec.

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the same disease, assuming the tubercles to be the fundamental form; secondly, because of the uncertainty, almost impossibility, of diagnozing between a mucous and pus phthisis; how very frequently the larynx is affected simultaneously with the lungs, or either sympathetically diseased only; thirdly, because for homœopathic treatment the nosological definition is superfluous, but an exact characteristic perception of the symptoms essential. Still some few cases are of so decided a character as to admit of a nosological distinction.

Thus, for instance, we find Case 1 a phth. trachealis; Cases 8, 21, and 22, phth. pituitosa; Cases 9, 10, 11, 12, 16, 17, and 20, in which p. tuberculosa run into exulcerata; 14, 15, 16, show a disposition to the formation of vomicæ, which emptied themselves frequently in quick succession. On the other hand, again, other cases are so little marked as to defy nosology.

The attention of those readers, who should not be inclined to follow me through all the cases, is especially drawn to the most interesting, such as 6, 9, 18, 19, 24, 25, and 27.

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Case 1.

A case of phthisis trachealis, in which *Acon.* 15, *China* 12, and *Drosera* 5, acted curatively, but which was still under treatment when entered upon the records.—*Pract. Mitth.* 1826, *p.* 10.

Case 2.

A lady, 36 years of age, married, but without children, after having been allopathically treated without any benefit, called upon me with a *phth. tuberculosa incipiens.* Symptoms:—The throat is sore and painful from the constant coughing, burning sensation in the fauces, the tonsils, uvula, and the whole soft palate are reddened, the salivary glands painfully swollen; it seems to her as if she were swallowing a solid body, a plug, without pain. Much talking causes pain. The voice hoarse and rough, burning

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and tickling in the larynx, provoking to cough. Taste in the mouth clean, but very little appetite. Stools hard and difficult, in small, round, consistent pieces, or narrow and squeezed, as if the rectum was much contracted. Some time before the anus was covered with hæmorrhoidal excrescences, and from time to time the rectum bled, affording her relief; a fortnight after menstruation there generally appears a knob on the anus which burns and feels sore. The catamenia has intermitted two months, after having previously for some time been very sparing, and lasting only from one to two days. A week before the appearance of the menses they were ushered in by flashes of fever, rush of blood to the head, heaviness of the eyes, which are reddened. The menses are followed by leucorrhœa, with lassitude in the thighs, with a sensation as if something descended from the upper to the lower part of the abdomen, and was going to fall out. This was succeeded by a feeling of emptiness in the belly. In both groins she feels as if something was pushing forward, the vagina burns on urinating, as if from something acrid, urine thick and having a sediment for a week past.—Cough dry, tickling, every third or fourth cough brings up some mucus. During the day she coughs but little, more, however, immediately before drop-

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ping asleep and after waking. Respiration is frequently difficult, particularly in going up stairs; stitching pain under the right false ribs, aggravated by coughing and shooting backwards between the scapulæ. The patient cannot lie on the right side. She does not readily fall asleep; does not sleep soundly, and wakes in perspiration. The cough is generally present from twelve to two in the night. During the day frequent yawning. She feels best in the morning; at noon she becomes tired, and towards the afternoon and evening the flashes of fever which are present during the day, accompanied by palpitation, alternating with chills, become greater. Warmth and rest render her most comfortable. The legs are weak, particularly in the joints. She is capricious and wilful, yet amiable and not quarrelsome.

Therapeutics.—I was agreeably surprised to find nearly all the above symptoms covered by *Hydr. Oxydul. Nigr.* which I gave at once in the first trituration, and ordered suitable diet. I am convinced now, however, that the potence was too low.

Result.—During the first week after the administration of the above dose all the symptoms were aggravated, but on the 7th day the relief commenced, and gradually all the symptoms disappeared which *Merc.* could cure. There remained only the ab-

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normal menstruation, some timidity, and fever flashes, which called for Puls., but the patient declined taking anything, having had these symptoms for years without much inconvenience. Till now (eleven monthssince I saw her first) she has continued perfectly well.—*Dr. H. Löscher in Lübbers.*

Case 3.

A child of 4 years, which had been afflicted for two years with a scrofulous phthisis pulmonalis, accompanied by constant night cough, rattling in the throat, and sinking of strength, being in an almost complete state of apathy, was entirely cured in a few days by one dose of *Belladonna.* Singularly enough the cure of the phthisis was succeeded by a swelling of the salivary glands. —*Dr. Stegemann in Dorpat.*

Case 4.

Is not a complete cure, but beautifully demonstrates the action of *Calc. carb.* X. in a phthisical state, removing nearly all the symptoms, and particularly changing a dry cough into a moist, accompanied by expectoration.—*Annalen,* 1, *p.* 344.

Case 5.

An old man, over 60, complained of severe tension across the chest, dyspnœa in walking

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and lying down at night, loud rattling in the chest on breathing, and a deep cough with expectoration. Two doses *Stannum*, in one week, acted very beneficially.

Case 6.

A man of 33, of a delicate, weakly constitution, irritable, sanguine temperament, pale countenance, and mainly occupied with mental labor, living naturally, was attacked without any apparent cause with a severe cough and expectoration, which remained for some time unattended to, being considered in the light of a mere transient catarrh. Finally, after it had lasted four weeks and assumed a serious aspect, I was sent for. I found the following symptoms:—Violent exhausting, shaking cough, now dry, or at least with tenacious mucus, then again, with copious and easy expectoration, which is sometimes watery mucus, at others thick, tenacious, lumpy, yellowish-green, with a sweetish salt taste, floating on the surface of water. Sometimes when he finds it difficult to raise, he begins to choke, and this fills his mouth with clear water, and occasionally mucus. At night the cough is particularly violent; in the morning most exhausting, and accompanied by most profuse expectoration of tenacious mucus. Expectoration amounts to 2 pounds in 24 hours. The

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slightest irritation, laughing, singing, talking, or a few drops of wine, provoke the cough at once, by causing a tickling in the trachea, which soon extends over the whole chest, and brings on a violent fit of coughing, which makes the chest feel painful as if it were raw and sore, occasionally causing a violent stitch through it. Voice hoarse and hollow; talking very difficult, partially owing to a peculiar oppression on the chest, and partially owing to the hoarseness. The trachea feels rough, and in the larynx there is constantly tenacious mucus present. A sensation throughout the whole chest, even during the intervals of the coughing fits, of the utmost degree of weakness, as if everything within were dead. Want of appetite; the previous inclination to eat utterly gone, yet the taste is clean. Great languor, the whole body feels numb, the slightest motion exhausts him, causes flying heat and perspiration, and increases his weakness. Very uneasy sleep, interrupted by fearful dreams. He wakes after midnight, feels exhausted, sweating, coughs a great deal, is uneasy and tormented by the most painful excitement of the mind. Frequent desire to urinate, but very little urine passes, and that is sometimes clear, at others dark colored. Involuntary seminal discharges at night, which he had not previously had, in consequence of

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lascivious dreams, which add to his weakness and throw his mind into a degree of despair. Every evening, from six to nine, fever, chills down the spine, palms of the hands hot, dry mouth, and moderate thirst. Pulse small, frequent, and irritable. During the fever the cough is peculiarly exhausting, the expectoration watery. Sweats night and morning; the perspiration smells like rotten straw. Countenance most miserable, hollow, pale, and thin; dull, sunken eyes. Mind in a very excited state; he feels and thinks with unusual quickness, clearness, and acuteness. Timid, irritable, disposed to weep, full of dark images of the future.—Hopelessness.—Believes in certain and near death.

Treatment.—These phenomena of disease correspond to what nosologists would call phth. pulm. pituitosa, and it may readily be imagined gave me very little encouragement for effecting a cure. Amongst all the remedies in the Mat. Med. Pura, I found none more suitable to the case than *Stannum*, though in some respects *China* seemed more indicated to commence with. The patient's mode of living having been such as to require no change, I commenced the treatment at once by giving a dose of *China* 12. Allowing this to act for a few days, I found at the end of them no change, except a diminution in the amount of perspiration, and even this

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change was very transient. Upon this I gave *Stann.* 6.

Result.—The most marked success crowned my selection of *Stannum.* The next day already the patient felt easier, freer, and in brighter spirits, the cough became milder, the oppression and other disagreeable feelings in the chest became gentler, the expectoration thicker and tasteless, the sweats disappeared, the evening fever lost much of its violence. The succeeding night was passed in a refreshing sleep, and though the patient woke as usual just after midnight, he was not tormented by either the cough or mental excitement, and soon fell asleep again. The appetite returned, the pulse gained in force and quiet. Gradually, all the symptoms diminished in violence, and in the same ratio strength and better looks returned. Two weeks after he felt quite well, with the exception of a beating, pressing pain in the left side of the chest, and a slight hoarseness. Against these I gave *Bell.* 24, and in three days even these last traces of his illness had vanished. Ever since, until now (1¼ year), he has enjoyed the most perfect health.

No reasonable mind will deny the importance and danger of the above case, or be unwilling to admit that if left to nature alone, the man would have died; if treated allopathically, at best he *might* have recovered after

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much trouble, and the expenditure of much time, strength, and money. Who will gainsay, that in this case homœopathy accomplished a permanent cure in a sure, quick, simple, and agreeable manner?—*Dr. E. Stapf.*

Case 7.

A case of phth. tuberc. pituit., very similar to the preceding one, and cured by the same remedies in the course of four weeks. —*Archiv, II*, 2, *p.* 86.

Case 8.

On the 11th of December I was called to see a lady of 24 years of age, tall, slender, pale, and haggard countenance, who had been confined to her bed for 19 weeks. The result of my inquiries was as follows:—The patient was formerly enjoying good health, a few years ago only she suffered with spasms of the stomach; whilst she was under allopathic treatment for these, an inflammatory condition of the lungs made its appearance, which, according to the opinion of the allopathic physicians, threatened to degenerate into consumption, and brought her very near the grave. However, she rallied again, and enjoyed tolerable health. Two years ago she married, miscarried twice, and was delivered of a full-grown child on the 4th of July last, losing each time a great deal of

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blood. Six months ago one of her sisters died in childbed with phthisical symptoms. From that moment she firmly believed that she should meet with a similar fate. The first three weeks after her late confinement passed off very well, then, however, she became feverish; chills, dry, burning heat, with violent, almost unquenchable thirst and dryness in the throat. This was succeeded by an eruption on the skin, hoarseness, cough, expectoration, and night sweats. The fever increased, returned every evening, her strength failed visibly, and with it vanished her hopes of recovery. Upon this she received *quinine* in large quantities from her allopathic physician, under which treatment she merely grew worse, when I was sent for and found her in the following state:—

Chills every forenoon, lividity particularly of the nails, frequent violent rigors lasting for several hours at a time.

The chills accompanied by great thirst—altogether throughout the day unquenchable thirst.

Then dry burning heat with thirst. Previous to the sweating, oppression on the chest, burning in the soles of the feet.

Perspiration, chiefly at night, soaking all her clothes—not sour.

No appetite, disgust at all eatables. Clean taste.

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Oppression in the epigastrium after partaking of food. Much talking brought on a pulse-like motion in the abdomen.

Spasmodic and cutting pain in the abdomen.

Bowels loose, with tenesmus, then griping in the rectum. Debility bordering on syncope.

Little urine.

No secretion from the Schneiderian membrane.

Tenacious, lumpy mucus in the trachea.

Tickling in the trachea causes her to cough.

Rawness, soreness in the throat.

Eating succeeded by burning in the throat.

Great weakness in the sacrum.

Spasms in the soles of the feet.

Sleep was good until she took the *quinine*; since then very wakeful.

Weakness in the head. Cannot endure any noise. Can hardly keep the head up. Every motion of it painful. Several of these symptoms had been aggravated by the *quinine*.

Her previously gentle disposition is now very sensitive, fretful, and she is easily offended.

Treatment. To antidote the *quinine* I gave two doses *Ipec.* 1 and *Arnica* 2.

The 13th December, I gave *Nux vom.* 6, which appeared to me to be indicated by the

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fever and the state of the nerves. The 19th, the cough and the burning of the skin in the evening before falling asleep have diminished. Sleep better.—The weakness of the bowels has increased, the fever came yesterday, accompanied by a general chill of two hours. I gave *Cham.* 4, and a few days after, *Verat.* 4, and on the 30th, *Ars.* 10.

No remedy did any good. The colliquative symptoms continued to increase, and she shortly died, very much emaciated and debilitated.

I should be of opinion, that the antipsorics might have done some good in this case, if I had not learned that many members of the family had died of consumption.—*Dr. Th. L. Rückert.*

Case 9.

A man of forty, scrofulous constitution, yielding temperament, who, owing to poor nourishment, had always been sickly, and had from earliest childhood been troubled with short breathing and a cough, had been confined for six months with far-advanced phthisis. During the last years his cough had increased, and a suspicious expectoration had made its appearance; he had also for some time been expectorating blood, and his strength was daily diminishing. From the beginning of this worse period he had

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been attended by two clever allopathic physicians, who neglected nothing in their attempts to cure the poor fellow. But ultimately both declared that his case set all art at defiance, and that he must die. It was then December, that I was called and found the following state of the case :—

Patient has been in bed six months, and cannot rise.—Voice feeble, broken, low, and has a sound of peculiar, diseased softness, such as is often heard in cases of suppuration of the lungs. He breathes faintly and with difficulty by the aid of all the respiratory muscles, scapulæ, etc., and complains of a constant oppression which the slightest motion renders quite intolerable. Independent of motion, however, this oppression occasionally increases until a violent hemorrhage from the lungs takes place, affording him temporary relief, but adding materially to his exhaustion. His usual expectoration is pus, mixed with blood. He is very much disposed to doze, but is frequently disturbed by the cough which will not allow him to rest, even at night. He cannot lie well on the back, not at all on the left side, best on the right. If he attempts to lie on the left, he cannot get any breath, and the cough becomes then extremely violent. He has very little appetite, his lips are constantly dry, and he has considerable thirst; all he eats and

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drinks, however, appears to pass at once through the whole alimentary canal, and to increase his diarrhœa of long standing. His skin is all the time covered with a cold clammy sweat. The palms of the hands, and soles of the feet, are suffering with a pricking warmth, especially towards evening, which is preceded by chills. Pulse febrile, though small, faint, trembling. If there has been some pause in the expectoration, he cannot get breath.

Treatment.—Under these circumstances I could only endorse the opinion of his two previous attendants, because I did not recollect to have ever heard of the recovery of so advanced a case of phthisis, either by allopathic or homœopathic means. Notwithstanding this, I was willing to at least make an attempt, particularly as I had but recently heard Hahnemann himself extol the power of the antipsoric remedies in apparently hopeless cases.

Dec. 15th. I administered *Phos.* X°, and ordered nourishing soups.

Result.—The above medicine caused the patient various discomforts up to the 14th January. He had much pain in the chest, back and sacrum, and could hardly turn in bed, or raise himself a little. His expectoration during that time had also been very copious, pus and blood. But gradually the

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difficulties in the chest began to diminish, and his strength to increase. He began leaving the bed for a short time. The clammy sweats disappeared, some appetite returned, and the oppression grew less, the expectoration scarcer and free from blood. The pulse returned to a more normal state. The patient could even lie occasionally on the left side without inconvenience, and slept generally more quietly at night. But the diarrhœa had rather increased than diminished, and obliged him to rise occasionally during the night. All his limbs felt bruised, and every part of his body was painful. This was his condition on the 1st February.

I now administered *Solut. calcareas* IV°°. But I soon discovered that this remedy, owing to its being administered in too strong a dose, acted much too powerfully, and thus did more harm than good, because the patient was very much exhausted by it. He found his chest extremely oppressed, his expectoration increased again, he could not lie any more on the back and left side, lost his appetite, and his strength failed utterly, especially as the diarrhœa grew much worse, and pus-like matter passed from him. Besides, he complained of most intolerable thirst. His spirits, which had been raised, now drooped totally, and he utterly despaired of his recovery. Under these circumstances

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I thought prudent to administer some anti-psoric which would meet the totality of the symptoms, and gave *Lycopodium* IV°. The result quite surpassed my expectations. I had given it on the 1st of March, and by the 27th the phenomena of the disease had entirely changed in a most striking manner. The patient could again lie on the back and left side, only on *lying down* he coughed for the moment. The diarrhœa had entirely left him, and in lieu thereof his evacuations were natural. The thirst had also disappeared. The night-rest was but little disturbed; still he was troubled with a dry cough at night for an hour. During the day the cough was less, but attended with expectoration of pus. The patient had gained strength and cheerfulness, was able to leave the bed, and even employ himself a little. Thus his recovery progressed until the middle of April, when a complete pause ensued. At this time I felt induced to give him *Solut. Sepiæ* X°. This improved the chest symptoms until the middle of May; the patient was able to lie equally well on the back and both sides, and passed his nights entirely undisturbed by the cough. The latter did not trouble him much during the day either, and his expectoration was no longer pus, but white bronchial mucus. His whole state and appearance was so extraordinarily im-

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proved, that it was difficult to recognize in him the same dangerously and hopelessly sick man. The two allopathic physicians, who had attended him before me, had declared a few weeks ago that this striking improvement was only a delusive one, and could not last, as there was no instance on record of a cure of so advanced a stage of phthisis, found now, that the man was really recovering, and tried, to save themselves, to make it out (though totally inconsistent with their previously-expressed opinion) that there could have been no suppuration of the lungs in this case. What a conclusion! The patient now returned to his flock and pasture, and in the course of the summer recovered his health completely and thoroughly.—*Dr. Gross.*

Case 10.

A complete cure of suppuration of the lungs by *Ledum palustre.*—*Dr. Kammerer.*

Case 11.

A girl of twenty with the following symptoms:

Two years ago she caught a severe cold, and has remained sickly ever since. During the last four weeks violent cough, more by day than at night, cough produced by a tickling in the throat, dry and exhausting,

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frequently accompanied by expectoration. Tension of the chest on taking exercise. Menses less than formerly, and extending beyond the usual period. In the afternoon chills alternating with heat, at night sour sweats.

Nutrition poor. Aversion to food. Loss of strength. Cheeks hectic flush, circumscribed.

I treated her from January to November, and administered the following remedies: *Nux vom.*, *Ars.*, *Puls.*, *Merc.*, *Stann.*, *Dulc.*— all in vain—she died gently on the 10th of November.—*Dr. Rückert.*

Case 12.

A woman of thirty, who for many years had pined in unrequited love, and it was said had once had a forcible abortion. After much allopathic treatment I was consulted.

The patient is emaciated nearly to bone and skin. Digestion destroyed. Taking food causes spasms of the stomach and retching. Diarrhœa of twelve months' standing, four to five evacuations from the bowels every night. Cough, day and night, with copious grayish expectoration like pus; pain in the chest when coughing, pressure under the sternum, stitches in the left side. Chills, towards evening, night-sweats. Disposition cross and irritable. Of course the prognosis I gave was very unfavorable. I gave

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China, Drosera, Stann., Ars., but they proved fruitless, and she died in a few months.—*Dr. Rückert.*

Case 13.

A woman of nineteen, married five weeks to a large, powerful farmer. Her father was a strong, muscular man, but psoric in a high degree, the mother healthful. Patient ailed a good deal as a child, and was frequently a sufferer by chronic exanthemata, particularly itching pimples in the face and on the back. For the last five years she has had a cough with expectoration, which periodically increases and diminishes, without its otherwise affecting her health and spirits. Apparently she has a strong constitution, her figure is small but compact, dark hair, and previous to her marriage she had a blooming complexion. Soon after her marriage she was obliged to take several days' journey in January during a severe frost, omitted to dress herself prudently, and caught a very heavy cold. Upon this the former periodical cough returned with greater violence than ever, but remained neglected till she felt too ill to attend to her domestic duties.

I was then sent for. I had known her as a fresh, rosy-cheeked girl, and was not a little shocked at her present appearance.

Wasted in the face, with a circumscribed

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hectic flush on the cheeks, sunken eyes with a dull expression, emaciated over the whole body, hardly able to walk about the room, incessantly coughing with copious expectoration. Towards evening, hoarseness, constant tickling in the throat, which provokes the cough, no rest at night owing to the cough, is obliged to sit up in bed. The sputa whitish-yellow, mucous. For some years past dyspnœa and oppression on the chest.

At night, when she does sleep, rattling in the chest. During the day frequent chills. At night dry heat, no sweat succeeding the heat, nor is she at all inclined that way. Much thirst during the day. Little appetite. Empty eructations.—Bowels regular. Menses later, and less than formerly. Moral symptoms: dejected, inclined to weep, silent.

I gave, of course, a very unfavorable prognosis to her friends, at the same time speaking encouragingly to her.

After regulating the diet I gave her successively, according to the indications, *Puls.*, *Acon.*, *Bell.*, *Sulph.* X., *Ars.* X., *Stann.* II., *China* V., *Bell.* X., *Sepia* X., *Lyc.* X., *Sil.* X., *Ann. fol.* IV., *Phosph.* X.

Sulph. and *Ars.* acted well, diminishing the cough and expectoration, removing the evening hoarseness, raising the spirits, and improving the nutrition.

Stannum drove the fever away. Cough

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and expectoration continued to improve, she could sleep better at night, and became cheerful. This continued for a fortnight; a diarrhœa then set in, which she kept from me, and which rendered her case more dangerous again, though not hopeless.

It was then that the family insisted upon her removal to a mineral spring. In spite of my objections she was removed, the use of the spring pulled her down completely and she died soon, utterly worn out.

Case 14.

On the 7th of March I was called to see a man of 41, whom I found very low, and expectorating blood and pus in very large quantities.

The prognosis appeared to me very unfavorable, and I anticipated a speedy dissolution; therefore I did not note down any other symptoms, and for the sake of doing something I gave *Lycop.* X°°°°. Ten days after I was informed that the man was better; and on the 31st of March, that the cough and expectoration were still considerable, that the night-sweats continued, but that he had a better appetite, and felt better altogether. I allowed the *Lycop.* further time to act.

On the 19th of April I was informed that the night-sweats had ceased, and that he had

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been greatly relieved by several hemorrhages from the bowels. I now administered *Sulph.* 8. I was not a little astonished on the 8th of May to see the man walk into my office, he having walked a great distance to see me. I now entered upon a minute examination of the case.

The patient is of a slender make and has a flat chest, his occupation is that of a bricklayer and clarionetto player. For several years he has had a cough, occasionally, too, pain in the chest, and is accustomed to be bled every year. In February last his cough became worse, and accompanied by stitches and pressure in various parts of the chest.

For several weeks he perspired profusely, especially at night; the sweat had an offensive smell. Towards the end of February he was suddenly attacked at night with a fit of suffocation, probably in consequence of the bursting of a vomica, which was followed by his throwing up an incredible quantity of pus and dark blood, mixed with flakes and knots like tubercles

After having expectorated pus and blood for a fortnight, he received *Lycop.* as stated in the commencement, and says that immediately after, he had experienced a decided alteration; he had felt better; the constant internal heat, which was debilitating him so

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much, had disappeared, and the pains in the chest had become diminished.

At the time when the vomica burst, he lost a good deal of blood per rectum. He has frequently had diarrhœa mixed with blood, so acrid as to cause a burning sensation in the rectum.

In the course of March and beginning of April, he coughed up a great deal of bright-red blood, which smelt badly and coagulated readily. On the 8th of April this occurred in the most violent degree, but from that day he felt better, his appetite improved, the pains in the chest, cutting with every breath, gradually diminished. Coughs less, and expectorates mucus, no blood. Vertigo. *Acon.* 8. Coughs a little. *Kali. Carb.* X°. *Quite* well on the 23d of May. -- *Dr. Rückert.*

Case 15.

A miller, 30, of small, delicate size, dark hair and eyes, pale face, much emaciated and debilitated, with a flat chest. Formerly had enjoyed good health. Sixteen years ago he had the itch, which remained on him three months, and was then driven in by external remedies. After that he continued well until within the last few years, during which he has been troubled by considerable pain in the chest, so violent, indeed, when

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moving his arms or sneezing, as to prevent him from working. Dyspnœa at the same time. A year and a half ago an abscess formed below the left clavicle, which discharged a considerable quantity of pus, and which was found to lead to a deep fistula in the thorax in the direction of the sternum.

For several months under surgical treatment the wound remained open, discharging more or less pus. The patient felt weak, exhausted, and got a cough with expectoration. At last the abscess closed, the patient gradually rallied, and was able to do a little work; latterly, however, he has felt worse again, coughs occasionally, expectorates but little; complains of tightness and oppression on the chest whenever he draws the arms together forwards. Sneezing occasions him severe pain in the chest as if the latter would burst. At night he can sleep only on his back or in a sitting posture. The old fistula in the chest seems disposed to open again. Patient feels weak, is wasting, and unfit for work. Digestion tolerable.

As to the diagnosis, it was not difficult to determine the accumulation of a large quantity of pus in the thorax, which by discharging itself once through the abscess in a very unusual spot, had at that time saved the patient's life. The redness and partial ele-

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vation of the cicatrix led me to anticipate a fresh discharge.

Under these circumstances it was a difficult thing to make a prognosis, and to enjoin upon the patient the necessary quiet.

I gave half a drop of *Spirit. Vini Sulph.* X., assuming the suppressed itch to be the cause of the disease.

27th July. On the whole the patient has done pretty well; exercise and sneezing occasion less pain on the chest, and he feels rather stronger. The old wound under the clavicle was easily opened with the lancet, discharged a little thick pus, but the probe failed in discovering any passage into the thorax. No change in the previous prescription.

15th Aug. The patient has been going on satisfactorily. The wound has closed again. Since yesterday he has noticed, on breathing or sneezing, violent stitches in the chest, and the pulse is more excited than usual. It is evident that a fresh inflammation in the respiratory organs is forming.

I gave *Acon.* 8, and left *Sepia* X°°, to be taken three days afterwards.

On the 22d of August the patient wrote me word that the *Acon.* had acted beneficially but that the *Sepia* had brought on a new excitement, that sneezing caused him pain in the chest, and exercise dyspnœa.

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These symptoms existed in a very modified state on the 5th of September. I allowed the remedy to act till the beginning of Oct. when I administered *Phos.* X°°°. On the 15th of October the patient reported an aggravation of all his chest symptoms, increase of cough, catarrh, and febrile action. On the 1st of December I learned that he felt easier about the chest, the wound had opened of itself, but that he had had for a week a considerable flow of saliva. This occasionally came on suddenly, totally unexpected, generally more on the left side, this time on the right, with a painful swelling of the gums. This swelling lasted several days and terminated in profuse salivation.

I gave *Ac. Nitri.* X.

On the 2d of January I heard that the patient was doing well, was free from all trouble about the chest, from cough and expectoration, but inclined to cough on taking fresh cold. Another dose of *Sepia* restored the man to perfect health.—*Dr. Rückert.*

Case 16.

A farmer's wife, 36, formerly perfectly well, of a strong constitution, had been confined eight times without any bad consequences until the last, six years ago, when she got a cough, which she has not been able to rid herself of since.

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Last fall she had a panaritium which troubled her for several weeks. She suffered much with it, was exhausted by it, and recovered but gradually from it.

Five weeks ago she was taken down with a tertiana, at first rather violently, against which she used a week afterwards the so-called fever-drops, probably containing arsenic; they destroyed the fever, but the cough became worse. Subsequent errors of diet occasioned several relapses, which she mitigated by fasting.

During this time the cough increased more and more, accompanied by profuse expectoration. Nettlerash made its appearance frequently. The patient grew weaker, and became thin, so much so that she could no longer attend to her household affairs, and was obliged to lie down a good deal. On the 10th of June I was consulted and found the following phenomena of disease:

Head feeling full, throbbing in it like the ticking of a watch, and as if the brain would burst out.

Gums swollen, undefinable pain in the hollow teeth.

Little appetite, but constant thirst.

Hard sluggish stool once in three or four days.

Menses too early, and sparing.

Frequent coryza.

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Violent cough, especially in the morning, lasts all day, aggravated by taking the slightest cold.

Expectoration copious all day, with rattling on the chest, and of a yellowish pussy color.

Frequent lancinating pain in the left side.

She is very weak and languid, able to walk about in the room only.

Free from fever at present.

Nothing remarkable in the state of her mind.

However unfavorable the prognosis appeared, no characteristic symptoms were presented in this case, which rendered the choice of the remedy very difficult, because several seemed to me to be indicated.

I determined in favor of *Calc. carb.* X.

June 18. The fever has not returned. The patient has more appetite, bowels more natural, cough and expectoration alternately moderated.

The remedy is evidently acting beneficially, therefore no change in prescription.

June 28. Cough the same as on the 18th.

Frequently a species of heartburn. Want of strength; unable to do much in household affairs.

June 26. Increased stitches in the side on taking breath and coughing.

Until the 26th of July her condition im-

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proved materially, her strength increased, and the cough and expectoration diminished.

The patient resumed her domestic avocations.

I administered *Lycop.* X, which restored the patient to perfect health.—*Dr. Rückert.*

Case 17.

A laborer, 38, of a strong, powerful constitution, who had had the itch several times, and was very intemperate, had for years been afflicted with a cough, expectorating mucus and pus, without its preventing him from attending to his usual work.

In March he very suddenly experienced violent pains in the right side of the chest and liver. The pain extended over the whole liver, and as far back as below the right scapula; it comes by fits and starts, and is lancinating when the patient breathes or coughs.

The chronic cough and expectoration are worse.

Tongue very much coated, no appetite, constipation, fever.

Acon., *Bry.* and *Nux* removed the inflammation and fever in five days.

But the cough and expectoration of pus had grown very violent. He coughed up whole lumps at a time, felt extremely weak, and perspired profusely during the night.

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The chest was covered with an eruption that was painful.

The prognosis was of course unfavorable; the only symptom to the contrary was the eruption. I gave *Spirit. Vini Sulph.* on the 2d of April.

Upon this the eruption came out very abundantly, covering nearly the whole body, and both cough and expectoration became aggravated until the 13th of April. I became alarmed, and gave *Calc.* 8. Immediately after, the whole case began to mend without any primary effects of the medicine. The eruption, night-sweats, cough and expectoration gradually disappeared. In May the patient returned to his work, and has remained well since, which is more than a year ago.—*Dr. Rückert.*

Case 18.

A man, 24, of a sanguino-choleric temperament, strong and robust, had formerly always been well. Ten days before I was sent for, he had had some vexatious annoyance, went into a tavern, danced, and became heated; drank several times freely of cold beer, and was soon seized with stitches in the chest, short breathing, cough with bloody, frothy expectoration, so violently, that he had to be carried home; the above symptoms were accompanied by alternating

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heat and chills, violent thirst, want of sleep and appetite. Before I was called, the usual "domestic remedies" had been applied. When I came, I found the whole body very much emaciated, and covered by a clammy, colliquative sweat, dirty-looking countenance with circumscribed redness of the right cheek, sunken, hippocratical face, eyes sunken and dull, watery and yellowish, pale lips, tongue white, mouth and fauces sore, ulcerated, hoarse voice, hardly audible; dyspnœa, breathing mainly by the abdominal muscles; with every expiration the alæ nasi much dilated, tense stitching pains in the chest extending to the shoulder-blades, tickling in the trachea with constant inclination to cough; expectoration of copious, greenish pus, streaked bloody and having a putrid taste, extreme languor and prostration, cutting pains in the limbs, colliquative diarrhœa, making the rectum sore; chills, particularly in the evening, all over the back; cold extremities and hot palms of the hands, want of appetite, thirst and wakefulness, loss of his hair, scalp painful to the touch. No doubt this state of things was the consequence of a pleuro-peripneumonia, which left to itself, and probably aggravated by the domestic remedies, had brought on a *phthisis florida*, and thrown the patient into the above condition in the space of 10 to 12

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days. I have seen a great deal of hospital practice, and during *thirty years* of private practice, I have had opportunities in abundance to observe many similar cases, but must confess, never before to have seen so far advanced a case recover.

Treatment.—*Ferrum aceticum*, 1 grain of the sixth potence, administered in the morning at nine. Next morning I found the patient had had a quieter night, and had coughed with less and less exertion. On the third day, the improvement was more obvious still. The fourth day he left his bed and remained up a little, taking some nourishment, and thus he continued to improve until the twelfth day, when a pause occurred, leaving the following symptoms to be attended to: giddy reeling with paleness of face, and momentary dimness of sight, hoarseness, cough with yellow sputa, chiefly in the evening until midnight, relieved by the sitting posture; dyspnœa, feeling of heaviness and languor "all over," sleep disturbed by frightful dreams, grumbling and rumbling in the belly, chills in the evening, followed by heat and a thirsting after beer without his liking its taste; timid, peevish and disposed to weep. I gave him *Puls.* 12th potence, the action of which gradually removed every symptom in the course of ten days. The patient recovered completely,

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and has been well since (2 years), without the slightest chest complaint or any other.

Case 19.

A clergyman, of thirty-eight, of a decidedly phthisical habit, was seized, in consequence of cold and great professional exertions in the pulpit, with a catarrhal-rheumatic inflammation of the lungs, which at first appeared trifling, but gradually grew worse, and ultimately assumed a dangerous character. The treatment was according to the usual allopathic routine. Depletion was at first considered unnecessary, but as the lancinating pains in the chest would not yield, either to internal remedies or epispastica, leeches were finally applied, and after a short while, repeated. After the last time, however, the physician who had thus far been very assiduous in his attention, left, fully impressed with the hopelessness of the case. I was hastily sent for in the night, and urgently requested to come. Yet I could make no more favorable prognosis, because the state of things denoted the greatest danger. Exhausted in the extreme, the patient laid there perfectly motionless, occasionally only putting his hand, with a very painful expression in his features, on the suffering side of the chest. Pulse, small, trembling, intermittent, hardly perceptible. Breathing so weak

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that on placing the flat hand on the chest I could hardly perceive a dilatation of the lungs. Upon reviewing the case and the treatment, I gave *Acon.* X°. In half an hour afterwards the chest began to heave, the breathing became longer and more powerful, the pulse fuller, the skin, hitherto covered with a cold sweat, became warm and moist, and altogether I noticed more turgor vitalis. I subsequently gave *Nux vom.* X°, and was delighted to see him recover so far in a few days as to warrant my holding out prospects for his safety. But the following week, my prognosis was very much shaken. It is true, every trace of inflammation had gone, but the patient could not gain any strength, he could speak a few words only, in a low tone, was unable to draw a long breath, and was tormented day and night by a severe cough and a profuse, very suspicious-looking expectoration; to this was added a slow fever, with clammy night-sweats; in fact, everything indicated a change into phthisis. *Stannum*, *Drosera*, etc., did either no good, or at the best, brought on a mere temporary improvement, which vanished again in a few days.

In this desperate condition of things, baffling all skill and experience, I gave, as a "*dernier ressort*," *Lycop.* IV°. The result

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was unsurpassable. Within the first week the fever gave way very perceptibly; in the two following weeks every trace of the cough disappeared, and in four weeks all danger had been removed; the patient was restored to his family. His speech only returned very gradually and slowly.—*Dr. G. W. Gross.*

Case 20.

A woman, aged forty-two, has been suffering for ten years with pain in the chest, cough and expectoration, and though feeling very weak and languid, had yet been able to attend to her household affairs. A closer examination of the case (particulars of which have now slipped my memory), induced me to give her *Sulphur* 8. This was on the 30th April. On the 2d June, I saw her again, and found the symptoms then to be: headache, a drawing in the head; when speaking much, the head seems disposed to burst. External sensation of the head, as if the hair was drawn upwards.

Digestion in tolerably good order, but constant constipation. Menstruation all right.

Frequently she expectorates much saliva. The cough appears in violent paroxysms at no particular time of the day; at night it is dry, but during the day attended by copious

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yellow, greyish, greasy expectoration, tasting sometimes musty, at others putrid.

In the left side of the chest beneath the ribs, a constant burning, gnawing pain, which seems to come up on that side from the sacrum. The expectoration appears to her to proceed from that spot under the ribs.

Her limbs, arms and fingers feel numb. General weakness and debility.

Compared to her state in April, when I saw her first, she feels much better, and for this reason I allowed the Sulphur to act further.

On the 4th July, I found the same state of things, especially with immediate reference to the respiratory organs, and therefore gave *Lycop.* X.

August 23d. The burning pain in the side and "small of the back" has abated, the ribs are occasionally painful, but it is a simple pain.

Cough drier, expectoration less, and its taste less offensive. On the whole she is better, and her strength on the increase.

September 6th. Improving. Face and body have gained in flesh, her limbs are lighter, and she feels more power in them.

Head easier. Gums swelled. Teeth loose. When menstruating, she experiences a burning in the abdomen. The menstrual discharge is merely red mucus.

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Cough and expectoration have increased in comparison to last month, but the pain in the left side is trifling.

When heated, or taking warm drinks, she feels a fine prickling all over the body on the skin.

Lycop. having evidently acted beneficially, but its action being exhausted by this time, and as many symptoms pointed towards *Sepia*, the patient received on the 11th Sept. a few pellets of the 30th potence.

On the 18th Oct. I found the cough very much abated, the expectoration very inconsiderable, and not smelling offensively, having a whitish appearance.

The pain in the diseased side is insignificant, appears occasionally only, and consists in burning and stitches at the same time.

Digestion and menstruation in good order; the symptoms of the gums have yielded to the *Sepia*.

She complains mainly of a rumbling sensation in the head, especially at night, which interferes greatly with her rest and sleep, confusion in the brain, a sensation as if the skull was being elevated.

Numbness of the hands and fingers, and drawing pains in the shoulders.

Tearing in the wrists, particularly during the day. Teeth painful when biting.

I gave *Phos.* X. which soon cured the

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above symptoms. Her general health continued to mend.

December 22d, another dose of *Sepia* 30.

February 18th of next year she complained of increased burning in the right side, cough and expectoration trifling, general health improving.

I gave *Ars.* X., and in March following, I found the patient entirely restored to health, with the exception of a little cough. She received *Kali* X°.

Next fall I saw her again, and found her perfectly well. She said she felt better in health than she had at any time during the last ten years, and expressed herself as very much indebted for my treatment.

Dr. Rückert.

Case 21.

A clergyman, forty-six, tall, thin, with narrow chest and long neck, dark hair and dark complexion, frequently had a cough as a child. In late years this cough has been apt to return, without affecting his general health, or interfering with his ministerial duties. For the last three years, in ascending any elevation, he would be obliged to halt for want of breath, and during the same period he has coughed early in the morning; he has remained very thin, and in great want of strength, yet he dragged along his

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existence till taken down violently by an epidemic influenza.

This exhausted him exceedingly. A violent cough with expectoration set in, loss of appetite, dyspnœa, unfitting him for the discharge of his calling. When called, 27th June, I found him afflicted with a violent, exhausting cough, especially early in the morning when still in bed, and as soon as he sits up in it; he is then obliged to cough a great deal before he can cough up anything. During the day irritation in the trachea.

If he coughs soon after a meal, he is obliged to vomit the latter, and in fact every fit of coughing ends with gagging.

Lying on the right side causes him to cough. Expectoration copious, white, sometimes yellow, lumpy, but on the whole more mucous than purulent.

Want of breath, particularly on going up stairs, or any elevation.

No pains in the chest except from the violent exertion in coughing.

Mental emotions cause palpitation of the heart. Very little appetite, if any, it is better in the afternoon than at the usual dinner time, (noon). Taste in the mouth and of the food unimpaired. Bowels regular.

He feels very weak and powerless, is much emaciated. Sleeps tolerably well, but at night he perspires, which greatly debilitates him.

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He is of a mild, quiet disposition, and has always led an unexceptionable life.

I gave *Stannum fol.* II, two doses with an interval of six days.

On the 22d July, thus a little more than three weeks after the first visit, I called again, and found my patient quite cheerful. He had meantime (the first time for seven weeks) been able to preach again in a loud, clear voice, without being much fatigued thereby. He felt, on the whole, much better and stronger, coughed a good deal, still the paroxysms do not come so often, but they end in gagging as before.

Night-sweats have diminished.

I gave *Stannum* 11^{oo} twice.

14th August. I again paid him a visit and found him in good spirits. The cough had abated, night-sweats were totally gone; expectoration lessened, breathing stronger. He desired to take a journey for the sake of his health, which I approved of.

On his return from that journey, 24th September, I found him better, but the expectoration had become more copious, and the night-sweats had returned. Sputa greenish. Cough attended with gagging.

Administered *Phos.* 8.—18th October, improving. Repeat the same remedy. 1st November.—Patient looks so well and hearty as to be hardly recognizable. Many

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days he does not cough at all, except once or twice in the morning. Expectorates very little. Breathing much better.

Treatment discontinued.

Case 22.

A lady, of twenty, was rather delicate as a child, and grew up very rapidly. In her thirteenth and fifteenth year she had pneumonia, which left behind a weakness of the chest, pain under the ribs and dyspnœa. For four years she has suffered periodically with cough and expectoration, together with a pain on the right side of the chest just above the liver. On the 9th September I was called. She had taken cold, and in consequence a violent cough, expectoration, pains in the chest, and febrile symptoms.

I gave *Bell.*, *Acon.* Menses made their appearance, and I therefore stopped all medicine.

17th September. Head free, except occasionally a one-sided pressing pain on the left side of the head over the orbit. Bitter taste in the mouth, but the food tastes naturally. No appetite. Much thirst.

Bowels sluggish.

Menstruates every three weeks, and rather profusely. The periods are preceded by abundant leucorrhœa, which greatly debilitates her.

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Extremely violent cough, leaves her no rest day or night. It is worse towards evening, and obliges her to sit up in bed whilst coughing.

The cough is provoked by accumulation of much mucus in the bronchial tubes. Constant audible rattling in the chest. Expectoration of much greenish, suspicious, offensive mucus, chiefly in the morning. On the right side of the chest, above the liver, a lancinating pain when coughing and taking a long breath. Towards evening, chills and flushed cheeks. She is very weak and powerless. At night she perspires freely.

The previous pneumoniæ which left the pain in the chest behind, the frequently-returning cough, the totality of the symptoms as presented, and the fact that one brother of hers had already died of consumption, and another was similarly afflicted, made me give an unfavorable prognosis. The similium for her case was unquestionably *Calc. carb.* which I gave in the X. potence.

September 25th. Patient has felt better for the last two days. The cough has very much diminished during the day, it is worst in the evening as soon as she lies down in bed.

Expectoration still copious, particularly in the evening, but as soon as she has coughed it up, she falls asleep again.

Chills towards evening have moderated,

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but the sweats commence as soon as she drops asleep and continue till morning.

Constantly a great deal of thirst and little appetite. Bowels moved every second day.

The pain in the chest on breathing, and the cough have moderated.

The remedy evidently acting favorably, I did not interfere with its effect.

October 13th. Violent toothache here interrupted the main cure, and required a few doses of *Nux*, *Staphys.* and *Chamom.*

Still her general health continued to improve, so much so that a few days ago she was taken in a close carriage to a neighboring city.

She has a good appetite and her bowels are regular. She coughs but little, expectorates little, and that without any offensive smell. The sputa looks whitish, mucous, with little yellow lumps. Taking a long breath causes her some pain in the old spot. Free from fever. Night-sweat trifling. *Calc. carb.* X°°, which accelerated the improvement. 24th October.—*Calc.* again. January next, perfect recovery.—*Dr. Rückert.*

Case 23.

Dr. Hartlaub makes the following observations on *Sulphur :*

1. "It very much diminishes an old cough with copious, yellowish, sometimes bloody

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expectoration, with stitching pains in the pit of the heart.

2. "Likewise a periodical cough of long standing in an old man, attended with white expectoration, worse in the morning, night-sweats, and during the day chills and fever.

3. "Cough of twelve years standing in a girl of fourteen, of a full habit, who has not menstruated yet. The expectoration copious, whitish and grayish, pain in front in the right side of the chest, most strikingly moderated by the first dose, returning at night, again abated in consequence of a second dose, but was not removed. The pain, however, disappeared immediately and totally."

Dr. Trinks remarks:

"Agreeably to my extensive observations, *Calc. carb.* fails in arresting colliquative diarrhœa in the last stages of suppurative phth. pulmonalis. In fact no homœopathic remedies produce any durable effect in those cases."

Case 24.

A man of thirty-seven, who had been "poorly" for two years, complained of difficulties about the chest, which were much favored by his phthisical habit and hereditary predisposition to such complaints. He had been several times under allopathic treatment, and been only injured thereby.

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On the 13th March I was sent for, and found him pale and emaciated, the breathing short and quick, coughing frequently, now dry, then again with greenish-yellow sweetish expectoration, especially morning and evening. Sharp pains in the head, chiefly in the forehead, worst after a fit of coughing. Appetite stronger than when he was well, and followed by pain in the epigastrium and little evacuation of the bowels. Heaviness and coldness in hands and feet. Both rather swollen. Evening flushes of heat and thirst.

March 14th. I gave *Stannum* 6 and regulated his diet. The next and the following day the cough, weakness, and general uneasiness appeared aggravated, sleep and appetite left him, night-sweats increased, and the patient was thrown into the utmost despair.

In spite of all this, I repeated the *Stannum* a few days after, and brought on a totally different state of things.

A few days after, all the above symptoms had moderated, and on seeing the patient again in nine days, I hardly knew him. Pains in the chest, headache, night-sweats had nearly gone, cough and expectoration were much lessened, breathing easier, voice clearer, bowels more regular, appetite and general health considerably better.

The duration of the effect of *Stannum* be-

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ing sometimes twenty days, I meant that in this case it should have fair play, and the result was that the man entirely regained good health.—*Dr. Schubert.*

Case 25.

The wife of a clergyman, mother of five children, light hair, middling size, gentle and amiable, thirty-eight years old, had always enjoyed good health, excepting an occasional cough and "cold in the head," and a rheumatic toothache. Six years ago she got a pulmonary catarrh, which may be looked upon as the immediate cause of the subsequent mucous, purulent, pulmonary phthisis. She received allopathic treatment for it, but it grew worse so rapidly, and assumed such decided symptoms of phthisis in four weeks, that a consulting physician was sent for. Their united efforts for two months, exhausting all the means afforded by allopathy, could not stem the progress of the disease, and they ultimately declared it to be a hopeless case, past cure.

Now, I was consulted, whereas, probably, if that had been done in the commencement, I might have cured the catarrh by a few homœopathic doses. But such is the fate of homœopathic physicians; they are in many cases not consulted, till the patient is declared by the *soi-disant* "regular physi-

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clans," to be dying. But woe betide us, if even under such circumstances the patient should die! One will then exclaim: "There, you see the effects of your miraculous sugar-pellets," and another, "That is the result of their *poisonous* doses!" But if we cure a patient, who has been entirely given up by the allopathic doctors, the latter pretend that the case was not dangerous, but that the patient lost his patience and confidence in them! But when we cure inflammations, typhus, and other acute diseases, etc., they exclaim: "That was no inflammation, no typhus, etc.!" and yet we are to credit their reports of cures chronicled in their journals.

I saw the lady first in the afternoon, and noted down the following symptoms:—

On the chest, and particularly in the course of the sternum, a constant tension and fulness, with difficult, short respiration. On taking a long breath, which she was not always able to do, immediately an exhausting, rather hollow cough with yellow expectoration of a saltish taste, worst on waking or in the evening; pauses of 2 to 3 hours during the night. In the course of 24 hours, she expectorated as much as a teacupful. In bed, she was obliged to be bolstered up by pillows, lying on the back most comfortably; on the left side, she found it im-

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possible, because the latter position increased the cough and the tightness on the chest.

In the evening, increased heat and thirst till after ten, together with a desire for cold drink, and circumscribed redness of cheeks. Pulse small, soft, 110, frequent palpitation of the heart, particularly in bed in the evening, and when moving about in the room. Increased temperature of the skin; very red, but tolerably clean, moist tongue. Appetite tolerable, bowels irregular, menses once in 4 weeks, but very small in quantity. Towards morning, slight perspiration. Very evident emaciation. Had had no medicine for the last two days.

Although, as far as I could learn, no psora laid at the foundation of this disease, yet I became fully convinced, that it could be cured by antipsorics only, and amongst them I chose *Lycop.* 30. I ordered, besides, a light nourishing diet of cocoa for breakfast, beef-tea with a little yolk of the egg for dinner, or soup with sago, rice, vermicelli, pearl barley, etc. White bread. Very little meat and that underdone. For beverage, chiefly well-skimmed milk. To be kept warm.

During the first four days, I noticed no change in her condition, but on the fifth some amelioration took place, manifesting itself by a diminution of violence in the

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morning and evening cough. I, therefore, allowed the remedy to act for a fortnight. I then repeated *Lycop.* every subsequent 12 to 14 days, the improvement progressing all the while. Two months from the time I had first seen her, the cough and expectoration had decreased one half, and the latter consisted merely of white, dirty, mucous sputa. The cough had lost its hollow sound, the respiration had become easier, and caused no peculiar sensations in the chest. She could lie longer on the right side, but not at all on the left. The fever had perceptibly abated, the palpitation of the heart had ceased, the sleep, interrupted but once in about 4 hours, refreshed her very much, as she declared herself. Menstruation had set in on the 31st day, but lasted only 48 hours. The sweats, however, remained obstinate, and smelt sour. I directed my attention now mainly to this last symptom, and accordingly gave *Phos. acid.* 9, four times during twelve days, which had so good an effect as to leave nothing of those sweats but a slight perspiration between 5 and 6 o'clock in the morning. Meantime the cough and other symptoms of the chest had grown worse again. I then administered *Stannum* 3, once a week, and in five weeks I had mastered those symptoms so far, that the cough became utterly silent during the day-time, and

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made itself heard occasionally only morning and evening.

In the same ratio, her general health improved. Fever was entirely gone. She could lie some time on the left side, and complained of pressure on the chest only after an animated conversation. Her strength had materially increased. Pulse and nutrition better. Menses appeared on the 33d day, lasting two days only, but more abundant than hitherto. *Stannum* once a fortnight, and two doses of *China*, with six days' interval, completely restored this charming woman to health and domestic happiness, in the course of a few months.—*Dr. C. F. Schwartze.*

Case 26.

A woman, 47 years of age, previously healthy, and the mother of many children, had been confined for many weeks to her bed, when on the 23d December, she sent for me, and gave me the following incomplete account of her case.

For a long time, her menstruation had been suppressed; then, for five successive weeks, she had been constantly flowing, with cutting pains in the abdomen. For the last 8 days, however, no blood had appeared.

In the left side, under the false ribs towards the back, she had for some time had

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a pain drawing forward; cough; loss of appetite; bowels regular; is uncommonly weak and emaciated. When she sleeps, she perspires very considerably.

Upon this account, I gave her *Arsen.* X^{0000}.

Dec. 30. For 8 days, no evacuation had followed the fruitless efforts to stool. The patient is very weak; in the spot where she for many weeks had had pain in the side, a tumor had arisen (such was the statement of the messenger), which appeared to be coming to a head.

In order to bring about a motion of the bowels, I gave *Nux vom.* X, which produced its result.

Jan. 2. Since yesterday, the cough has increased, with expectoration of pure pus, at the same time that the external tumor had lessened. In general the patient found herself somewhat easier.

On the 6th of Jan., I visited the patient, and found the before-mentioned tumor soft, fluctuating. Evidently an effusion of pus had taken place toward the surface, and it would have been an indication for the opening of this tumor, if it had not already become smaller since the discharge of pus had found vent through the air passage. The tumor itself was only of the size of a pigeon's egg, and without pain or discoloration of the skin. I found the invalid unusually emaciated, feeble, with

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chills towards evening, followed by flashes of heat, and perspiration during sleep; coughing attended with expectoration of pure pus.

I gave *Lycopod.* X°°°°.

Jan. 20. The patient finds herself better, has gained more appetite; evacuation of the bowels more regular. Expectoration no longer in the same quantity as formerly. Again I gave *Lycopod.* X.

After this, most symptoms improved until Feb. 1st, and I had the best hopes of recovery, when the patient was attacked with an inflammatory affection of the left lung, and violent stitches in breathing, which were overcome by means of a few doses of *Aconit.* and *Bryon.*, but left increased cough and expectoration behind.

I gave now, on the 3d and 10th February, *Stann.* II., but without particular effect. On the 17th February, *Kali.* X°. was given, because there was still much purulent expectoration. After that, all cough and expectoration ceased until March 3d, but a lingering fever remained behind, which, after I had fruitlessly tried *Pulsat.*, *China*, *Nux. vom.* and *Sulph.* yielded to several doses of *Sepia* X. The patient afterwards entirely recovered, her menses re-appeared, and now, in September, she enjoys good health, has regained her flesh and strength, and performs her domestic duties.—*Dr. Rückert.*

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Case 27.

This is another case pronounced hopelessly incurable by allopathic physicians.

A man, of thirty-four, of a decidedly phthisical habit, poorly fed, who had been frequently ill since his eighth year, and in whom purulent phthisis pulm. had been fully developed for several months, was advised to try homœopathic treatment, as he was failing so fast under that of the old school. When his friends gave me a description of his case, I told them that he was too far gone even for homœopathy to save him. I yielded, however, to the solicitations of the patient, who had himself given up all hopes of recovery, and looked to me merely for alleviation of his sufferings I saw him first on the 22d October, 1842, and took the following record of his case :—

In his eighth year he had the measles, and taking a severe cold whilst they were out upon him, it brought on an obstinate typhus fever which lasted a long time, and from which he recovered very slowly. During four successive years after this, he had been regularly attacked every spring and autumn with laryngitis, accompanied with copious secretion of mucus, and lasting each time from a week to a fortnight. In subsequent years, in the place of this laryngitis, he had had every

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autumn, winter, and spring, a severe mucous cough, preceded generally by a catarrh. The treatment he received for these complaints relieved them very considerably, but never effectually removed them, which he partially attributed to his sedentary life. Cough and expectoration hung on to him more or less for years, till, owing to great exposure, he was attacked by inflammation of the lungs, which confined him to his bed for five weeks. During eighteen months after that his health was good. Mental troubles came upon him then, and with them returned the cough and expectoration. From that period he dates his present pectoral affection, for which he has been under constant treatment, growing worse from year to year.

I found his whole body very much emaciated, general weakness, trembling of the hands, faltering, hoarse voice, difficult, short, anxious respiration, pressure, burning and tension over the entire chest, aggravated by coughing, talking and exercise. Frequent cough night and day, worst in the evenings on lying down, and in the morning, therefore he got but little sleep. Much greenish-yellow, offensively-smelling, saltish-tasting expectoration, chiefly in the morning, part of which sinks in water in the shape of lumps. When in bed he is obliged to recline on his back in an almost sitting position. Every

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night he has debilitating, clammy, sweats, which smell sour, and commence immediately after midnight. Small, quick, languid pulse, 120; constant thirst, little appetite, tongue coated white, irregularity of the bowels, and turbid, flocculent urine.

After having regulated the diet, I gave him *Lycopod.* 30^{ooooo}, and waited a week for the result, which proved to be a decrease in the exertion of coughing without any further change. I repeated the medicine, and six days after found the cough diminished in the morning and evening, as also an amelioration of the morbid sensations about the chest. Four days afterwards he complained chiefly of very great debility, and I, therefore, gave him within a week, twice, *China* 9, with a very decidedly good effect, and then returned to *Lycop.*, once a week, which diminished both cough and expectoration, changing the character of the latter so materially, that but little of it sank to the bottom in a tumbler of water. Especially during the night, the cough would be quiet for an hour or two at a time, thus giving the patient the opportunity to sleep, which, together with a nourishing, easily-digestible diet, contributed greatly towards his gaining some strength.

In a disease of this kind, especially if we are called at so advanced a stage, we may well congratulate ourselves on perceiving any, even the slightest, benefit from our re-

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medies; I therefore continued the same remedy once a week or ten days, till the 19th January, by which time all the symptoms, but especially the sensations about the chest, cough and expectoration, fever, night-sweats, and general weakness had very much abated in intensity. Although on that day I gave *Lycop.* again, the patient's condition remained not only unaltered for a whole week, but during the last two days of it, without any apparent cause, I noticed a retrograde movement, which induced me to change the remedy.

I gave him on the 27th January *Kali carb.* $30^{\circ\circ\circ\circ\circ}$, and repeated this dose twice within three weeks, which produced a decrease of the cough and expectoration; at the same time the latter assumed a less purulent appearance. This improvement was again interrupted by a fresh cold. The cough grew worse, though attended with less expectoration; he complained of pain in the right side, renewed hoarseness, scraping sensation in the throat, more fever, and great weakness. This change of things determined me to give him *Puls.* 12, which in three days removed these catarrhal difficulties, and I then returned to *Kali carb.* which covered the main symptoms of the chest, particularly the morbid sensations in it, the cough and the expectoration.

All the more was I astonished, nine days

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after, not to discover the slightest alteration, and I, therefore, repeated the remedy. But I was doomed to learn from experience, that in chronic diseases it is a difficult task always to choose the right remedy. The fact is, the similarity of symptoms is so great amongst so many. Twice I had repeated *Kali*, and after the second dose his case took such a turn às to make me tremble again for his life. Within the last days some œdema pedum has shown itself. I studied the case over again and gave *Sepia* $30^{\circ\circ\circ\circ\circ\circ}$.

For several days his critical situation remained in statu quo, but soon after he improved so far as to get some sleep at night, by the intermissions of his cough, which appeared to refresh him more than all the nourishing diet. Nine days after I repeated *Sepia*, and this time it acted beautifully on the general condition. Cough, sputa, and night-sweats abated, particularly the first during the day. In the evening, also, there was less exacerbation of the fever, and the patient was on the whole more cheerful.

Thus his recovery proceeded slowly, but steadily, under the administration of *Sepia* once a week until the 25th April, when all of a sudden he complained of excessive weakness in all his limbs without any assignable cause. He particularly complained of weakness in the chest, without experienc-

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ing at the same time any tension or pressure in the same. The pulse I found smaller and weaker than it had been during the last weeks, and his languid eye plainly denoted his increased debility. The sputa had grown infinitely less in quantity and in purulent appearance, nor did it retain as much of the offensively-smelling character.

It is not an uncommon thing in chronic dieases to find, suddenly, a complete pause occur in the progress of improvement, usually combined with a sensation of the utmost exhaustion; a circumstance very much calculated to depress the patient's spirits, and throw him again into despair with regard to his recovery.

China 12, removed all these untoward symptoms, and subsequently I returned to *Sepia*, anticipating much benefit from it, but still very cautious in giving a prognosis, because duly considering that the patient had been delicate from childhood, had gone through very serious diseases, such as pneumonia, and that he was of a decidedly phthisical habit.

Sepia answered my expectations; and under repeated administration of this remedy the patient continued to improve till the 13th June. At that time his case stood as follows:—During the day little cough with expectoration, sputa yellow, thin, mucous, with

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very little smell or taste, amounts to about a teacupful in twenty-four hours; in the morning a scraping sensation in the throat; on the chest pressure and oppression with dyspnœa, and the necessity to lie bolstered up in bed. A long breath brings on the cough; pulse in the morning above 90 and small, his looks improved, appetite tolerably good, little thirst, bowels generally regular, moving once a day, his strength somewhat greater.

Kali carb. again, repeated every two or three weeks until the 27th November.

By that time he coughed but little, either day or night, sputa thin, white mucus, rather out of proportion in quantity, compared to the severity of the cough; the pressure on the chest had so much diminished, that he could walk about without much difficulty; fever totally gone, and strength improved.

Stannum 3, once a fortnight, to meet the mucous cough, in which I succeeded in about eight weeks, during which period the convalescence was progressing steadily, and shortly after the man resumed his arduous duties in the service of his country which he has uninterruptedly pursued since.

Thus in the space of fourteen months I had restored to health an individual declared by respectable practitioners in the old school to be dying of a hopelessly incurable disease.—*Dr. Schwartze.*

[I have many more cases at hand to illus-

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trate the triumphs of homœopathic treatment in phthisis pulmonalis, which allopathic physicians had given up as incurable, but they are so very similar in every respect to the preceding ones, that I fear to tire the reader by too much repetition.]

The preceding records of homœopathic practice demonstrate satisfactorily that homœopathy can do something against pulmonary phthisis unless our enemies should attempt to dispute FACTS. A more difficult point to be settled, is: What can homœopathy accomplish in those diseases, in comparison with allopathy? This cannot be determined till many practitioners of both schools shall have reported the favorable and also the unfavorable results of their treatment of this disease, as I have now done.

If I, individually, am called upon for my opinion, I can only say that the favorable terminations by far exceed the fatal ones in the ratio of three to two.

As regards Case 8, which was fatal, the patient was of a phthisical diathesis, had had a previous attack, and was this time taken with it in childbed, the case being complicated with a drug disease, caused by *quinine*; and when I took charge of the patient, the proguosis could not be otherwise than very unfavorable. The fatal result, in this in-

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stance, cannot be laid at the feet of homœopathy. Allopathy had been unsuccessful, and would probably have remained so, if that mode of treatment had been pursued.

The hereditary pre-disposition to phthisis, the phthisical habit of the patient, and the colliquative stage of the disease, precluded the possibility of a favorable prognosis.

No. 12 could not reasonably have been expected to recover. Allopathy had transferred the case to me as incurable, and therefore could have done no better than I did.

The patient No. 13 at first gave me some hopes of recovery, but unexpectedly she became worse, and her removal to the Springs of Salzbrunn hastened her death. If any venerable physician in the old school can adduce sound reasoning that the patient could have been saved by allopathic treatment, let him do so for the sake of suffering humanity.

In the introduction to this essay I propounded the question :—

"What can homœopathy accomplish against pulmonary phthisis? and What has she already accomplished?"

And now I proceed to give the following reply :—

"*According to faithful and accurate observations, she has accomplished a great deal, and need not shrink from close comparison with her older sister, allopathy; because in nu-*

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merous instances where the latter was utterly powerless, and acknowledged to be so by her own votaries, the former restored the patients to perfect health."

Homœopathy, then, has just claims to more respect and consideration than is generally conceded to her. We will next enquire into the special results and indications to be deduced from actual experience and observation.

First of all we will enumerate the medicines which have performed cures, and in how many cases each has been employed.

	Times.		Times.		Times.
Ars.	2	Kali carb.	6	Phosph.	6
Bell.	3	Kali nit.	2	Puls.	4
Calc. carb.	8	Lycopod.	12	Sepia	7
Carb. veg.	2	Laurocer.	1	Silicia	1
China	6	Ledum pal.	1	Sambucus	1
Dulc.	1	Mercur.	1	Sulph.	13
Dros.	1	Nux vom.	2	Stannum	16
Ferrum	1	Nitri. acid.	1	Staphys.	2
Hyosc.	1	Natr. mur.	1		

Thus 26 remedies only have as yet been administered in phthisis pulm. out of the 200 to be found in our Mat. Med.

We will further examine, whether some indications *ab usu in morbis* can be laid down of those remedies that have worked such favourable results. Not of all, owing to a want of detail in the narrative of some of the

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cases recorded, but of the following, which have been sufficiently tested :

I. Calc. carb.

Various potences have been used, sometimes the 18th, frequently the 24th, most frequently the 30th, a few times only the 12th. The latter did injury by too powerful a primary effect.

Repeated doses were given only of the 30th.

With reference to an advantageous effect on sex, constitution, or age, very little has transpired, and the same is the case with regard to the ætiology of the disease. In some cases certain psoric eruptions have been pointed out; in others none were observed; thus, in selecting a remedy, it will be best to be guided by the totality of symptoms, rather than the fancied cause of the disease, such as psora.

The symptoms characterizing Phthisis in those cases which were cured by *Calc. carb.* were grouped as follows :—

Cough and Expectoration.

Tickling irritation to cough. Irritation to cough, seemingly produced by feather-dust; in the day-time. Mucus in the trachea, which provokes the cough.

Cough *dry*, violent in the evening and at

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night, so as to make all the arteries pulsate stronger.

Night cough during sleep.

Exhausting, *dry* cough with pain in the chest.

Violent cough day and night.

Rattling in the trachea and chest.

Expectoration smells offensively, is of a brown colour and mixed with pus.

Increased expectoration upon taking *Calc.* VI^{ooo}.

Violent day cough with much expectoration and rattling on the chest.

Lumpy, *purulent* sputa.

Greenish, muco-*purulent* expectoration.

Yellow, offensive sputa.

Coughing sometimes attended with vomiting.

Pains in the Chest.

On taking a long breath stitches on the chest.

Stitches in the side of the chest when moving about, or bending on the painful side.

Pains in the chest greatly aggravated by *Calc.* VI.

Stitches in the side of the chest when coughing.

Burning in the chest.

Febrile Symptoms.

Constant chill with thirst.

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Evening fever every third day, first, heat in the face, then chills.

Night sweats. At night a *local perspiration* on the chest, which is very debilitating.

Various attendant Symptoms.

Unquenchable thirst.

Diarrhœa, frequently soft stools.

Sluggish bowels, dry stool.

Inclination to diarrhœa with cutting pains, and then again obstinate constipation.

Calc. VIII caused violent diarrhœa.

Disposition to hemorrhage.

Menstruation every three weeks, profuse.

Swelled salivary glands.

Ends of the fingers red and much swollen.

Cachectic countenance.

Scrofulous constitution.

Emaciation.

Want of strength, great exhaustion after exercise.

Moral Symptoms.

Anxiety, *fatigue of the mind, despair about recovery.*

Depression of spirits, irritable, sensitive, disposed to weep.

II. Lycopodium.

Given in the 12th, 18th, 24th, 28th, and 30th potence. The last most frequently, and in repeated doses. Its almost specific action

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in pulmonary phthisis, particularly if characterized by purulent expectoration, is undeniable, more especially if the symptoms point to the formation of a vomica, either in consequence of acute pneumonia causing the formation of pus, or of more occult inflammation of those organs.

The *Lycop.* is indicated in the following symptoms characteristic of Phthisis:

Cough and Sputa.

At night violent *dry* cough, but during the day attended with expectoration.

Cough after drinking, dry cough day and night, dry morning cough of several years' standing.

Cough and expectoration.

Cough with purulent expectoration.

Rattling on the chest.

Day and night violent cough with sputa.

Expectoration of pus. Cough with expectoration of blood and pus.

Sputa greenish, yellowish, greasy, smells musty, and tastes putrid.

Suspicious expectoration; profuse expectoration.

Pains in the Chest and Difficulty of Breathing.

Stitches in the chest.

Burning in the chest like "heartburn."

Constant pressure on the last left rib.

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Stitches, pressure on the chest.

On the left side of the chest, burning and gnawing.

Feeble voice, cannot draw a long breath.

Oppression on the chest, difficult breathing.

Impossibility of lying long on the left side, on account of difficulty of breathing, and cough.

Febrile Symptoms.

Feeble pulse.

Dryness of the skin, of the hands.

Chills towards evening.

During the evening, flashes of fever.

Inward heat, lingering fever.

Night sweats.

Perspiration during sleep.

Clammy night sweats.

Offensive perspiration upon the breast at night.

Various attending Symptoms.

Diarrhœa of purulent matter, which is relieved by *Lycopodium* IV°.

After *Lycopodium* discharges of blood from the anus.

Inward debility.

General loss of strength with emaciation.

Moral Symptoms.

Anxiety, with sadness and inclination to weep.

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Mental exhaustion, wilfulness, irritable temper.

Depression of spirits.

III. Phosphorus.

Excepting in one case, where the 24th potence was employed, this remedy has been administered in the 30th without repetition. In both sexes, and different constitutions and ages, *Phosph.* has been beneficial in the few cases where it was employed. It certainly acts specifically on the lungs, as is demonstrated *ab usu in morbis.*

Phos. has cured both dry and moist cough. Amongst the latter, both such as was characterized by light-coloured sputa, and likewise by pus.

Cough and Sputa.

Tickling in the chest, tickling cough.

Roughness in the trachea.

Hoarse, rough, dry throat.

Cannot say a word without being annoyed by a short hacking cough.

Night cough with stitches in the trachea.

Chiefly dry cough, occasionally with bloody expectoration.

At night his sleep is disturbed by cough.

Cough with whitish sputa.

Cough with white mucous expectoration.

Expectorates pus and blood.

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Yellow purulent saltish sputa.
Greenish expectoration.

Difficulties of the Chest and Breathing.

Stitches in the left side of the chest; touching the spot causes a stitch, chronic stitches in the side, pain of soreness and burning in the chest, pain under the left chest on lying on it.

Cannot well lie on the back, and not at all on the sides. Hammering in the chest, soreness, pain in the side of the chest, burning, stinging.

Dyspnœa, oppression of the chest, difficult breathing, oppressed breathing.

Febrile Symptoms.

Chills, particularly in the evening, with flashes of heat.

Evening chills, dry heat in the palms of the hands more especially, flashes of heat.

Circumscribed redness of the cheeks.
Morning sweats.
Clammy sweats, night sweats.
At night, clammy sweat.

Various Symptoms.

Diarrhœa.
Pains in the abdomen when coughing.
Scrofulous constitution.

Habitus phthisicus.

Shaking cough with trembling of the limbs.

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Moral Symptoms.

Irritability, fretfulness, anxiety.
Want of cheerfulness.

IV. Sepia.

The symptoms have not been stated with sufficient accuracy in those cases where this remedy has been employed, to draw indications *ab usu in morbis*, still we may observe that it has changed a purulent expectoration into a mucous.

Hoarseness, agitation in the chest, feeling and pain of soreness in the chest, pains in the chest on motion, oppression on the chest, and stitches in the left side of the chest on coughing and breathing, morning and evening cough with saltish sputa—the latter is tenacious and coughed up with difficulty.

Night sweats, sour morning sweats.

Indifference towards his family, despondency, sadness.

V. Stannum Foliatum.

No remedy has been so frequently used in phthisis pulm. as this, nearly always in the 6th potence, a few times only in the 3d, and in most cases has it been repeated every week. The following symptoms were covered by it:—

Cough and Expectoration.

Tickling in trachea, scratching sensations

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in the throat, hoarseness, cough excited by talking, laughing, and singing.

Constant irritation on the chest to cough, as if produced by mucus.

Roughness in the trachea with tickling cough.

Cough, night and morning most violent.

Violent, fatiguing, shaking cough, now dry, then moist, tenacious, at other times the expectoration loose.

Day and night cough with copious mucous sputa, sometimes deep. Cough and expectoration of whole lumps of yellow, offensively-smelling and tasting sputa.

Cough with greenish expectoration of a nauseous, sweetish taste.

Mucus in the trachea easily coughed up.

Expectoration sometimes watery, thin and mucous, at others thick, tenacious, lumpy, yellow-green, saltish, sweetish.

In a case of expectoration of pure pus from a vomica (Case 26), *and in suspicious expectoration subsequent to pneumonia* (Case 19), ***Stannum was quite useless.***

Pains in the Chest and Difficulty of Breathing.

When coughing, the chest feels raw and sore.

The inside of the chest, from the throat downwards, raw and sore.

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Pains all over the chest.

Pressure deep in the chest, as if from a weight. Tension across the chest.

Utmost feeling of faintness in the chest, as if all was numb.

Uncommon weakness of the chest, as if eviscerated.

Speaking irksome, owing to oppression and hoarseness.

When breathing, a howling and rattling in the chest.

Dyspnœa whenever he moves.

He cannot lie down at night from want of breath.

Want of air, feeling of suffocation.

Tightness of the chest.

In the evening compression of the chest.

Febrile Symptoms.

In the evening from six to nine chills over the back, and hot hands.

Burning in hands and feet.

Dryness of the mouth.

Agitation of the blood.

Flashes of heat on taking exercise.

Night and morning sweats.

Pulse small and quick.

Various Symptoms.

Diarrhœa.

Weakness of the thighs, as if the knees were giving way. Emaciation.

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Moral Symptoms.

Anxiety, despair.

From the above we gather, that *Stannum* is indicated only in those coughs which are attended with expectoration, though the latter may be raised with difficulty; further, when irritation in the trachea provokes the cough, and hoarseness is combined with it. The cough is regardless of the hour of the day.

The expectoration which calls for *Stannum* is pus, approaching to mucus, or mucus only, —in expectoration of *pure pus*, *Stann.* will not do.

Burning in the hands and feet, and the lingering slow fever, are admirably covered by *Stannum*.

VI. Sulphur.

In doses varying from the undiluted *Spirit. Vini Sulph.* to the VIII. and X. potence.

In one case only was it repeated.

Cough and Expectoration.

Tickling to cough in the trachea.

Night cough.

Cough at any time of the day, dry at night, during the day with yellow-greenish sputa. Cough short, barking, frequent during the day, disturbing his rest at night, dry cough with thick mucous expectoration.

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Yellow-green, offensive sputa, soon changed into bronchial mucus.

Expectoration of pus and blood.

Cough with purulent sputa; whole lumps are coughed up.

Pains in the Chest, &c.

Oppression on the chest, especially on drawing his arms together before him.

When coughing and sneezing, feels as if the chest would split:—In the left side burning and gnawing.

Difficult breathing.

Tightness of the chest, with whistling and rattling, and visible palpitation of the heart.

Fulness of the chest, burning in the chest.

Pressure in the sternum. In walking, tightness of the chest.

Chills, sour night sweats.

Various Symptoms.

Can sleep at night only on the back, in a sitting posture.

Pains in sacrum. Weakness, trembling of the limbs, great languor, especially with every exertion.

Moral Symptoms.

Irritability, peevishness, depression of spirits.

THE END.

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