A PROVING

OF THE

ARSENIATE OF SODA.

(HYDRO-DISODIC ARSENIATE.)

BY THE

HOMŒOPATHIC MATERIA MEDICA CLUB

OF ALLEGHANY COUNTY, PA.

THE PROVER'S RECORD ARRANGED BY

J. F. COOPER, M.D.

CONTRIBUTED TO THE PROCEEDINGS OF THE HOMŒOPATHIC MEDICAL SOCIETY
OF PENNSYLVANIA, AT THE SESSION OF 1875.

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ARSENIATE OF SODA.

INTRODUCTION.

THE Homœopathic Materia Medica Club of Alleghany County consists of the younger graduates and some of the students of homœopathy of the county, associated in an organized society gotten up for the purpose of perfecting its members in the study and application of the Materia Medica. At the time this proving was commenced, the Club consisted of fourteen members, eight of whom furnished individual records kept by themselves in making the proving; and in addition to these, Millie J. Chapman, M.D., also kept and contributed a record of provings.

Three of the original provers went over the proving a second time, taking each an ounce of the tincture. The records made in the reproving was done by a person other than the prover, in order to correct a defect markedly seen in the first record, growing out of the influence of the drug upon the memory.

On entering upon the proving none of the provers knew what drug they were taking.

The persons furnishing records from which this paper has been made were

J. S. C.—J. S. Crawford, M.D.
J. H. B.—J. H. Buffum, M.D.
R. R.—R. Ramage, M.D.
O. R. S.—O. R. Shanon, M.D.
J G. T.—J. G. Thompson, M.D.
J. C. K.—J. C. King, M.D.
M. J. C.—Millie J. Chapman, M.D.
W. J. M.—Mr. W. J. Martin.
Z. T. M.—Mr. Z. T. Miller.

The three who made the reproving were:

O. R. S.—O. R. Shanon, M.D.
R. R.—R. Ramage, M.D.
J. G. T.—J. G. Thompson, M.D.

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EXPLANATORY NOTE.

The capital letters preceding a paragraph of symptoms represent the initials of the prover; thus R. R. refers to R. Ramage, M.D.

The figures 3^{d}, 43^{d}, 8^{d}, indicate *the day of the proving* in which the symptoms they precede were observed.

The figures following symptoms indicate the strength of the drug producing them. Thus, ^{0}, ^{6}, ^{15}, ^{30}, following a symptom, show that it was produced while the prover was under the influence of the tincture (solution) or the sixth, fifteenth, or thirtieth dilutions respectively.

The symptoms have been arranged to facilitate reference as much as possible.

This drug is a combination of Arsenious acid and Nitrate and Carbonate of sodium in the following proportions:

Arsenious acid, ...	10
Nitrate of sodium, ...	8
Dried carbonate of sodium, ...	5

These substances, finely pulverized, are put into a clay crucible and covered; then brought to a full red heat until effervescence ceases, at which point complete fusion has usually taken place. The fused salt is then poured on a porcelain slab and allowed to solidify, and while still warm is put into a sufficient quantity of distilled water boiling hot and stirred till dissolved. The solution is then filtered and set aside to recrystallize. The crystals when formed are drained, rapidly dried on filtering-paper, and kept in well-stoppered bottles to prevent efflorescence.

This preparation has been considerably used in old-school practice, and is preferred by many of that school on account of its being milder in its action and less dangerous in the using than Arsenious acid. From a twelfth to a third of a grain are the bounds within which it is usually given with safety.

It is, however, more frequently used in solution, and is the base of Pearson's solution, and is also the base of a solution of the *U. S. Pharmacopœia*.

Pearson's solution consists of one grain of the Arseniate of sodium to an ounce of distilled water, and that of the *U. S. Pharmacopœia* four grains to the ounce of distilled water.

This proving was commenced on all who took the medicine with the thirtieth attenuation in five, ten and fifteen drop doses, each dose to be put into about an ounce of water and to be taken in that form. The first tincture (solution) used was prepared with ten grains troy, by weight, to the ounce of

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distilled water. The attenuations used were made from this tincture. The tincture used in the three reprovings added to this paper since it was presented last year, was made of eight grains troy to the ounce of distilled water. The attenuations were made on the decimal scale and prepared with distilled water as far as the third, and then with alcohol.

The medicine, both the attenuations and the tincture, was taken by most of the provers at the rate of three doses per day upon an empty stomach. The proving was commenced in July, 1875, and the last record made was in the December following.

The principal symptoms are here noted in the order in which they occurred in most of the provers:

Synopsis of Symptoms Produced.

Dulness and want of power to concentrate the mind. Inability to think clearly or study to advantage. Dull pain in the orbits and supraorbital region. Fulness and great swelling of the orbital region. Congestion of the vessels of the conjunctiva, worse from day to day while the proving continued. Thickening of the conjunctiva, and when the ball is rolled from side to side or up and down, that membrane is rolled upon itself, so as to appear in folds or reddened fleshy-looking masses between the ball and lids. The frontal headache and smarting of the eyes and orbital swelling are worse in the morning, wearing lighter as the day advances.

A reddish papular eruption over the face, more on the right side of the face. Thickening and œdema of the tonsils, uvula and soft part of the palate. Obstruction of the nasal cavities. Hawking of a tough, gelatinous, grayish-yellow mucus from the throat and posterior nares. A watery discharge anteriorly from the nose. A teasing dry cough through the day, continuing long after the medicine ceased to be taken by the provers.

The usual resonance on percussion, but at times no respiratory sounds to be heard. Fluctuation in the action of the heart. Its action very much accelerated and the respiration rendered difficult by protracted fatiguing effort or exercise.

Extreme tenderness in the epigastric region. Pain from time to time shifting through the bowels; relieved by the escape of gas or the passing of fæces. The stools occasionally laxative and at times of natural consistence. An unusual

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quantity of gas generated in the bowels and passed off per anum.

Tenderness in the epigastric region and more or less distension of the abdomen.

Appetite increased while taking the tincture and became poor after ceasing to take it.

Tongue but little coated in some of the provers; somewhat reddened and corrugated in others. Thirst. Shooting pains in the chest on either side at the junction of the ribs with the cartilages. Neuralgic pains in the parts supplied by the sciatic and crural nerves.

Skin.

First Proving.

R. R.—3^{d}. Fine red rash on the face and neck, most of it on the right side,^{0}.

6^{d}. Rash still as above,^{0}.

8^{d}. The fine miliary rash still on the face and neck,^{0}. On retaking the medicine after a lapse of twenty days the rash brought out by the first taking of the medicine did not again appear,^{0}.

J. C. K.—43^{d}. An eruption of diffused irregular patches, with numerous papular elevations, without areola, with pointed apex, on the face and neck. Most abundant between the zygoma and the ramus of the lower jaw. A goodly number, however, on the neck, and more on the right side than on the left,^{0}.

58^{d}. Have a small boil on the right side of the chin and one on the tuberosity of the ischium,^{0}.

W. J. M.—51^{d}. Within the last three days there has appeared on the skin covering the left superior maxilla, a number of hard very red pimples, not very painful,^{30}.

M. J. C.—8^{d}. Yellowish blotches resembling moth patches appear on the cheeks and forehead, remaining a day or two,^{30}.

J. H. B.—11^{d}. A boil appears on the outer hamstring of the left leg,^{30}.

Reproving.

O. R. S.—9^{d}. The complexion a little red or purplish,^{0}.

22^{d}. The skin natural,^{0}.

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J. G. T.—11[d]. A brownish scaly condition of the surface of the chest which has been there for the past ten years is disappearing, and a reddish color of the surface of the chest and neck remains, distinctly marking the boundaries of the old eruption or discoloration,[0].

25[d]. The chloasma over the chest and lower part of the neck, and also over part of the abdomen and along and over the rectus abdominis muscle, has changed to a moderately bright red color, and seems to be disappearing,[0].

Sleep.

First Proving.

J. G. T.—2[d]. Had to lay on the face to get to sleep, but slept well through the night,[0].

3[d]. Slept moderately well through the night,[0].

6[d]. Slept poorly; would start up and be wide awake and much frightened,[0].

8[d]. Slept better last night.

R. R.—4[d]. Slept soundly,[0].

8[d]. Restless and wakeful, followed in the morning by a general depression,[0].

9[d]. Restless. Sleep full of dreams, with frequent waking,[0].

O. R. S.—14[d]. Sleep full of dreams of murder and fighting,[0].

15[d]. Laid down and slept two or three hours, after which arose, feeling better,[0].

J. C. K.—23[d]. Have been very restless for three nights. Frequently waking to find the covers pushed aside and myself in another position from that in which I went to sleep. I usually rest in one position all night, not waking through the night,[0].

40[d]. Had many dreams and was restless last night. Am not usually so,[0].

47[d]. Was restless last night and dreamed, contrary to my usual custom.

48[d]. Slept little last night, was very restless and awoke frequently,[0].

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Z. T. M.—3d. Extremely sleepy,30.
24d, P.M. Drowsy and sleepy while at work,15.
25d. Did not sleep well; awoke often through the night,15.
39d, P.M. Yawning, without sleepiness.
40d. Slept unusually well for eleven hours, although I usually sleep but six and a half or seven hours,15.

W. J. M.—12d. Slept well last night, but dreamed a great deal,6.
49d. Slept well but awoke early, with great pain in the bowels and a dreadful headache,6.
50d, 10 P.M. Took a bath and went to bed, but was restless, and could not sleep till after three A.M.,15.

M. J. C.—8d. Could not sleep till late because of the uncomfortable feeling in the stomach,12.

J. H. B.—9d. Retired about 11 P.M., but could not sleep till after midnight on account of a restless tossing about,30.
11d. Sleep disturbed,30.

Reproving.

O. R. S.—11d. Slept well through the night,0.
12d. Slept well last night, and felt well on getting out of bed this morning,0.
13d. Slept well and felt moderately well, except dull and stupid,0.
14d. Did not sleep well. Dreamed of getting into a row and having difficulty,0.
15d. Took but two doses of the medicine yesterday and slept soundly, but felt weary on waking,0.
17d. Slept well during the past night,0.
19d. Slept uneasily; dreamed, shifted, and was restless,0.
20d. Slept well,0.
22d. Slept well, but awoke in the morning with dry fauces and pharynx,0.
24d. Slept well,0.

J. G. T.—5d. Slept well,0.
10d. Last night, and the previous one, on laying down to sleep, on closing the eyes visions of small black animals appeared to pass as it were before the eyes, arousing him from sleep, and while sleeping black objects were dreamed of. Though the night's sleep was a troubled one he laid still,0.

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11ᵈ. Sleep troubled with dreams of an indefinite character,°.
12ᵈ. Slept through the night without waking,°.
13ᵈ. Slept well last night,°.
14ᵈ. Slept well,°.
15ᵈ. Slept as usual, notwithstanding the feeling of oppression in the chest, and does not recollect coughing through the night,°.
16ᵈ. Slept soundly, but was restless, and tossed about without being aware of it, and, on inquiry, find that it has been so since the drug commenced to produce symptoms. When roused up at any time since taking the drug he wakes nervously as if in affright, which is not usual with him,°.
18ᵈ. Slept soundly, more so than usual, but tossed about; and when attempts were made to arouse him he rose up in the bed excitedly and lay down again, without being conscious of it in the morning, which was not usual with him. Finds it difficult to get to sleep. Has a feeling of nervousness all the time, which seems to annoy and prevent him going to sleep,°.
19ᵈ. Was waked three times during the night by the pain in the inguinal region,°.
24ᵈ. Slept well,°.
25ᵈ. Slept well, but awoke with a dull frontal headache,°.
29ᵈ. A restless feeling prevented his going to sleep till after one o'clock in the morning, although he went to bed at 9.30 P.M.,°.

R. R.—3ᵈ. Troubled sleep. Unusual dreams of quarrelling and difficulty,°.
4ᵈ. Slept well, and had no unusual dreams,°.
7ᵈ. Slept well,°.
8ᵈ. Slept well,°.
10ᵈ. Slept well,°.
12ᵈ. Slept well,°.
13ᵈ. Was restless and tossed about a great deal through the night. Was at times chilly for a few minutes, then hot,°.

Mind and Disposition.

First Proving.

J. G. T.—2ᵈ. Requires an effort to attend to accustomed duties. Feels dull. Tries to write, but it requires an effort to form each word,°.

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4d. Feeling of nervousness all through the body,°.
5d. Stupid all day,°.
7d. Feel gloomy and want to sit quiet,°.

R. R.—5d. Listless, languid, wants to sit still. No disposition to attend to his accustomed business. Mind dull; cannot think clearly,°.

6d. Feels nervous. Head feels dull, as if he had taken cold. Cannot concentrate the mind when reading,°.

8d. Cannot remain long in one position; must move about. Feels nervous and much prostrated,°.

9d. Dull and languid all day. Easily fatigued when walking,°.

14d. Still easily fatigued when walking,°.

O. R. S.—Feel dull, stupid and forgetful.

14d. Feel much better doing nothing. Do not wish to think, to read, or to exercise,°. Eight days have passed since I quit taking the medicine, but still feel its effects.

5d. After recommencing the taking of the drug, feel dull and stupid,°.

7d. Dull and stupid,°.

11d. Continue to feel badly, though the medicine has been done for four days,°.

J. C. K.—21d. Have an unpleasant feeling of general indisposition. Do not feel like thinking or attending to any business. 7.50 P.M. Very nervous. Feel very much exhausted,°.

22d. Quite nervous and uneasy, and not disposed to attend to business,°.

25d. Disinclined to read or accomplish any business. Feel depressed or blue,°.

26d. Went to the country, and while away felt much better. Had no uncomfortable feelings. For several days have had an aversion to an accustomed cigar, and after smoking the symptoms grow worse.

36d. Have felt pretty well for several days,°.

42d, 9.30 A.M. Am unable to concentrate the mind on any subject requiring study. Restless, and unable to think,°.

43d, 9.30 A.M. Cannot think clearly and rapidly,°.

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45d, 7.05 P.M. Exceedingly nervous; cannot sit still without exercising all my self-command,0.

46d, 7.50 P.M. Have at times through the day felt better, and at times worse,0.

47d, 8.05 P.M. Am very nervous; cannot hold my pen steadily,0.

48d, 8.10 P.M. Am still quite nervous,0.

53d, 9.30 P.M. Feel more inclined to study and apply myself to business. The mind is clearer. Feel more cheerful and better in every respect,0.

58d. Feeling better and more cheerful than before I took the drug. This condition, however, is wearing off. It was more noticeable some days since,0.

W. J. M.—7d. Desire to keep quiet,30.
12d. Feeling of lassitude, and want to lie down or to sit,15.
50d. Arose at eight in the morning, feeling very miserable,6.
51d. Am feeling languid and worthless,6.

M. J. C.—2d, 8 A.M. Am dull. Stupid feeling lasting through the day. Can scarcely keep awake,30.
3d. Feel well. Can study easily,30.
12d. Am disposed to be reconciled to circumstances favorable or unfavorable. Feel like working hard. No undertaking too large for me,12.

J. H. B.—9d. Great restlessness; cannot sit still for any length of time without considerable force of will. Feeling as if something was impending, which caused him to move about,30.
11d. Very languid feeling during the day,30.

Reproving.

O. R. S.—10d. Heavy and sleepy. Cannot study. Disposed to remain sitting,0.
11d. Mind clear,0.
12d. Dull and listless all day,0.
14d. Listless and dull. Could not study; but on going into the open air and walking about, all the symptoms were relieved, and while walking he was bright enough, but when he came in and sat down, the same feeling of dulness returned,0.
16d. Mind not fit for study, and disposed to be irritable.

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19d. Irritable, dull, and wants to sit or lie and not be disturbed. Cannot study. Forgetful,°.

20d. Mind much clearer,°.

24d. The mind clearer. The disposition to forget entirely changed, and the petulant disposition and feeling of taciturnity gone,°.

J. G. T.—4d. Dull, and indisposed to study. Cannot be interested,°.

5d. Cannot concentrate the mind readily,°.

6d. Want of power to concentrate the mind continuous,°.

9d. Confusion, and want of power of concentration, much worse all day,°.

11d. Still depressed,°.

12d. Somewhat dull, and unable to concentrate the mind for study,°.

14d. Feeling of confusion through the head, and want of power to readily concentrate the mind,°.

15d. The symptoms of the mind about as for several days,°.

19d. Still unable to bring himself to study,°.

R. R.—3d. Could not think readily during the day, but this P.M. the mind is clear as usual,°.

24d. Cannot concentrate the mind, or recall names, and indisposed to study or to speak to any one while the afternoon headaches last.

37d. More impressionable to cold than formerly,°.

Head.

First Proving.

J. G. T.—2d. Dull aching in the frontal region on awaking in the morning,°. During the day pain in the frontal region, very severe. Every motion jars the brain,°.

3d. The head feels dull and heavy, with aching pain in the frontal region,°.

4d. The head feels heavy,°.

5d. Dull frontal headache,°.

6d. Confused feeling in the head,°.

7d. The head feels heavy,°.

8d. Dull frontal headache,°.

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9d. Dull feeling in the frontal region and at the root of the nose,0.

R. R.—4d, 8 P.M. Feeling of heat and fulness in the whole head.

5d, P.M. Violent frontal headache and much prostration. Violent headache; every time he awoke the whole head ached,0.

6d. The headache better, but the head feels dull,0.

8d. The head feels dull. A vacant feeling in the whole head. Cannot concentrate the mind on anything.

9d. Head somewhat better,0.

10d. The head much clearer,0.

11d. The head dull and heavy,0.

J. C. K.—18d, 12.15 P.M. Feeling of fulness in the head all morning. Occasional shooting pains above the right eye. The head feels sore, and I feel drowsy,0.

21d. The head feels dull. 7.50 P.M. Dull pain in the top of the head,0.

22d. The head feels dull and heavy, with some aching on the vertex,0.

25d, 8.25 P.M. Have had a dull aching in the top of my head and above the eyes (not severe) all day,0.

44d, 2.30 P.M. The headache to-day left at this time,0.

45d, 7.05 P.M. Have had an occasional dull headache on the top of the head, lasting about fifteen minutes at a time,0.

46d, 9.35 A.M. Headache on top of the head,0.

47d. Have had quite a severe headache at intervals all morning. 4.40 P.M. Severe sharp headache in the top of the head and in the forehead above the eyes; worse above the right eye. 8.05 P.M. The aching continues, and is increasing in severity,0.

49d, 8.55 A.M. Have a severe but dull aching on the top of the head, and also in the sides of the head. 3.30 P.M. The headache lasted till after dinner,0.

Z. T. M.—2d. Drawing pain in the right temple, lasting a short time,30.

3d. Occasional shooting pains through the forehead and right temple,30.

25d, 12 M. Shooting pains through the frontal region,15.

26d. Shooting pains in the frontal region,15.

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27d. Feeling of pressure over each side of the posterior inferior part of the occiput, as if resting in a photographer's head-rest. Numbness in the forehead in the evening. A wavering floating sensation on turning the head quickly,[15].

39d, P.M. A boring headache in the temples, from without inwards, principally on the right side and extending to the left, with nausea. The head feels hot, but on placing the hand on the forehead it seems cold. The headache is aggravated by heat, pressure and tobacco-smoke. Throbbing of the temporal artery,[15].

40d. Severe pain in the right temple on getting up in the morning, which he formerly had, but supposed himself cured of from his having been free from it for a long time. The pain confined to the right temple. While eating breakfast had a severe pain through the right temple, after which the headache grew less. Have had a dull heavy head all the evening, with slight nausea,[15].

41d, 8 A.M. Dull headache in the right temple,[15].

W. J. M.—12d. Head dull and heavy. P.M. Head clear,[15].

48d, 5 P.M. Pain in the right temple. Was stooping a great deal during the evening, which aggravated the pain. The pain shifted to the orbital region.

50d, 8 A.M. Bathed my head in cold water without any benefit. Ate a little at noon, which seemed to relieve me, but the aching returned in all its violence on walking out in the hot sun. 8 P.M. Very little pain in the head, and do not feel so weak or sore,[6].

51d. Got up between 6 and 7 A.M., having some headache, which continued all day. 6 P.M. Free from headache,[6].

J. S. C.—3d, 6 P.M. Dull, heavy feeling in the head lasting about three hours,[30].

4d, 3 P.M. Dull, heavy feeling in the head lasting five hours, after which the head ached violently, every motion of body aggravating it, even turning the head, and relieved by tying a handkerchief tightly around it,[30].

5d. Slight dull feeling in the head,[30].

16d, 3 P.M. Dull, heavy feeling in the head, especially in the vertex, increasing in severity till I went to bed, and was made worse by stooping or moving the head. The aching took away the appetite,[30].

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M. J. C.—2d. Throbbing in the head on going up stairs,30.
8d, P.M. Fulness in the forehead and throbbing in the top of the head,12.
13d. Dull, heavy feeling in the forehead and top of the head, with occasional sharp pains in the side and top of the head,12.
15d. Aching in the forehead; heavy feeling in the forehead,12.

Reproving.

O. R. S.—12d. Slight dull aching through the temples, and across, above and in the superciliary ridge, worse during the forenoon,0.
14d. Dull pain over the orbits reaching into the temporal region. Dull through other (confused) feeling in the head,0.
16d. The head feels dull,0.
17d. Dulness and very moderate aching through the supraorbital region,0.
18d. Dull supraorbital headache,0.
20d. The head feels better,0.
24d. Quite a severe aching through the temples and forehead; worst from temple to temple, and lasting from the time of waking in the morning till 1 P.M.,0.
36d. No headache for ten days.

J. G. T.—5d. Heavy, disagreeably full feeling in the orbital region reaching to the temples,0.
7d. Moderately severe aching in the forehead and temples, worst in and above the orbits,0.
11d. Heavy feeling in the head, but less pain than for two days past,0.
12d. Less frontal headache than any day since the proving began to develop symptoms,0.
15d. Awoke with moderately severe pain from one temple to the other over the orbits, which has continued all day,0.
16d. No headache,0.
17d. Awoke this morning with very severe aching across the brow above the orbits, with considerable vertigo on moving about, and a sensation of lightness or largeness of the head while sitting, continuing severe till 3 P.M., from which time the aching has gradually lessened till now (10 P.M.),

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there is just enough pain to keep him conscious of it all the time,⁰.

18ᵈ. About enough of the supraorbital headache to make him constantly aware that he has it,⁰.

21ᵈ. The supraorbital headache the same as last noted,⁰.

23ᵈ. Frontal headache rather more severe,⁰.

24ᵈ. The first impression this morning on waking was produced by a severe pain in the supraorbital region and temples, continuing very severe till 4 or 5 P.M., when it passed into the orbit, posterior to and in the ball of the eye,⁰.

R. R.—2ᵈ. Dull, not severe, frontal headache,⁰.

3ᵈ. Headache all day, till since 4 P.M. it has ceased,⁰.

4ᵈ. The head has been clear all day,⁰.

9ᵈ. Severe frontal and temporal headache coming between 2 and 3 P.M. and lasting till 5 P.M. While the pain lasted the aching part was sore to the touch, and during that time he was listless and absent-minded. 10 P.M. The head is now free from pain and soreness and the mind clear,⁰.

12ᵈ. Dull frontal headache,⁰.

24ᵈ. Dull frontal headache for five or six days, coming on each day about 3 P.M. and continuing steadily till 9 or 10 P.M., during which time felt dull and indisposed to study or to speak to any one,⁰.

28ᵈ. Since the headache has passed away a feeling of prostration and sinking in the epigastrium, without pain, comes on about the same time the headache comes, and lasts about an hour at a time and is accompanied with yawning. He has been so daily, except one day, since the headache left. At that time there is a dull feeling in the supraorbital and frontal regions, which passes off with the sinking sensation.

Fever.

First Proving.

J. C. K.—21ᵈ, 7.50 P.M. Skin hot and dry,⁰.

22ᵈ. Skin hot, but little perspiration. Temperature $97\frac{7}{10}$ in the axilla,⁰.

Z. T. M.—25ᵈ, P.M. Very chilly on retiring. Was compelled to cover up, although wife was perspiring beside me,¹⁵.

39ᵈ, P.M. Chills on the back that made me shudder,¹⁵.

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W. J. M.—11[d]. Felt hot while in bed and got up feeling tired, with skin hot and dry. Feel warm though the weather is cool,[15].

12[d]. Skin hot and dry, with feeling of lassitude,[15].

49[d]. Skin very hot and dry,[6].

51[d]. Skin hot and dry,[6].

Reproving.

O. R. S.—14[d]. Disposed to get near the fire and remain there,[0].

J. G. T.—7[d]. The face feels hot and looks flushed,[0].

R. R.—13[d]. Through the night was at times chilly for a few moments, then hot. The heat was dry and burning, involving the entire frame and lasting three or four times the time of the chilliness. This condition lasted from 11 P.M. till 3 or 4 A.M., and was unaccompanied by either perspiration or thirst,[0].

Nose.

First Proving.

J. G. T.—4[d]. Dull aching at the root of the nose,[0].

5[d]. Right nostril stopped up,[0].

6[d]. The nose stopped up. Must keep the mouth open to breathe through the night. The nose commenced discharging a clear watery substance after rising in the morning. Constant aching pain at the root of the nose. The discharge from the nose is so profuse as to require the almost constant use of the handkerchief,[0].

7[d]. The discharge from the nose very profuse and watery. Severe aching at the root of the nose,[0].

8[d]. Aching at the root of the nose. The discharge whitish and becoming thick,[0].

9[d]. The discharge from the nose tough and yellowish,[0].

R. R.—7[d]. Stopping up of the nose. Watery discharge from the nose,[0].

9[d]. Catarrhal discharge from the nose. P.M. Less discharge from the nose,[0].

10[d]. Thin watery discharge from the nose,[0].

11[d]. The nose stopped up,[0].

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12d. Some discharge from the nose. The nose still stopped up,0.

14d. Loss of smell.

5d. After recommencing the taking of the drug, the nose dry,0.

7d. The nose dry,0.

J. C. K.—4d, 10.30 A.M. Slight catarrhal discharge from the nose,30.

5d, 9.20 A.M. Slight fluent coryza, with sneezing,15.

21d. The nose stopped up this A.M.,0.

36d. Slight fluent coryza,0.

45d, 9.35 A.M. Discharge of a thick yellowish substance from the nose,0.

50d. Both nostrils are inflamed, and indurations have appeared in both,0.

51d, 11.30 A.M. The nostrils are quite tender when touched. 9.30 P.M. The nostrils not so painful,0.

53d, 9.30 P.M. The nostrils are not so painful, but are still indurated and sore,0.

Z. T. M.—26d, P.M. Smarting in the posterior nares,15.

39d. Pain at the root of the nose. Stopped up on the right side and dry,15.

W. J. M.—12d. The right side of the nose stopped or stuffed up, and blowing of a thick yellowish mucus from it,15.

J. H. B.—5d. Frequent paroxysms of sneezing through the day, and fluent coryza in the evening.

O. R. S.—12d. The nostrils dry, and some thickening of the lining membrane,0.

14d. On getting up in the morning the nasal cavities were stopped up, and from the left nostril a watery, non-irritating discharge continuing till 10 A.M., becoming much less after that hour,0.

15d. The nose obstructed almost completely on waking, but during the day it was about the same as yesterday in that respect. At times through the day, sneezing and considerable discharge from the nostrils, quite fluid from the left, and more gluey from the right nostril, with considerable chafing from the frequent use of the handkerchief,0.

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16d. The nose discharging,°.

17d. The nose is discharging, and an odor perceived such as existed on having measles some years since.

18d. Profuse discharge of a watery mucus from the nose,°.

20d. The nose discharging freely a watery substance. The nasal orifices a little chafed, and the nasal cavities very much obstructed in the morning on waking, but free through the day,°.

22d. On waking this morning the nasal cavities were stuffed up, and remained so till 9 A.M., when both nostrils commenced discharging freely,°.

23d. The nose entirely stopped up on waking. The fauces and pharynx dry, and a quantity of tough yellowish mucus occupying the posterior nares and upper part of the pharynx. Through the day a free discharge of yellowish mucus from both nasal cavities. The sense of smell has been defective since the nose began to show symptoms from the taking of the drug,°.

24d. The nose is still discharging about as yesterday,°.

36d. There is at times a watery mucous discharge from both nostrils; most free from the left,°.

Reproving.

J. G. T.—11d. Thickening of the nasal mucous membrane. Can inhale air, but finds it difficult to exhale. Considerable yellowish, rather consistent mucus drawn by inspiration and hawking from the posterior nares,°.

12d. Through the day considerable sneezing, and a free watery discharge from the nostrils, so far not irritating to the parts with which it comes in contact. The discharge from the posterior nares continues about as yesterday,°.

13d. But little discharge anteriorly through the nares, but the usual amount of hawking and clearing of the throat and posterior nares during the early part of the day, and a free watery discharge from the nasal cavities all afternoon and evening,°.

14d. Has been sneezing, and a watery or semimucous discharge rather copious all day (12.30 M.).

15d. Sneezing brought on by an inspiration of cool air on moving about during the morning, accompanied by a free discharge of the same substance as yesterday. The sneezing was renewed every time he went into the cool air or took a fresh inspiration of cool air. The discharge was free till mid-

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day, and since that time it has been gradually diminishing. The nasal cavities feel as if stuffed, but air can be drawn freely through the nose.

17d. The sneezing and discharge from the nostrils has ceased. There has been none of it for two days. Can draw air freely through the nostrils, but there is a feeling in the posterior nares as if obstructed, preventing easy and clear articulation in speaking,°.

25d. No discharge anteriorly from the nose for a number of days past,°.

R. R.—11d. The nasal mucous membrane thickened, and the nasal passages somewhat obstructed. Some indications of exudation from the nasal mucous membrane setting in,°.

12d. Slight discharge of mucus from both nasal cavities,°.

13d. Moderate discharge of a tenacious whitish mucus from the nasal cavities,°.

24d. There is still a little watery discharge from the nostrils,°.

Ears.

First Proving.

J. C. K.—37d, 9.40 P.M. Annoyed by a rushing noise in the right ear, lasting from ten to fifteen minutes, and resembling the escaping of steam from an engine just starting, and synchronous with the pulsation of the temporal artery. Have been troubled with it before, but not lately,°.

Z. T. M.—7d, P.M. Shooting pain over the right ear,30.

Reproving.

J. G. T.—4d. Dull of hearing at all times, but more so today,°.

5d. Hearing about as usual,°.

12d. Hearing about as usual,°.

Mouth.

First Proving.

J. C. K.—22d. The teeth and gums tender. The tongue is coated with a whitish-yellow coating.

37d. Small blister on the right side near the base of the tongue,°.

43d, 9.30 A.M. Sour taste in the mouth,°.

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51[d], 11.30 A.M. The corners of the mouth are indurated and painful, the right worst,[0].

53[d], 9.30 P.M. The corners of the mouth still fissured, the right worst.

Z. T. M.—2[d], 9 A.M. One hour after taking ten drops of the medicine felt a very sensible constriction and burning in the lower part of the larynx, more markedly felt on the right side. Constrictive sensation in the throat below the larynx, all evening. Constrictive burning feeling in the œsophagus,[30].

3[d]. The tongue slightly coated and a pasty taste in the mouth. Hawking up of a grayish, viscid, tenacious mucus, with rough feeling in the throat. Constricted choking feeling still in the throat. An ulcer in the mouth, very sore,[30].

5[d], P.M. Great constriction in the throat. Pyrosis felt below the thyroid cartilage,[30].

7[d], 9 P.M. Some constricted feeling in the throat,[30].

26[d], P.M. Roughness of the throat. A tenacious whitish mucus causes considerable hawking to free the throat,[15].

27[d]. Scraping and raw tickling sensation in the throat,[15].

36[d]. Moderate feeling of constriction in the region of the thyroid cartilage, as if pressed between the thumb and finger,[30].

W. J. M.—7[d]. Ulceration, such as has heretofore occurred at the right commissure of the lips, from a cold, and continuing three or four days,[30].

12[d]. Slight whitish coating on the tongue. The throat rough,[15].

13[d]. The tongue coated a yellowish-white, and a bitter taste in the mouth,[15].

43[d], P.M. Dryness of the larynx; it feels as if inflamed. Great difficulty in detaching the mucus, which is very small in quantity and of a dirty slate-color,[6].

49[d]. The throat is rough and clogged up with much mucus, difficult to dislodge and of a dark slate-color,[6].

50[d]. Feel very weak at times; the mouth gets watery, and I think that I am going to vomit. Bitter taste in the mouth, with belching and sour eructations for two or three hours after eating. Entire absence of thirst,[6].

J. H. B.—3[d]. The tongue feels dry, as if burned. Liquids do not remove the sensation,[30].

O. R. S.—12[d]. Disposition to hawk and draw from the posterior nares and throat a thick semi-solid whitish mucus,

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continuing through the day, but most annoying on lying down to sleep,°.

16d. Hawking a great deal.

17d. Sensation of dryness all day in the fauces and pharynx; the parts look red and glassy. Have been thirsty till 10 A.M. all the past week,°.

18d. Clammy taste in the mouth. A whitish fur on the tongue, most dense near the base and on getting out of bed. Hawking worse in the open air,°.

19d. Thirsty on getting out of bed, the throat dry, and when dry the cough is most troublesome. The tonsils, uvula and soft part of the palate red, thickened, and sore looking, but give no special pain on swallowing,°.

20d. On waking this morning found the throat dry and a lot of stiff tenacious mucus lodged in the upper part of the pharynx, which on trying to dislodge caused gagging,°.

21d. The throat is a purple-red, rough, and pitted in places, and studded with little patches or points filled with mucus.

22d. On waking in the the morning the fauces and pharynx were dry and the uvula swollen, but not feeling sore. He gags when the mucus (which is tenacious and difficult to dislodge from its position posterior to the soft palate) is brought down into the pharynx. During the day the throat has been dry and sore and empty; deglutition painful. The tonsils, fauces and pharynx are a purplish-red so far as can be seen, and œdematous, and in places covered with a tough, whitish, viscid mucus,°.

23d. The throat is painful on empty deglutition all day, but there is no soreness on swallowing food or drink,°.

24d. On waking the throat was much better. Still frequent hawking and clearing of the throat. The œdema about the throat and fauces less.

36d. There is still a disposition to hawk and clear the throat of the same tenacious mucus before noticed. The dryness of throat is now only occasionally felt. The soreness has become much less, but the fauces and uvula are œdematous and redder than natural.

Reproving.

J. G. T.—3d. Very thirsty all day,°.

4d. The thirst continues,°.

5d. Considerable thirst, but not so much as during the previous two days,°.

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6d. Less thirst,0.

15d. Hawking this morning, as for some days past, but less this afternoon,0.

17d. The hawking continues. The mucus hawked up is tougher, a little more yellow, and the hawking a great deal oftener,0.

18d. The hawking and clearing of the throat and posterior nares the same as when last noted. On looking into the throat the tonsils, the uvula, and as far as can be seen of the pharynx are thickened, irregular on the surface, swollen, and a purplish-red, with an abundance of a yellowish or yellowish-gray mucus. There has been no soreness felt on swallowing, but some trouble in modulating the voice. The most of the soft part of the palate is thickened, and presents to a degree the same appearance as the fauces. The color is deepest on the inner edge of the tonsils and uvula, and pales more the farther from that point till lost well up on the arch,0.

20d. The hawking has been very troublesome all day, but worst in the morning. The throat is not so dark and rough in its appearance, but feels about the same to the prover,0.

23d. The posterior nares and pharynx continue in the same condition as last described.

25d. The dry stiff feeling in the fauces and pharynx on waking is still felt, and the hawking and clearing of the throat continues till 10 or 11 o'clock in the morning. A very tenacious, whitish-yellow mucus is brought away by hawking. The pillars of the fauces, the uvula and the surface of the pharynx, so far as can be seen, are still a little thickened and of a pale red color, and some mucus is seen in places adherent to the surface of the pharynx,0.

29d. The throat feels dry and stiff, and the hawking continues. It was formerly troublesome in the morning, but it is now troublesome all day. The fauces and soft part of the palate and the pharynx, so far as can be seen, are of a pale red color, and the vessels are full and the parts just named œdematous. The tongue is rather furry, but of natural color, and the appetite is as good as usual.

R. R.—4d. No unusual taste, appetite good,0.

11d. The throat somewhat red. The color deepest within the fauces, less on the soft palate and entirely lost on the arch. The parts within the pharynx, so far as can be seen, are redder

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than natural, but not complained of as being sore on swallowing,°.

12d. The throat a purplish-red and looks as if raw, but no soreness felt on swallowing. The pharynx is still somewhat dry. Disposition to hawk frequently and clear the throat of a tenacious, starchy-looking mucus,°.

13d. There is still a disposition to hawk and clear the throat. The pharynx and pillars of the fauces are red and their structures thickened and angry-looking, but not sore on swallowing,°.

Tongue.

First Proving.

O. R. S.—10d. The tongue large, moist and fissured,°.
12d. The tongue flabby and fissured,°.
14d. The tongue large, soft and deeply fissured,°.
43d. The tongue furred, whitish, more on the back part,°.

Z. T. M.—2d, A.M. The tongue slightly coated grayish-white,30.
39d. The tongue slightly coated white, with a rough feeling,15.
40d. Insipid taste and the tongue coated with a grayish-white mucus,15.

Reproving.

O. R. S.—4d. A light whitish fur on the tongue,°.
8d. The tongue a deep red, considerably corrugated and somewhat furred. Had considerable thirst last night,°.
9d. The tongue not so red, still somewhat corrugated, and the papillæ standing up plainly on the posterior part,°.
11d. On waking, the tongue was moderately furred, but no very unpleasant taste in the mouth,°.
14d. On waking, the tongue was somewhat furred back and the papillæ on the posterior part prominent and large and the anterior part fissured. Great thirst, the water tasting natural and refreshing,°.
19d. The tongue cracked, red and uneven, and slightly furred,°.

J. G. T.—4d. The tongue is coated with a thin yellowish-white fur,°.
5d. The tongue about as yesterday,°.

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8d. The tongue nearly natural in color and but slightly furred,0.

10d. The tongue is slightly coated, but of rather natural color,0.

12d. The tongue rather cleaner,0.

13d. The tongue about as yesterday,0.

14d. The tongue is rather whitish and downy, with a slightly metallic taste after taking a drink of water,0.

15d. The tongue slightly furred, as it has been for several days,0.

16d. The tongue is still slightly furred,0.

18d. Moderately heavy whitish coat uniformly spread over the tongue on getting up this morning,0.

R. R.—2d. The tongue clean,0.

4d. Thin, whitish fur over the middle of the tongue from tip to base, leaving a small, well-defined space on each side clear and of natural color,0.

7d. The tongue a little corrugated and the posterior part of it covered with a whitish-yellow coating, becoming lighter the nearer the tip,0.

8d. The tongue slightly furred, supposed to be influenced to some extent by the use of tobacco,0.

13d. Thin whitish coating over the greater part of the surface of the tongue, the edges and tip being free,0.

Eyes.

First Proving.

J. G. T.—2d. The conjunctiva congested on waking in the morning. The eyes feel sore on pressure,0.

3d. The conjunctiva of a uniform redness. Soreness and aching of the eyes on moving them. They are much congested,0.

4d. The eyes congested,0.

5d. Congested conjunctiva,0.

6d. The eyes very much congested.

7d. The eyes congested. Looking at anything causes them to ache,0.

R. R.—3d. The eyes feel swollen in the morning. The conjunctival vessels congested,0.

4d. The eyes and orbital region much swollen and agglu-

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tinated on waking in the morning, and sensitive to light. The conjunctiva slightly congested,°.

5ᵈ. The eyes much congested and the whole orbital region very much swollen,°.

8ᵈ. The eyes have the same appearance as before noted.

9ᵈ. The eyes congested and swollen. Not so much congested in the evening,°.

10ᵈ. The eyes but slightly congested,°.

O. R. S.—8ᵈ. The eyes feel swollen,°.

11ᵈ. The eyes swollen (orbital region),°.

12ᵈ. The eyes swollen,°.

14ᵈ. The eyes still much swollen,°.

5ᵈ. After recommencing the taking of the drug, the eyes swollen and the conjunctiva congested. The external part of the left eye more congested than the right. The eyeballs sore when closing the lids and when pressing the ball. The conjunctiva of the right eye also congested,°.

6ᵈ. The eyes swollen. The left one much congested, red and sore; continual scratching beneath the lids on rolling the ball. The light aggravates the soreness,°.

7ᵈ. The eyes inflamed and swollen. The left worse than the right,°.

11ᵈ. The eyes painfully affected, swollen, red and watery. The left worse than the right,°. Continual scratching in the left eye, as if sand was under the outer part of the upper lid,°.

J. C. K.—3ᵈ. Inner canthi sore and red. Objects lose all distinctness and become blurred. 11.55 A.M., dimness of vision on rising from a seat,³⁰.

21ᵈ. The eyes feel tired and painful, especially in the sunlight. The vessels of the conjunctiva somewhat congested, especially on rising this morning. (There are no vessels visible usually in my eyes.),°.

22ᵈ. The eyes swollen and painful, sensitive to light and the conjunctiva congested,°.

23ᵈ. The eyes sore. Cannot read or write without pain in them,°.

25ᵈ. The eyes have felt tired all day, and painful when reading or writing. The vessels of the conjunctiva congested,°.

38ᵈ. On rising the eyes feel sore and the vessels of the con-

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junctiva slightly congested. On going into the open air tears flowed freely, but this gradually wore off,°.

42d, 9.30 A.M. The eyes feel full and sore and slightly congested,°.

43d, 9.30 A.M. The eyes are swollen and painful, and the conjunctiva congested. Worse immediately after rising. 8.50 P.M. The eyes feel better,°.

45d, 7.05 P.M. The eyes have been sore all day, especially when reading. They have been swollen and congested,°.

46d, 9.35 A.M. The eyes slightly swollen and congested. Feel sore and water profusely when reading,°.

48d, 12.10 P.M. The eyes feel worse than usual. Have a good deal of photophobia. The eyeballs feel sore and tender. The eyes are quite painful. Pressure on the ball does not produce pain direct, but when the pressure is removed the pain becomes severe. The conjunctiva but slightly congested and the orbital region but moderately swollen. The want of sleep last night has possibly made the eyes feel worse. 8.10 P.M. The eyes somewhat painful when reading or writing,°.

49d, 8.55 A.M. The eyes are unusually painful and sore and greatly congested. Tears are secreted freely. Cannot read or write with any comfort. They are better by ten o'clock. They are worse just after rising, but improve during the day,°.

50d. The eyes are painful for about two hours after rising, and at times through the day when reading and writing, or when exposed to bright sunlight,°.

51d. The eyes are a little sore this morning, and the conjunctiva is slightly congested and jaundiced,°.

Z. T. M.—2d, A.M. Heaviness of the eyes, especially the right. The lids agglutinated. The pupils somewhat distended. The eyelids burn and feel as if swollen, particularly of the right eye and outer canthus worst. The lower lid of the right eye feels swollen and itchy, as if a sty would make its appearance. The inner canthus itches and feels pasty. Burning of the eyelids,[30].

3d. The eyes feel inflamed and swollen, with an accumulation of pasty matter in the canthus and on the lashes,[30].

27d. Stiffness of the eyeballs and lids,[15].

38d. Woke with the eyes somewhat swollen and agglutinated. The eyeballs seem large when closing the lids over them,[15].

39d. The eyes heavy and the balls sore and smarting. The

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supraorbital region very much swollen and the pupils a little dilated,[15].

40[d]. The orbital region much swollen and the eyes very watery for some time after waking in the morning,[15].

41[d], 8 A.M. The eyes puffy, dim, and flickering before them when closed,[15].

W. J. M.—40[d]. After two hours reading an aching pain deep in the eyeballs, which was aggravated by opening the eyes widely, and relieved by closing and resting them for a time.

41[d]. Dull aching pain in the eyes aggravated by sunlight,[6].

48[d]. The eyes very painful to pressure, and the pain aggravated by light.

50[d]. The eyes feel very painful, look swollen and bunged up.

M. J. C.—15[d]. The eyes feel as if smoke were in the room. The edges of the eyelids itch and burn.

J. C. B.—4[d]. The eyes burn and lachrymate slightly. The vessels of the conjunctiva injected and vision indistinct. Frequent wiping of the eyes for relief,[30].

5[d]. The eyes still injected,[30].

6[d]. The eye symptoms less in degree.

11[d]. The eyes painful in the morning and the vessels injected, and concentrated effort necessary for distinct vision,[3].

12[d]. Vision poor for long distances.

15[d]. The vision remained poor for a considerable time, and was the most lasting symptom,[3].

O. R. S.—4[d]. Slight œdema of the orbital region, more marked in the right than the left. The sclerotica slightly congested,[0].

7[d]. The eyes are sticky and sore. Has not taken the drug for two days,[0].

8[d]. The eyes red, irritable, and the orbital region somewhat swollen,[0].

9[d]. The eyes feel as if he had lost his sleep. The conjunctival vessels moderately congested,[0].

12[d]. The eyes feel puffy. The palpebral lining membrane thickened and quite red, and as the eyes are rolled from side to side or up and down, the lining membrane gathers in rolls between the balls and lids, the left eye appearing the worst,[0].

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14ᵈ. The eyes more puffy and congested, and the balls sore to touch or if pressed upon. At 1 P.M. noticed the pupil of the left eye to be much larger than that of the other (from two to three diameters), there seeming to be but little difference between the eyes in the prover to discern objects, but on noticing closely an object looked at has a misty appearance to both eyes. The distension of the pupil passed off while walking, and did not return for the day,°.

15ᵈ. The orbital region is not so much swollen as yesterday, and the eyes were slightly agglutinated on waking,°.

16ᵈ. Dull aching across the orbits,°.

17ᵈ. At 5 P.M. noticed that the pupil of the left eye was very much enlarged, which to some extent is the case now (11.30 P.M.),°.

18ᵈ. The eyes feel sticky, and a little gum is seen in the external canthus. The orbital region is somewhat swollen, and the vessels of the conjunctiva are turgid,°.

19ᵈ. The eyes feel rather sorer and the light pains them. Some dilatation of the pupil of the left eye,°.

20ᵈ. The vessels on the inner surface of the lid quite full, and the vessels of the globe less turgid. The soreness nearly gone,°.

22ᵈ. The eyes slightly congested, but not swollen or sore,°.

24ᵈ. The eyes a little red, but not swollen, and the sight much clearer.

36ᵈ. The eyes a little red and watery, but feel almost well. Reading by lamp or gaslight cannot be endured, however, for any considerable time without giving discomfort.

Reproving.

J. G. T.—4ᵈ. The eyes are a little irritable, and the vessels of the conjunctiva are fuller than usual, and the white portion of the eye has a perceptibly yellowish tinge. Slight œdema of the orbital region, worse on the right side,°.

5ᵈ. The eyes feel sorer, the vessels are fuller, and they burn as if they had been all day irritated by wood smoke,°.

6ᵈ. The eyes smart as if they had been smoked. Some œdema of the orbital region,°.

7ᵈ. Œdema of the infraorbital region. The conjunctival vessels congested. The eyes smart and there is moderate lachrymation on going into the open air. It is difficult keeping the eyelids from closing,°.

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8d. The eyes feel heavy and the aching through the brow and orbits continues. The eyeballs feel sore on moving or rolling them, and the smarting of the eyes continues,0.

9d. Took but one dose of the medicine to-day. The eyes present the same condition and appearance as yesterday, only that the aching in the supraorbital region is rather worse and extends farther up the forehead, and is most intense immediately above the orbits. The eyelids are disposed to close down, and there is an inability to open the eyes as wide as usual. The eye symptoms are worse in the open air,0.

10d. The eyes feel about the same. The palpebral vessels are more congested, and the conjunctiva on the inner surface of the lids and on the balls is disposed to gather into folds as the eyes are rolled back and forth,0.

12d. The eyes smart and are red and look quite sore, and lachrymate on going into the open air,0.

13d. The eyes are looking better. The vessels are not so full and the sclerotica not so œdematous,0.

14d. The orbital region very much swollen on waking, and the eyes red, with a yellowish tinge of the white portion. They smart and feel disagreeable when exposed to the open air, and on looking long at an object the sight becomes dim and the eyes ache for a time and require resting,0.

15d. The orbital region swollen on waking in the morning, and the eyes feel weak and lachrymate on looking steadily at an object. The vessels of the ball and inner side of the lids are full, causing a feeling on moving the ball as of something granular between them,0.

16d. The orbital region swollen, and the vessels of the conjunctiva congested,0.

17d. The condition of the eyes the same as yesterday,0.

18d. The orbital region swollen on waking, but the swelling passed off in about an hour after rising from the bed, leaving a slightly puffy appearance,0.

20d. The eyes smart and lachrymate very much in the open air, and are congested. The inner surface of the lower lid is distinctly granular in appearance.

21d. The condition of the eyes the same as before stated.

23d. The eyes sore and swollen in the morning on waking, the swelling passing off in an hour or so after rising.

24d. Severe pain in the supraorbital region and temples on waking. Severe till 4 or 5 P.M., then passing into the orbit posterior to and in the ball of the eye, with considerable photo-

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phobia. The pain much severer in the orbits than any other place, compelling him to lie down. Never had this kind of pain before, except when taking this drug on a former occasion. The whole orbital region very much swollen, and the vessels of the ball and lids both largely congested. The severe pain began to diminish about 7 P.M., and by bedtime had almost passed away, leaving a dull supraorbital pain,°.

25d. The eyeballs remain sore on pressure all day, and also on looking steadily at an object they ache,°.

29d. The eyes are sore, and smart and lachrymate on going into the open air, and the orbital region is some swollen in the mornings. The vessels of the ball and lids perceptibly congested, and the sight very much weakened from the condition of health,°.

R. R.—7d. Slight swelling of the orbital region and moderate congestion of the vessels of the white portion of the eyes, but no disagreeable sensation in the eyes.

8d. The eyelids swollen, more noticeable in the lower lids. Slight photophobia. Lachrymation in the open air, worse in the morning.

10d. The orbital region swollen and the eyes congested, especially so in the morning. The open air affects them and causes slight lachrymation,°.

11d. On waking this morning the whole orbital region swollen and the vessels of the eyes congested. The orbital swelling passed off gradually through the day,°.

12d. A little whitish gum was seen in the external canthus this morning. The eyes felt disagreeable and were caused to lachrymate on going into the open air,°.

13d. The symptoms of the eyes the same as yesterday,°.

24d. The eyes are slightly gummed in the mornings, and there is a feeling as of thickening of the structures within the lids, the right eye feeling the worst. They smart and feel badly on reading for a time; the vessels are still somewhat congested.

Face.

First Proving.

J. G. T.—3d. The face flushed and hot,°.

5d. The face feels puffed up and hot. Heavy aching pain in the ethmoid bone,°.

7d. The malar bones feel large, as if swollen. The muscles of mastication feel stiff and motion of the jaw is painful,°.

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R. R.—3^{d}. A fine red rash on the face and neck, most on the right side,^{0}.

4^{d}. The face feels hot, with a dull feeling in the forehead,^{0}.

9^{d}. The face not so much congested.

O. R. S.—8^{d}. The face a little flushed. Took none of the drug for twenty days, and on the seventh day after recommencing it the face is again flushed,^{0}.

J. C. K.—23^{d}. The face and neck are covered with a fine miliary eruption, with here and there a pustule or large reddish pimple,^{0}.

Z. T. M.—2^{d}, A.M. An ulcerating sore existing for several days before taking the drug near the right mental foramen is quite painful,^{30}.

J. S. C.—9^{d}. Pain over the right eye,^{30}.

Reproving.

J. G. T.—4^{d}. Some reddish irregularly shaped spots over the nose are becoming irritable and tender. This appearance of the nose had not passed away from the time of the taking of the drug before, twenty-two days since.

5^{d}. The right side of the nose and over the bridge a little red. The large pimple on the side of the nose not so sore and a little indurated,^{0}.

7^{d}. A bright red rash, blotchy and irregular in shape, without any prominence, appeared about 10 A.M. over the forehead, and in an hour extended over the balance of the face,^{0}.

R. R.—12^{d}. On waking this A.M. the entire face swollen. The orbital region more swollen than any other part of the face,^{0}.

24^{d}. The bloating of the face seen while taking the drug, is gone,^{0}.

Abdomen.

First Proving.

J. G. T.—3^{d}. Through the morning had occasional pains through the umbilical region, with frequent passages of flatulence,^{0}.

4^{d}. Occasional pains through the bowels, with discharges of flatulence,^{0}.

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7d. Occasional pains through the abdomen,0.

R. R.—3d. Dull pain in the umbilical and hypogastric regions, with frequent discharges of flatulence,0.

8d. Dull pains in the hypogastric and umbilical regions, with discharges of much flatus,0.

O. R. S.—8d. Pains in the abdomen, with urging to stool,0.

12d. Pains through the bowels,0.

14d. The pain in the abdomen seems to be caused by gas, as much of it is passed at stool. Was waked at 3 A.M. by sharp cutting pains in the abdomen, relieved by passing off flatus,0.

15d. Slight pains in the abdomen; made him sick. Nausea, pain, and urging to stool,0.

3d. After commencing to take the drug again in large doses slight pain in the bowels,0.

J. C. K.—2d. Uncomfortable feeling in the abdomen,30.

3d. The abdomen painful and swollen; the passage of gas afforded some relief, but straining, pressure or walking produced sharp pain,30.

4d, 12.05 M. Severe pain under the ensiform cartilage. 4.40 P.M. Dull pain and overdistension in the umbilical and hypogastric regions,30.

5d, 11.20 A.M. Painful feeling of distension of the abdomen from gas, which passed off,30.

11d, 5.10 P.M. Severe pain in the bowels, which are very much distended. Relieved by small stool and the passing of a large quantity of gas and some urine.

22d. Some rumbling and pain in the abdomen,0.

40d, 11.55 A.M. Pain in the hypogastric and umbilical regions from overdistension, produced by great accumulation of gas, a quantity of which was discharged an hour since,0.

42d, 9 P.M. Some pain in the umbilical region from distension with gas,0.

45d, 11.45 P.M. Have a gnawing pain in the lower part of the rectum, as if worms were boring in it.

Z. T. M.—2d, A.M. Rumbling in the bowels, as if diarrhœa would come on; occasional pain in the hypogastric region,30.

3d. Slight colicky pain in the abdomen,30.

39d, P.M. Pain in the lower part of the abdomen, as if from a colic coming on. Shooting pain from the short ribs down across the left hypochondriac region,15.

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40d. Sharp shooting pain in the left hypochondriac region just before stool. The stool is natural, but twice in the day, which is unusual,15.

W. J. M.—2d, P.M. Slight colic and burning in the abdomen, relieved by a loose stool,30.

7d, 10 A.M. Pinching burning pains in the abdomen,30.

12d. Feel sore about the back and abdomen; dull pain in the bowels,15.

13d. A little soreness and some pinching in the abdomen,15.

40d, 4 P.M. Dull pain in the bowels, relieved by a stool of a diarrhœic character,6.

41d. A dull pain this A.M. in the umbilical region, which disappeared after a free discharge of gas,6.

51d. Occasional griping pains in the abdomen,6.

J. S. C.—4d, 10.30 P.M. Some cramplike pains in the abdomen,30.

5d. Was wakened at 6 A.M. by pain in the abdomen, followed by a copious lumpy stool, which came suddenly,30.

26d. Dull pain across the upper part of the abdomen in the region of the transverse colon, caused by flatus,30.

M. J. C.—2d, 1.30 A.M. Wakened with cutting pain in the hypogastric region, soon followed by a large stool,30.

3d. Occasional stitches in the spleen,30.

Reproving.

O. R. S.—11d. Crampy pains of short duration through the small intestines several times through the day. Moderate pain through the bowels previous to each stool and entirely relieved by the evacuation,0.

12d. Tender, on pressure, in the epigastrium and through the abdomen,0.

19d. Feeling of repletion. The bowels feel full and compel the opening of the pants and drawers for relief. Had a fine shooting pain from the left groin up across the navel to the cartilages of the ribs on the right side, lasting about a half minute and occurring but once. Slight pain through the abdomen, passing off by the escape of flatus,0.

20d. Slight fulness in the abdomen and a little tenderness in the epigastrium. Pressure suddenly made over the abdomen has for some time past caused pain to start through the abdomen and continue till gas is passed off from the bowels,0.

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22d. Deep pressure still starts some pain through the abdomen. Slight tenderness on pressure in the epigastric region,0.

24d. Slight tenderness still, on deep pressure, in the epigastric and umbilical regions. Pressure over the abdomen still starts the gas, but not the rumbling or pain noticed some time before,0.

J. G. T.—8d. Tenderness in the entire epigastric region most marked immediately below the ensiform,0.

9d. Tenderness in the epigastric region the same as yesterday. Borborygmus in the left side of the abdomen, between the cartilages of the ribs and the anterior part of the crest of the ilium, felt frequently and accompanied by sharp pain,0.

12d. Tender, on pressure, in the epigastric region for some days past,0.

18d. Considerable pain through the abdomen during most of the morning, accompanied by relaxation of the bowels. The returns of pain in the abdomen farther apart and less severe each time till 1 P.M.,0.

25d. Quite tender, on pressure, in the epigastric region in the morning; less so this P.M., but still distinctly felt on pressing the part,0.

R. R.—4d. Quite a tender feeling in the epigastric region felt all the time, but worse on pressing over the part,0.

6d. Feel quite well, but soreness on pressing over the epigastrium, extending to the upper part of the ensiform,0.

7d. Tender to the touch in the epigastric region,0.

8d. Tender to the touch in the epigastric region,0.

11d. Moderately tender in the epigastric region on pressure,0.

13d. Dull shifting pains through the abdomen felt at times through the day, commencing on getting out of bed in the morning,0.

Stomach.

First Proving.

J. G. T.—2d, 5 P.M. Feeling of nausea; vomited a large quantity of sour water. As long as he laid quiet he felt better. The odor of food was pleasant to him, but on attempting to eat, the first bite caused vomiting of very sour fluid,0.

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R. R.—Appetite and digestion good; no unusual thirst,°.
9d. Could eat but little breakfast,°.
14d. Since the medicine was left off some days since, the appetite is not so good and some tenderness is felt in the epigastric region,°.

O. R. S.—12d. The appetite is poor,°.
15d. Empty retching; felt very sick; could eat no breakfast; had some appetite for supper,°.
7d. After recommencing the taking of the drug, feel badly. Have a qualmish, sickish feeling all the time. The appetite is good, however,°.

J. C. K.—2d. Tight feeling in the stomach,30.
9d, 9.45 A.M. Uncomfortable feeling of fulness and pain in the stomach,15.
21d. Can feel the stomach; the appetite is decreasing; qualmishness, alternating with pain, in the stomach and bowels,°.
22d. The stomach feels qualmish, am thirsty, and have a poor appetite. Felt sick after eating dinner as after eating breakfast, with qualmishness of stomach. Went and took a glass of water from a soda fountain without the syrup and was relieved immediately,°.
23d. Ate nothing for breakfast except a few peaches, and the stomach causes no inconvenience,°.
26d. Ate no breakfast, and at 11.30 A.M. had a darting, sticking pain in the great cul-de-sac, lasting till dinner (12.30 M.),°.
41d. Appetite very good,°.
42d, 1.40 P.M. Sick at the stomach without nausea. 9.45 P.M. the sickness of stomach continues. The nausea is not sufficient to cause vomiting.
43d, 8.50 P.M. Thirsty all day. Wanted water often, but little at a time. The stomach feels better,°.
45d, 7.05 P.M. Am losing my appetite; have eaten but little for four days past. Have eaten less each day. Can feel my stomach all the time, especially after eating. It is a sickening feeling, but is not nausea. I have not the usual relish for tobacco,°.
46d, 9.35 A.M. The stomach gives me an immense amount of unpleasantness. I feel it all the time. I am very thirsty; have a bitter taste in the mouth, and a slightly yellowish coating on the tongue; am very thirsty, and somewhat hungry, but feel worse after eating or drinking,°.

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47d. Felt perfectly well till after I ate my breakfast, when the pain in my stomach returned as before. After eating dinner I felt quite sick at stomach as before; took a glass of soda water without the syrup, and was relieved immediately. (The water contains carbonic acid, generated by adding sulphuric acid to bicarbonate of soda.) 8.05 P.M. The stomach symptoms have not returned since drinking the soda water,0.

53d. The appetite has improved rapidly the past few days, with a tendency to eat more than is proper,0.

58d. During the last few days my appetite has increased wonderfully. Eat too much almost every day; cannot help it. I still seem to digest all that is eaten,0.

Z. T. M.—26d. Appetite good,15.

39d. Suppered principally on fruit. During the night some nausea, followed by chills on the back,15.

40d. No appetite for anything but juicy food or fruits,15.

41d, 8 A.M. Slight nausea at the stomach all the time,15.

W. J. M.—2d. Nausea, almost resulting in emesis, after taking a drink of cold water,30.

11d. The epigastric region sore on pressure,15.

12d. The appetite greatly increased and digestion good,15.

13d. No appetite for breakfast, but ate some, which became acid in the stomach, producing very disagreeable eructations. I am not subject to turns of acidity of stomach. Do not recollect of ever having such a turn before,15.

41d. Hungry at 11 A.M.,6.

49d. Went to bed again sick at the stomach. Have no desire for food,6.

50d. Entire loss of appetite; thirst; became very sick, and felt like vomiting, but did not. The nausea passed off with a flash of heat and a feeling of moisture on the skin, which before was very dry. Have eaten nothing for sixteen hours. At noon had no appetite, but took some food and a cup of coffee, which seemed to relieve my head for a time. Had a desire for pickles at supper, which I rarely eat. It gave me a relish for bread and butter, of which I ate freely, and by 8 P.M. felt much better,6.

51d. Ate a moderate dinner, which seemed to lay heavily on the stomach,6.

M. J. C.—2d, 1.30 A.M. Cramp in the stomach and chest. Nausea, but no vomiting,30.

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6d, 7.30 A.M. Slight cramp in the stomach and nausea all the forenoon,30.

7d, 9 A.M. Nausea soon after taking the medicine, lasting all day; would like to vomit, but cannot,12.

J. H. B.—12d. The stomach is sour, the food does not digest,3.

15d. The digestive powers remain weakened,3.

Reproving.

O. R. S.—11d. The appetite is not good; could eat, but had no relish for the food,0.

12d. Had an appetite for breakfast.

14d. No appetite for either breakfast or dinner, but ate some supper. Had a sickish feeling, aggravated by eating ever so little, causing him almost to vomit; a tasteless fluid rising in the mouth as before vomiting. The feeling was removed by rising from a recumbent posture, or by getting up from a seat,0.

15d. No appetite. Tender in the epigastrium on pressure. The same sickish feeling as yesterday; no appetite for breakfast or dinner, but felt hungry for supper,0.

20d. The appetite is good,0.

24d. The appetite is good, but a feeling of fulness in the stomach and bowels after moderate eating,0.

36d. The appetite is good.

J. G. T.—3d. About ten minutes after taking the medicine a feeling of distress, commencing in the epigastrium, and in a few minutes extending through the entire abdomen. The pain was not severe enough to prevent sleep, but was felt on stirring about the room,0.

11d. A feeling in the epigastric region as if some irritating or burning substance had been taken into the stomach,0.

12d. The appetite as usual,0.

15d. The appetite about as usual,0.

16d. The appetite as good as usual,0.

29d. The appetite as good as usual, but he has lost five pounds in weight (his usual weight is one hundred and thirty-eight pounds),0.

R. R.—The appetite has increased,0.

7d. The appetite is good,0.

8d. The appetite is good,0,

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24d. The appetite is not nearly so good as when taking the drug,0.

28d. The stomach is disposed to ache every time cold water is taken,0.

Stool.

First Proving.

R. R.—All bowel symptoms worse during the day. Frequent stools of a muco-purulent character, with much flatulence and tenesmus during the stool. The stools are preceded by dull pain in the umbilical region,0.

O. R. S.—3d. Slight pain through the bowels, with some urging to stool. Have had three soft, dark-colored stools, followed by slight burning at the anus,0.

8d. Had three thin, dark-colored stools. The burning at the anus more marked than before. The passages are preceded by pain, with relief after,0.

9d. The same symptoms as yesterday,0.

12d. The stools are lumpy,0.

13d. One stool, almost black,0.

14d. Pain and irresistible desire for stool, the discharge being large and soft; afterward one small, thin, dark, and slimy stool,0.

15d. Stool dark, large, and lumpy. One hour afterward felt weak and nervous, the hands trembled, then a scanty stool, with burning after it,0.

7d. After recommencing the taking of the drug little or no pain in the bowels, some flatulence, but the discharges regular and natural,0.

J. C. K.—2d, 2.15 P.M. Small, firm stool and much gas. 3.30 P.M. Small, firm stool,30.

3d, 12.20 M. Large, firm stool, and a large amount of gas, with much relief to the abdomen. 9.40 P.M. Small, firm stool,30.

4d, 5.10 P.M. Small, firm stool,30.

9d, 10.50 A.M. Small stool and much gas, relieving the pain and feeling in the abdomen. 11.55 P.M. Small, firm stool,15.

22d. Desire to evacuate the bowels, with inability to do so by straining.

Z. T. M.—2d. Colicky pains preceding natural stool. The

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pain relieved by passing off flatus. Tearing pain at the anus on passing fæces,[30].

5[d]. An excoriated condition of the anus, very painful at stool,[30].

36[d]. The bowels moved twice per day, the discharges being natural (once per day being the usual habit).

40[d], 11 A.M. Copious papescent stool,[15].

W. J. M.—7[d], 10 A.M., Desire for stool, which is unusual with me, as I always evacuate the bowels before retiring for the night. The stool is of a laxative character, with some griping and burning at the anus, but without flatulence. The bowels were relieved by the evacuation,[30].

11[d]. Discharge of an unusual amount of offensive flatus,[15].

14[d]. The stools have been mush-like, and readily voided,[15].

40[d], 10.30 P.M. Had a painless diarrhœic discharge from the bowels,[6].

49[d], 10.20 A.M. A diarrhœic stool, with considerable tenesmus; the stool very thin and expelled with force. The evacuation relieved a pain felt in the bowels,[6].

50[d], 4 P.M. A diarrhœic stool, with a great deal of flatus and slight tenesmus,[6].

J. S. C.—5[d], 6 A.M. Was awakened by pain in the abdomen, and soon after had a copious lumpy stool, which came on so suddenly as to hurry me out of bed. At 8, and also at 11 A.M., had loose lumpy stools, with some wind,[30].

M. J. C.—2[d], 1.30 A.M. Large stool, preceded by cutting pain in the hypogastric region. In about ten minutes another stool, also preceded by cutting pain. 8 A.M. A yellowish watery stool. Was disposed to be constipated when I began to take the medicine. That condition has been corrected,[30].

J. H. B.—9[d]. Slight burning in the region of the anus, with constant feeling of a necessity to go to stool without passing anything, the feeling lasting all the evening,[30].

10[d]. No stool yesterday, but a soft stool this A.M., followed with slight burning at the anus,[30].

11[d]. The symptoms the same, but less in degree,[30].

O. R. S.—4[d]. One light, painless stool, at 7.30 A.M.,[0].

9[d], 8 A.M. Loose motion from the bowels,[0].

10[d]. Two discharges from the bowels. The first part of

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each natural, the latter part laxative and pungent. Had a disposition to go to stool at two other times, which passed away when flatus was allowed to escape from the bowels. The escape of gas has nearly always been preceded by more or less pain through the small intestines,°.

11d. The bowels moved at 7.30 P.M., and again at 6 P.M. The first part of the morning stool was consistent, but the latter part quite soft. The evening stool was thin and lumpy,°.

12d, 6 A.M. Had a large liquid stool, preceded by pain, and a little pungent,°.

14d. The bowels moved once, with slight pain through the abdomen previous to the discharge. The stool was small, pasty and light brown, with a slight burning in the bowel after stool. Had occasion frequently to go to stool, when the passing off of gas or urine relieved the sensation, and no stool came,°.

15d. The bowels moved at 8 A.M., the stool pasty, dark, and small. Stool again at 10 A.M. of the same character, but small also,°.

16d. The bowels moved once. The stool soft, pasty, and dark,°.

17d. After breakfast the bowels were moved once. The stool was of moderate size, yellowish, and sticky,°.

19d. The bowels were moved once, and the stool the same as yesterday,°.

21d. The bowels moved at 9 A.M. The stool scant, and the same in appearance as the day before yesterday,°.

22d. The bowels were moved this A.M. The stool was almost natural,°.

23d. One natural stool,°.

24d. The bowels were naturally moved this morning,°.

36d. The bowels regular,°.

Reproving.

J. G. T.—5d. No movement of the bowels since yesterday morning (now 8.45 P.M.),°.

6d. No stool and no gas passed off,°.

7d, 10 A.M. Stool perfectly natural,°.

8d. The bowels were not moved,°.

9d. The bowels were moved twice. The stools were natural,°.

11d. The bowels rather looser than usual. Two stools between 6 and 8.30 this A.M.,°.

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12d. The bowels were not moved in the past twenty-four hours,0.

13d. The bowels were not moved,0.

15d. The bowels moved once, the discharge being natural in color and consistence,0.

16d. The bowels not moved,0.

17d. One small discharge from the bowels of natural color and consistence,0.

18d. The bowels moved three times between 5.30 and 7.30 A.M., the discharges moderately dark and accompanied with considerable flatulence,0.

19d. No pain in the bowels to-day, nor have they been moved,0.

21d. The bowels not moved,0.

22d. The bowels were moved three times before 9 A.M. The stools were small and laxative, but of natural color,0.

24d. The bowels were not moved,0.

25d. The bowels not moved,0.

29d. The bowels are moved about every alternate day. The motions are small but of natural color and consistence,0.

R. R.—4d. Has had one natural stool to-day,0.

7d. One natural motion of the bowels,0.

8d. The bowels are right,0.

10d. Natural stool in the morning at the usual time,0.

13d. One copious, brownish, painless, laxative stool at 9 A.M., accompanied with a great deal of flatulence,0.

24d. The bowels are regular,0.

Genito-urinary Organs.

First Proving.

R. R.—6d, P.M. More disposed to urinate than was his habit,0.

J. C. K.—2d. The urine a light yellow, cloudy, and a precipitate seen after standing two hours; reaction acid; sp. gr. 10.29. Heat precipitates a dense white granular substance which dissolves when mixed with or when nitric acid is used, leaving the urine clear and of a reddish-brown color. A few epithelial scales, a cast, some fat-globules and some phosphates seen under the microscope. 9.40 P.M. The urine opaque, but of natural and strong odor, acid reaction and sp. gr. 10.30. No albumen, but large quantity of phosphates,30.

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4d, 5.10 P.M. The urine a dark straw color, of mild odor, reaction acid, sp. gr. 10.30, phosphates in abundance,30.

21d, 7.50 P.M. The urine has an acid reaction and sp. gr. 10.29; deposits of phosphates on standing,15.

22d. Have a dull dragging pain in the perinæum and lower part of scrotum.

40d. Have been urinating much more freely and copiously since taking the remedy,0.

41d. Am not urinating more than the natural quantity to-day.

Z. T. M.—2d. Compelled to get up to urinate; the quantity in excess of what is usual, but of natural color,30.

3d. Roused from sleep with an urgent desire to urinate. Pain in the region of the right kidney, worse on walking,30.

26d. The urine is of a little darker color than usual,15.

36d. The urine is a little darker than usual and passed in greater quantities and with urgent desire to pass it,15.

39d. Burning when the urine begins to flow,15.

W. J. M.—10d. Had an emission during sleep last night,30.

12d. Feeling sore in the region of the bladder, relieved by urinating,30.

13d. Got up at 6.30 A.M. and passed more than the ordinary quantity of urine, but was cool last night,30.

J. S. C.—8d. Had to rise twice through the night to urinate, passing a large quantity of pale urine,30.

M. J. C.—13d. Dull aching in the region of the kidneys, with profuse flow of natural-colored urine and of natural reaction,12.

O. R. S.—4d. The urine to all appearance natural in quality and quantity,0.

12d. Slight tenderness in the renal region; urinated but twice in the past twenty-four hours,0.

Reproving.

J. G. T.—4d. Frequent copious discharges of clear watery-looking urine without any disagreeable feeling,0.

5d. Less urine passed, but still more than a normal quantity, and still clear,0.

6d. Urine normal in quantity and appearance,0.

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15d. The urine clear as water and in natural quantity,0.

18d, 2 P.M. A dull cutting pain, lasting about five minutes at a time, and coming about once in each half hour, was felt along and about the length of Poupart's ligament, occurring on both sides at the same time. After the subsidence of each pain, a sickening sensation in the left testicle as if caused by a blow, and lasting about ten minutes. During the time this sensation lasted the testicle was extremely sensitive to the touch even of the clothing, but this sensitiveness passed away each time the pain subsided (had the same symptoms on taking the drug the first time).

19d. Was wakened three times by the pain above described during the night. It did not come so often as during the day, but was just as severe and lasted as long. This pain has continued at intervals of about an hour, and of the same degree of severity as yesterday, till 4 o'clock this P.M.,0.

20d. The urine is natural as far as can be observed,0.

21d. Pain as before described along Poupart's ligament, but less severe. The pain felt in the left testicle but once, and not severe,0.

24d. The urinary secretion is as usual in health,0.

R. R.—13d. Has had quite an increased flow of urine through the day. Feels no oppression of the chest since the urinary secretion has become free,0.

24d. The urine is natural.

Chest.

First Proving.

J. G. T.—3d. Feeling of fulness and oppression in the chest,0.

4d. The lungs feel oppressed as if by a heavy weight,0.

5d. Heavy oppressed feeling in the chest, requiring an effort to draw a long full breath,0.

6d. Feeling of oppression in the chest, with slight dry cough,0.

7d. The lungs feel as if filled with smoke. Dry cough,0.

8d. Feeling of oppression upon the chest; the cough is looser, but there is no expectoration,0.

9d. The cough is loose, and there is no expectoration; feeling of oppression in the chest,0.

R. R.—8d. Dry cough, with a feeling of tightness and oppression in the middle and upper third of the chest,0.

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9d. The dry cough as above continues. P.M. Dry cough and a feeling of oppression in the centre of the chest,0.

10d. The same as yesterday,0.

11d. A feeling in the chest as if smoke had been inhaled, causing a cough,0.

14d. The distress in the chest relieved somewhat by taking Pulsatilla in repeated doses,0.

Z. T. M.—2d, A.M. Some soreness of the chest; spasmodic cough, expectorating a grayish phlegm in little lumps. Respirations 16. Pain over the region of the lower ribs; they feel sore on pressure,30.

3d. Respirations 16. Soreness under the right mammæ on pressure,30.

5d, P.M. Pleuritic pain in the right side over the liver,30.

7d, 9 A.M. Oppressive shortness of breath; compelled to take long breaths frequently, with occasional pains in the right side of the chest,30.

27d. Considerable pain in the chest between the nipples, with an indescribably hollow feeling there, accompanied by a choking sensation in the throat, materially aggravated by inhaling carburetted hydrogen gas. Shooting pain under the right mammæ,15.

36d. Respirations 20 per minute. Sore bruised feeling under and to the left of the sternum, at the junction of the upper and middle third of the bone, felt on throwing the shoulders up and back. This pain at times extends back to the inferior angle of the scapula and to the shoulder-joint, where there has been for five days a weary aching on raising the arm. The intercostals of the left side, between the sixth, seventh and eighth ribs, are sore to the touch,15.

37d, 9.30 P.M. Sharp shooting pain between the sixth and seventh ribs, at about the junction of the ribs with the cartilages, lasting but a few seconds, recurring again after an interval of half an hour,15.

38d, A.M. The above-named region sore to pressure; shooting pains over the liver frequent, but not severe,15.

W. J. M.—11d. For two evenings a roughness in the larynx, causing a disposition to hem, with a spasmodic dry cough,30.

12d. A constricted sensation about the chest, and feels at times like taking a deep breath, but has no cough,15.

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13d. Slight cough, with grayish or bluish-black expectoration,15.

14d. Some cough and expectoration, of a slate color. The matter expectorated is tough and hard to disengage from the larynx, requiring forcible hemming and hawking,15.

43d, P.M. After supper a dry hacking cough,6.

O. R. S.—10d. The respiratory sounds are not clear. Last night and to-day a disposition to hack and cough, with a little irritation in the throat,0.

11d. A hacking cough without expectoration; most persistent in the forenoon,0.

12d. Several times to-day sharp stitching pains, moderately severe, in both sides of the chest, in the space between the fourth and seventh ribs. Continual irritation behind the sternum, about the lower part of the upper third. The respiratory sounds in the upper half of the chest are heard moderately clear, but those of the lower half are quite dull. There is, however, the usual resonance on percussion all over the chest. Moderate percussion over all the anterior portion of the chest produces pain,0.

14d. Dry cough, causing him to gag, continuing all day, but worse during the forenoon,0.

15d. The same disposition to cough and gag, but not to the same degree as yesterday,0.

16d. Cough as yesterday,0.

17d. Dry cough,0.

18d. Cough worse in the forenoon,0.

19d. The cough dry, and a feeling of dryness down the trachea and into the bronchia. The chest is still sore on the right side on percussion. There has been one turn of the stitching pain through the right side of the chest, about the fifth rib, near the cartilage, reaching back to the scapula, and lasting but for a minute,0. (Medicine done.)

20d. Cough as yesterday,0.

22d. Commenced coughing on waking. The cough is worse in the heat of the room. There is now no pain or soreness in the chest. The respiratory sounds are becoming natural. There has been no cough at night during the proving.

23d. The cough is dry, but not so continuous.

36d. The cough is a little loose, but otherwise about as for the past four weeks. Once or twice per day a little starchy-looking substance is dislodged from a spot about under the fourth rib, a little to the right of the sternum, at which point

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there is a little soreness on pressure. Can take a full breath without feeling pain.

Reproving.

J. G. T.—5d. Has had to-day a quickly passing pain in the anterior part of the chest, below the seventh rib, about two inches from the sternum on each side, but not on both sides at the same time. Felt three times on the left side and twice on the right,0.

6d. The pain in the chest of yesterday has been felt quite frequently (at least twenty times in the past twenty-four hours), but has not been felt at night while asleep,0.

7d. The pains in the chest are not so sharp and do not come so frequently. A feeling of oppression and soreness on inspiration remains in the localities where the pains have been felt,0.

8d. The sharp pains felt before through the chest have not been felt to-day; but a feeling of soreness and oppression is felt in their place during motion or exertion. Taking a full inspiration increases the soreness,0.

9d. The symptoms of the chest are the same as yesterday, with the exception of frequent sighing respiration. He also yawns frequently,0.

10d. The soreness in the chest is still felt on taking a full inspiration. The respiratory sounds are not clear,0.

11d. During the morning he has had a more or less constant feeling of irritation through the bronchial region, accompanied by a slight, dry cough. Tenderness felt on pressure in the supraclavicular region, continuing all day,0.

12d. During the early part of to-day the pain and soreness in the right side of the chest continued (was felt yesterday, but not stated). Since the middle of the afternoon it is not so great. There is soreness on inspiration; and on making a full, deep inspiration, severe pain is felt at times cutting short the inspiration. The cough is about the same as yesterday. The respiratory sounds are clear, except in the lower lobe of the right lung,0.

13d. The lungs are free from pain and soreness. Can take a full inspiration without inconvenience,0.

14d. Coughs moderately, but does not expectorate any. At noon there was no tenderness felt in the chest, but between 2 and 3 P.M. there was a feeling of fulness and oppression through the entire chest, accompanied by a sense of soreness, worse on inspiration, and continuing through the balance of the day and evening, with a short, dry cough, which seems to

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arise from some irritation behind the upper half of the sternum,⁰.

15ᵈ. The chest feels sorer than yesterday, and he has coughed more but has not expectorated any as yet. He has several times through the day had sharp stitching pains of momentary duration in the left side of the chest, immediately below the nipple. The respiratory sounds are very indistinct, except at the upper part of the lungs,⁰.

16ᵈ. The respiratory organs are in about the same condition as yesterday, with a short, dry, hacking cough,⁰.

17ᵈ. The cough is still dry. There is no expectoration. The cough is more severe than at any previous time. The entire chest feels sore on taking an inspiration of any depth whatever. The lungs feel clogged and full. There has been pain all the afternoon on the right side of the chest, between the sixth and seventh ribs, near their connection with the cartilages. The respiratory sounds are indistinct in the lower lobes of the lungs on both sides of the chest,⁰.

18ᵈ. The cough is the same as when last noted. Moderately severe pain on the left side of the chest; severest between the third and fourth ribs, near their connection with the cartilages. The pain is continuous, with every few minutes a severe stitch. Otherwise the respiratory organs are about as yesterday. The cough is about as when last noted,⁰.

20ᵈ. The cough was a little loose for the first time while up during part of the night, but has been a great deal more severe and paroxysmal, lasting longer at a time, and again tight during the day. He has felt sore through the entire chest all day, and has had frequent recurrences of the pain in the left side of the chest before noted,⁰.

21ᵈ. Soreness of the lungs as for some days past. Pain on the left side of the chest, at the junction of the ribs and cartilages,⁰.

23ᵈ. The lungs are still sore, and the pain continues on the left side of the chest as before,⁰.

24ᵈ. The same soreness felt through the chest as recorded above,⁰.

25ᵈ. Has some turns of the same dry cough before noted,⁰.

29ᵈ. The cough is now only noticed after walking or making some exertion requiring an increase of the volume of respiration. There is still a stuffed sensation through the chest, but no pain; merely the soreness on taking a full inspiration. The cough is dry,⁰.

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R. R.—4d. Coughed a little to-day and the voice is a little husky. An oppressed or stuffed sensation is felt from the larynx to the bottom of the sternum all day. He has had pain for the greater part of the day through the anterior part of the upper lobe of the left lung, but no soreness on pressing the walls of the chest over the seat of pain. He can take a full inspiration, but the air causes a disagreeable feeling behind the sternum. Deep inspirations are followed by a cough,0.

7d. The breathing is clear,0.

11d. A stuffed sensation through the chest generally, and more markedly felt behind the sternum, and from the larynx to the epigastrium. More or less continuous dry, hacking cough; worse in the heat of the room; came on about 4 P.M. The stuffed sensation was felt all day. The voice is somewhat husky,0.

12d. Dry, hacking cough, all day; but the chest feels more free,0.

13d. The cough has been less troublesome. The voice is a little husky,0.

24d. The chest is free from oppression and the breathing is natural,0.

Heart.

First Proving.

J. G. T.—2d. Pulse 98,0.

R. R.—Pulse 90,0.

O. R. S.—10d. Pulse 76,0.

11d. Pulse 80 and intermittent (which is not unusual with him),0.

14d. Pulse 88,0.

15d. Pulse 90,0.

7d. After recommencing to take the drug the pulse was natural,0.

J. C. K.—2d. Pulse 72 and full,30.

21d, 7.50 P.M. Pulse 90,0.

22d. Pulse 84,0.

26d, P.M. (2.30). Pulse full and 90,0.

41d. Pulse 85, full and regular,0.

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43d, 9.30 A.M. Pulse 84, full and regular,0.
46d, 9.35 A.M. Pulse 86.

Z. T. M.—2d. Pulse 80,30.
3d. Pulse 86,30.
36d. Pulse 80,15.
38d, 3.30 P.M. Pulse 80 and respiration 17,15.
39d. Pulse 84 and respiration 16,15.
40d. Pulse 96 and respiration 17.

W. J. M.—50d. Pulse 88,6.

Reproving.

O. R. S.—4d. Pulse 66 to 69 and irregular, with from five to seven intermissions per minute (has been a little intermittent before, but is more so than usual now). The symptoms taken at noon.
10d. Pulse 76, soft and rather regular,0.
12d. Pulse 96. Slender at times, and at times full and very irregular,0.
14d. Pulse 95 to 96 all day,0.
15d. Pulse about 100. Slender and intermittent during the early part of the day. This afternoon 80,0.
16d. Pulse 80 and irregular,0.
17d. Pulse 75 and slightly irregular,0.
19d. Pulse 76 and a little irregular,0.
22d. Pulse 80 and irregular, both in volume and beat. The venous trunks are full where seen on the surface,0.
36d. Pulse 96, slender and rather irregular,0.

J. G. T.—8d. Pulse a little irregular, variable in volume and 72 to the minute,0. (The pulse with him is usually 80 to 85.)
9d. Pulse 72, and quite irregular in its beats,0.
10d. Pulse 74 and but slightly irregular,0.
12d. Pulse 76 and rather slender but regular,0.
14d, 6.30 P.M. Pulse 56, full and regular,0.
15d. Pulse 75, regular and full, and on putting the ear to the chest the sounds of the heart are heard distinctly through nearly every part of the chest,0.
17d. Pulse 78, variable in volume but regular in beat, and its sounds so loud and distinct as to prevent hearing clearly the respiratory sounds,0.

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18d. Pulse 86, slender and irregular, can himself feel the beats of the heart through the chest distinctly,0.

20d. Pulse 78, at times slender and at times full, and readily caused to fluctuate by change of position or effort of body,0.

25d. Pulse 82, full and regular, temperature 98⅕° under the tongue,0.

29d. Pulse 72 and rather irregular in volume and beat. The beats of the heart are violent on making any unusual exertion or continuing a usual exertion for any considerable time. He has less strength than when he ceased taking the medicine seven days since,0.

R. R.—7d. Pulse 86 and a little variable in volume but regular in beat,0.

24d. The pulse and beats of the heart natural,0.

Neck.

First Proving.

O. R. S.—6d. The left side of the neck feels stiff and sore,0.

7d. The left side of the neck is stiff and sore,0.

J. C. K.—14d, 11.45 A.M. Stiffness and tenderness in the upper part of the sterno-cleido-mastoideus muscle,4.

41d, 5.10 P.M. Pain all afternoon in the right side of the neck at the bifurcation of the common carotid artery, felt when moving the head in any direction, or when pressing the point named, but not noticed when swallowing,4.

W. J. M.—48d. The neck feels stiff,6.

Back.

First Proving.

O. R. S.—14d. Have an aching low down in my back, across the sacrum. This symptom has been more or less constant, during the proving,0.

W. J. M.—12d. But little soreness in the back,15.
50d. Dull pain in the lumbar region,6.

M. J. C.—13d. Dull aching in the kidneys,12.

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Reproving.

J. G. T.—11[d]. Pain between the scapulæ quite severe, causing an inclination of the shoulders forward for relief. It is felt at every inspiration, the deeper the inspiration the severer the pain, lasting from 8 till 9 A.M., and gradually passing around below the point of the right scapula to a position on the right side of the chest below the ninth and across the tenth ribs. The part named is very sore on taking a full breath,°.

19[d]. Began to feel a soreness commencing at the lower cervical vertebra, and extending as far down as the points of and under both scapulæ. The sensation was first felt on moving the arms and shoulders on getting out of the bed at night. On taking more than the usual volume of air into the lungs a stitching pain is felt in the space between the scapulæ, which continues until 10 P.M.,°.

Extremities.

First Proving.

J. G. T.—4[d]. The lower extremities feel heavy,°.

6[d]. On commencing to move pain and soreness in the right knee-joint,°.

7[d]. The extensor muscles of the thigh feel sore,°.

R. R.—Pain in the left hip-joint and along the thigh in the course of the crural nerve, feeling as if the part had been bruised; worst when commencing to move the part but better from continuing to move it. Pain in the left iliac region, hip and knee-joint, with an occasional twinge in the right knee. Pain in the left inguinal region.

5[d]. Pain in the anterior portion of the thigh and limb gone but feel tired all over. Pain and soreness in the posterior part of both thighs in the course of the sciatic nerve; felt most when walking,°.

6[d]. The pain in the course of the sciatic nerve is not so marked as yesterday, but there is a feeling of weakness in the sacral region,°.

7[d]. The pains in the lower extremities are not felt,°.

9[d]. Pain in both knee-joints. Pain in the left hip-joint when walking.

10[d]. Pain in the left hip-joint and inner aspect of the thigh,°.

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O. R. S.—11[d]. Aching in all the limbs,[0].

14[d]. Got up this morning feeling tired and bruised-like in body and limbs,[0].

J. C. K.—3[d]. Pain in the left knee-joint before rising in the morning. Sharp pain in the ilium after rising, 3.55 P.M. Bruised sensation externally over the metatarso-phalangeal articulations of small toe,[30].

9[d], 9.45 A.M. Sharp pain in the right little finger,[15].

21[d]. Aching in the thighs,[0].

22[d]. Rheumatic pains in the limbs, especially the lower, running from the hip to the toes, and worse when at rest and better when moving. These pains remain a few moments in muscles supplied by the sciatic nerve. Pain in the second phalangeal joints of the fingers. The pains are most severe in the flexor muscles of the thighs and legs,[0].

23[d]. The lower limbs still ache. The pain is in the flexor muscles,[0].

24[d], 8.40 P.M. A severe pain shot through the metatarso-phalangeal articulations of the fourth and small toes of the right foot, running out to the end of the toes, causing him to limp. The pain resembles that of a sprain, but I have not received a sprain or injury of the foot in any way,[0].

25[d]. Had before rising a severe cramplike pain in the lower part of the popliteal space at the junction of the heads of the gastrocnemius muscle, and running down the muscle a short distance and gradually subsiding during the morning. The pain in the foot is subsiding, and is now (8.25 P.M.) almost gone. Have had pain all day in the flexor muscles of the leg during motion, as if bruised,[0].

36[d]. A corn has appeared on the bottom of the right small toe,[0].

38[d], 9 A.M. Feel neuralgic pains from the axilla to the small finger, along the inner part of the arm, forearm and hand,[0].

43[d], 9.30 A.M. Have some pain in the left leg, which commenced soon after rising in the morning, in the outer part of the knee-joint, extending to the tarsus, and is felt over all the aspects of the leg (anterior, posterior and lateral). It is most severe just below the popliteal space at the junction of the heads of the gastrocnemius muscle. Feel sore all over but the left leg feels the worst. 8.50 P.M. The pains in the legs have disappeared,[0].

44[d], 4.50 P.M. The pains in the knees and legs came on

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about three P.M., just as they were before but worse in the left hip-joint,⁰.

45ᵈ, 7.05 P.M. Have neuralgic pains in the knees and legs as described before,⁰.

46ᵈ, 9.35 A.M. Severe pain in the left knee-joint. The muscles on the anterior part of the thigh are painful when walking and tender when touched. Pain from the tips of the fourth and fifth fingers to the elbow of the left arm. Pain in the left hip-joint. The pains wander about, showing a preference for the joints and for the left side, but not restricted to that side,⁰.

48ᵈ. A corn has appeared on the bottom of each phalanx of each small toe. Never had any before, except one which left in a few days. Am wearing the same shoes that I have been wearing for three months past. Have felt no friction till the formation was completed. They are both very painful under pressure; cannot think of any cause likely to produce them,⁰.

51ᵈ, 11.30 A. M. The corns are extremely painful,⁰.

53ᵈ. The corns on the under side of the small toes are disappearing,⁰.

Z. T. M.—2ᵈ. Rheumatic aching in the right arm, principally in the shoulder and wrist,[30].

3ᵈ. Rheumatic pains shooting from the acetabulum down to the knee, lasting but a few seconds, worse on moving about,[30].

27ᵈ. Rheumatic pain in the right forefinger,[15].

36ᵈ. For the past five days a weary aching on raising the arm. The shoulder-joint cracks when elevating or depressing the arm. The pain felt in the shoulder passes down the course of the median nerve to the finger end. An aching is felt through the whole left arm. The flexor muscles of the left forearm on holding anything in the hand with the arm flexed become stiff. The aching is worse from pressure and motion. Dull rheumatic feeling extending from the right knee to the ankle with cracking of the knee-joint when flexed or extended. The metatarso-phalangeal bone of the right index finger is sore on pressure, so much so as to make it painful to hold the pencil for any time; was never troubled this way before taking the medicine,[15].

38ᵈ, P.M. During the morning had an aching pain in the flexor muscles of the left forearm near their insertion at the elbow while riding,[15].

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W. J. M.—41[d]. Nervous twitching in the middle and index finger of the left hand.

50.[d] The thighs are sore and the joints feel stiff. The right knee-joint cracked frequently when flexing the leg at night.

M. J. C.—13.[d] Stitching in the tibia when walking,[30].

15[d]. Stitching in the tibia when walking. Occasional little flying pains in the fingers, palms of the hands and forearm,[12].

O. R. S.—12[d]. An aching for a short time about midday in the anterior and inner part of the left thigh. Dull aching across the sacrum and down the outer sides of the thighs as far as the knees, the whole of the thighs partaking of the feeling,[0].

15[d]. Weary aching across the sacrum and down the limbs the same as yesterday till ten in the forenoon. From that time was walking nearly all day and felt better while walking, but on sitting down the same feeling returned. Sharp pain on moving below the trochanter on the left side, reaching through to the left spermatic cord, which feels a little sore to the touch. The pain came on twice suddenly, lasted but a few moments, and disappeared, returning on crossing the thighs,[0].

16[d]. The pain under the trochanter felt occasionally through the day as a moderate aching,[20].

20[d]. Soreness on walking or stooping, first felt on getting out of bed in the morning; was very severe on pressure on each side of the sacrum on a line with the acetabulum, and worst on the left side. When walking for some time the pain was easier. Pain and soreness on the inner side of the left thigh from the inguinal region to the inner edge of the popliteal space. Felt also in a slight degree in the other thigh,[0].

22[d]. But little of the soreness along the inner side of the left thigh now felt,[0].

Reproving.

J. G. T.—12[d]. Dull pain for half an hour on the inside of the popliteal space of the right leg, came on about noon while lying, and was accompanied by a disagreeable feeling through the muscular part of the posterior portion of the leg, which passed off while walking,[0].

13[d], 7 P.M. Pain in the popliteal space while walking about, lasting about five minutes, and not affecting this time the posterior part of the leg, followed very soon by cramp in the plantar surface of the right foot between the os calcis and

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metatarsal bones, lasting at intervals the balance of the evening (had felt something like it when swimming),°.

15d. A weary feeling from the crest of the ilium down the outer side of both thighs to the knees as if he had been taking too much exercise. This began to be felt this afternoon,°.

16d, 3 P.M. An aching commenced in the anterior part of the thigh, extending to the leg and ankle in front, beginning slightly, and growing worse till a restless uneasy feeling was produced which lasted till he retired for the night at 9.30 P.M., but did not prevent sleep and was gone in the morning,°.

17d. About midafternoon had the pain again in the popliteal space of the right leg for about an hour,°.

18d. Has had frequently recurring sharp stitches to-day along the palmar surface of the fourth metacarpal bone, between the carpal and phalangeal bones, articulating with that bone. The same in both hands, but not in both hands at the same time,°.

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(HYDRO-DISODIC ARSENIATE.)

BY THE

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OF ALLEGHANY COUNTY, PA.

THE PROVER'S RECORD ARRANGED BY

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